

# Tri-County Behavioral Healthcare Board of Trustees Meeting

May 25, 2017



Notice is hereby given that a regular meeting of the Board of Trustees of Tri-County Behavioral Healthcare will be held on Thursday, May 25, 2017. The Business Committee will convene at 9:00 a.m., the Program Committee will convene at 9:30 a.m. and the Board meeting will convene at 10:00 a.m. at 233 Sgt. Ed Holcomb Blvd S, Conroe, Texas. The public is invited to attend and offer comments to the Board of Trustees between 10:00 a.m. and 10:05 a.m.

## AGENDA

- I. Organizational Items**
  - A. Chair Calls Meeting to Order
  - B. Public Comment
  - C. Quorum
  - D. Review & Act on Requests for Excused Absence
- II. Approve Minutes - April 27, 2017**
- III. Program Presentation - Longevity Recognition**
- IV. Program Presentation - Pharmacology Changes**
- V. Executive Director's Report - Evan Roberson**
  - A. HCS/TxHML Provider Audit
  - B. 1115 Updates
  - C. Legislative Updates
- VI. Chief Financial Officer's Report - Tabatha Abbott for Millie McDuffey**
  - A. FY 2018 Budget Process
  - B. County Annual Funding Request
  - C. Fixed Asset Inventory
- VII. Program Committee**
  - Information Items
    - A. Community Resources Report..... *Pages 9-11*
    - B. Consumer Services Reports for April 2017..... *Pages 12-13*
    - C. Program Updates..... *Pages 14-17*
    - D. RPNAC's FY2017 Transportation Recommendations..... *Pages 18-46*
- VIII. Executive Committee**
  - Action Items
    - A. Approve Revisions to General Administration Board Policies..... *Pages 47-48*
  - Information Items
    - B. Personnel Reports for April 2017..... *Pages 49-51*
    - C. Texas Council Risk Management Fund Claims Summary as of April 2017..... *Pages 52-53*
    - D. Texas Council Quarterly Board Meeting Update..... *Pages 54*
- IX. Business Committee**
  - Action Items
    - A. Approve April 2017 Financial Statements..... *Pages 55-67*
    - B. Approve Replacement of Air Conditioning Software System at the PETC..... *Pages 68-69*
    - C. Approve FY 2018-2019 HHSC IDD Authority Services Performance Contract..... *Pages 70*
    - D. Consider Selection of FY 2017 Auditor..... *Pages 71*

Information Items

E. Board of Trustees Unit Financial Statement for April 2017 ..... *Pages 72-73*

**X. Executive Session in Compliance with Texas Government Code Section 551.071, Consultation with Attorney.**

Posted By:

Ava Green  
Executive Assistant

# Tri-County Behavioral Healthcare

P.O. Box 3067  
Conroe, TX 77305

## BOARD OF TRUSTEES MEETING

April 27, 2017

### Board Members Present:

Patti Atkins  
Sharon Walker  
Tracy Sorensen  
Janet Qureshi  
Gail Page  
Richard Duren  
Morris Johnson  
Jacob Paschal

### Board Members Absent:

### Tri-County Staff Present:

Evan Roberson, Executive Director  
Millie McDuffey, Chief Financial Officer  
Kathy Foster, Director of IDD Provider Services  
Tanya Bryant, Director of Quality Management and Support  
Kenneth Barfield, Director of Management Information Systems  
Amy Foerster, Chief Compliance Officer  
Kelly Shropshire, Director of IDD Authority Services  
Ava Green, Executive Assistant  
Mary Lou Flynn-Dupart, Legal Counsel  
Robyn Gould, Training Coordinator

### Guests:

Mike Duncum - WhiteStone Realty

**Call to Order:** Board Chair, Patti Atkins, called the meeting to order at 10:02 a.m. at 233 Sgt. Ed Holcomb Blvd. S, Conroe, TX.

**Public Comment:** There were no public comments.

**Quorum:** There being eight (8) members present, a quorum was established.

### Resolution #04-17-01

**Motion Made By:** Morris Johnson

**Seconded By:** Sharon Walker, with affirmative votes by Tracy Sorensen, Jacob Paschal, Richard Duren, Gail Page, Janet Qureshi and Patti Atkins that it be...

### Resolved:

That the Board approve the minutes of the February 23, 2017 meeting of the Board of Trustees.

**Executive Director's Report:**

The Executive Director's report is on file.

**Chief Financial Officer's Report:**

The Chief Financial Officer's report is on file.

**PROGRAM COMMITTEE:**

The Community Resources Report was reviewed for information purposes only.

The Consumer Services Report for February 2017 and March 2017 was reviewed for information purposes only.

The Program Updates were reviewed for information purposes only.

The FY 2017 Goals and Objectives Progress Report was reviewed for information purposes only.

The 2<sup>nd</sup> Quarter FY 2017 Corporate Compliance and Quality Management Report was reviewed for information purposes only.

The 3<sup>rd</sup> Quarter FY 2017 Corporate Compliance Training was reviewed for information purposes only.

The Medicaid 1115 Transformation Waiver Project Status Report was reviewed for information purposes only.

Program Presentation

Robyn Gould, Training Coordinator, conducted the Annual Board and Management Team Training.

Board Chair, Patti Atkins, suspended the agenda to move to Business Committee Information Item L, Building Consolidation and Real Estate Sale Update. Mike Duncum with WhiteStone Realty presented the report regarding the Conroe Building Consolidation Update, .85 Acre Purchase behind the new Conroe Facility and status on recent sales of previous Conroe Facilities.

**EXECUTIVE COMMITTEE:**

**Resolution #04-17-02**

**Motion Made By:** Sharon Walker

**Seconded By:** Janet Qureshi, with affirmative votes by Patti Atkins, Morris Johnson, Gail Page, Jacob Paschal, Tracy Sorensen and Richard Duren that it be...

**Resolved:**

That the Board approve revisions of General Administration Board Policies C.30, D.1 and D.5.

The Personnel Reports for February 2017 and March 2017 were reviewed for information purposes only.

Cont.



The Texas Council Risk Management Fund Claims Summary for February 2017 and March 2017 were reviewed for information purposes only.

**BUSINESS COMMITTEE:**

**Resolution #04-17-03**

**Motion Made By:** Morris Johnson

**Seconded By:** Janet Qureshi, with affirmative votes by Patti Atkins, Gail Page, Sharon Walker, Tracy Sorensen, Jacob Paschal and Richard Duren that it be...

**Resolved:**

That the Board approve the February 2017 Financial Statements.

**Resolution #04-17-04**

**Motion Made By:** Morris Johnson

**Seconded By:** Jacob Paschal, with affirmative votes by Patti Atkins, Sharon Walker, Gail Page, Tracy Sorensen, Janet Qureshi and Richard Duren that it be...

**Resolved:**

That the Board approve the March 2017 Financial Statements.

**Resolution #04-17-05**

**Motion Made By:** Morris Johnson

**Seconded By:** Gail Page, with affirmative votes by Patti Atkins, Sharon Walker, Jacob Paschal, Tracy Sorensen, Janet Qureshi and Richard Duren that it be...

**Resolved:**

That the Board approve the FY 2017 Budget Revision.

**Resolution #04-17-06**

**Motion Made By:** Morris Johnson

**Seconded By:** Gail Page, with affirmative votes by Patti Atkins, Richard Duren, Janet Qureshi, Tracy Sorensen, Jacob Paschal and Sharon Walker that it be...

**Resolved:**

That the Board approve the ratification of the sale of excess furniture.

**Resolution #04-17-07**

**Motion Made By:** Morris Johnson

**Seconded By:** Janet Qureshi, with affirmative votes by Patti Atkins, Richard Duren, Tracy Sorensen, Jacob Paschal, Gail Page and Sharon Walker that it be...

**Resolved:**

That the Board approve the purchase of a Van for the Cleveland IDD Program not to exceed \$30,000.00 based upon immediate availability.

**Resolution #04-17-08**

**Motion Made By:** Morris Johnson

**Seconded By:** Richard Duren, with affirmative votes by Patti Atkins, Tracy Sorensen, Jacob Paschal, Gail Page, Janet Qureshi and Sharon Walker that it be...

**Resolved:**

That the Board approve the Ratification of HHSC/DADS Contract Number 539-16-0073-00001, Amendment #3.

**Resolution #04-17-09**

**Motion Made By:** Morris Johnson

**Seconded By:** Jacob Paschal, with affirmative votes by Patti Atkins, Tracy Sorensen, Richard Duren, Gail Page, Janet Qureshi and Sharon Walker that it be...

**Resolved:**

That the Board approve the Mental Health First Aid Grant Contract Number 2017-049421-001, Amendment #1.

**Resolution #04-17-10**

**Motion Made By:** Morris Johnson

**Seconded By:** Jacob Paschal, with affirmative votes by Patti Atkins, Tracy Sorensen, Richard Duren, Gail Page, Janet Qureshi and Sharon Walker that it be...

**Resolved:**

That the Board approve the YES Pre-Engagement Services Contract – YESPE Number 2017-049547-001, Amendment #1.

The 2<sup>nd</sup> Quarter FY 2017 Investment Report was reviewed for information purposes only.

The Board of Trustees Unit Financial Statement for February 2017 and March 2017 was reviewed for information purposes only.

The Cleveland Supported Housing, Inc. Quarterly Update was reviewed for information purposes only.

**There was no need for Executive Session.**

**The regular meeting of the Board of Trustees adjourned at 11:46 a.m.**

**Adjournment:**

[Redacted Signature]

Patti Atkins  
Chair

\_\_\_\_\_  
Date

**Attest:**

[Redacted Signature]

Sharon Walker  
Secretary

\_\_\_\_\_  
Date





## Executive Director's Report

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*May 25, 2017*

### **Announcements**

- As a reminder, we will not have a June Board meeting because of the Annual Community Center conference June 28-30 in Galveston. Our next Board meeting will be on July 27, 2017.
- The Board has chosen to have the Management Team update the Center's Strategic Plan this summer rather than having a scheduled Board Strategic Planning meeting.
- The annual East Texas Behavioral Health Network (ETBHN) Board Retreat is scheduled for October 5-6, 2017 at Moody Gardens in Galveston. The retreat provides the opportunity for Board members of our eleven (11) member centers to visit about Center operations. The agenda is still being developed, but we know that there will be a series of Texas Council updates and discussions related to the 85<sup>th</sup> Legislative Session. If you are interested in attending, please contact Ava.
- We received word on Friday last week that our Health and Human Services (Mental Health) Quality Management Audit would be June 27-30, 2017. This audit occurs every 3-4 years and is very comprehensive. I have requested a new date since this overlaps the Community Center Conference, but have not heard back from the Department yet. If it is not delayed, some of the staff, including me, may have to miss all or part the conference. We will provide the results of this audit at the July Board meeting.
- The Genoa Pharmacy had their Grand Opening Ceremony on Tuesday the 23rd. It was an opportunity for them to celebrate their 13th Texas site and visit with community members, staff and clients about the services they offer.

We continue to review services that the pharmacy offers and have started to use them to fill prescriptions that are paid for by the Center after determining that their cost was about half of the pharmacy we were using. We are currently working on plans to use Genoa to fill medications for the Psychiatric Emergency Treatment Center (PETC) among other services they can offer.

- Mike will not be providing an update this month, so I wanted to relay that we are negotiating a contract on the William E. Hall building on North Thompson. We have agreed to the price for the facility, but are still negotiating contract terms.

- My presentation to the City of Conroe regarding the bus stop at Sgt. Ed Holcomb was postponed until Wednesday, May 31<sup>st</sup>.
- I wanted to let you know that we were able to purchase a 15 passenger van from Martin Chevrolet in Cleveland to meet the needs of our Cleveland IDD Lifeskills program. We were unable to find a Ford because there will be a model change this year and supply is running low.
- As you know, Millie is on vacation and will not be returning to work until Monday June 5<sup>th</sup>. I am planning to leave for vacation on Thursday, June 1 and will not return until June 15<sup>th</sup>.
- The birthday cakes this month are in honor of Mr. Johnson who celebrated a birthday on May 2<sup>nd</sup> and Mr. Duren whose birthday was May 15<sup>th</sup>.

### **HCS/TxHmL Provider Audit**

We anticipate that our Annual Home and Community-based Services (HCS) and Texas Home Living (TxHmL) provider audit (Kathy Foster's area) will occur between now and the July Board meeting. The audit usually occurs in June, but has to occur by the end of July to renew our provider agreements. As you may remember, Kathy has done very well on these audits for many years, often scoring zero deficiencies. Although she and her staff work very hard to score well, the audit standards and auditors change each year and the audit is always challenging. We will provide the results of this audit at the July Board meeting.

### **1115 Funding Protocol changes**

The Centers for Medicare and Medicaid have not yet approved the Texas DY7-8 Program Funding and Mechanics Protocol (PFM). However, the Texas Health and Human Services Commission (HHSC) has outlined several changes in their proposed draft protocol. HHSC has issued draft minimum point thresholds for providers and Tri-County will have to earn twelve (12) points to earn the 65% of our funding tied to outcome performance. A series of outcomes must be measured for our system of care; however, at this point we do not know what the value of the individual outcome measures will be or how many outcomes we will have to complete to meet this threshold. The system of care has been defined as persons with a face to face 'behavioral health' contact in the measurement period.

On May 18<sup>th</sup> and 19<sup>th</sup>, the Texas Council facilitated a meeting in Austin to discuss potential outcome measures and to provide staff with the opportunity to ask questions about a subset of the measure that is available to Centers. The measurement period begins on June 1, 2017, so staff will be working to quickly implement some of these measures in our electronic medical record.

## **Legislative Updates**

In a flurry of week end activity, the State Budget Conference Committee met Saturday, May 20<sup>th</sup> to consider and adopt the Conference Budget. There are still details to be known and better understood, but attached is information the Texas Council provided about a few select items related to Texas Council Legislative Priorities.

From the Texas Council: “At this point, the budget is reaching final stages of the decision making process and will soon make its way to the respective chambers for final passage. We will provide updated analysis when the final budget is passed in both chambers and signed by the Governor.”

In addition, House Bill 1917 by Raymond (Senate Sponsor Schwertner) passed the Senate on Sunday May 23rd. HB 1917 extends the date by which MCOs must continue using the single Medicaid formulary from August 31, 2018 to August 31, 2023. The single Medicaid formulary requires all Managed Care Organizations (MCOs) to utilize the same medication formulary for Medicaid Managed Care products. While this is likely a good thing for all Medicaid MCO members, it is especially important for persons with severe and persistent mental illness who often struggle to find a medication that is effective for their disorder. In addition, most Center staff believes that the Pharmacy Patient Assistance Programs (PAP) would have been negatively impacted by a change from the current single Medicaid formulary. This bill was vigorously opposed by the Texas Association of Health Plans and I would like to ask you to send a note to Senator Schwertner, who represents Walker County, to thank him for his support.

Certainly, there will be more to come from the 85<sup>th</sup> Legislative Session. There is still the possibility of a Special Session if tax reform doesn't pass in the regular session.



## Preliminary Review of Conference Committee Decisions May 22, 2017

### Legislative Priorities: Conference Budget (Select Items)

#### Intellectual and Developmental Disability Services

- Adds \$6 million (biennium) to IDD Crisis Services to maintain 2017 funding level for the FY18/19 biennium.
- Assumes **HCS and TxHmL CFC PAS/HAB rate cuts**, exempting Consumer Directed Services from the cut.
- Adds \$20.2 m in GR and \$26.9 in federal funds for the biennium to support **additional HCS waiver slots**
  - Promoting Independence**
    - 325 for persons moving out of large and medium ICFs
    - 110 for children aging out of foster care
  - Preadmission Screening and Resident Review (PASRR)**
    - 150 for persons with ID moving from nursing facilities
    - 150 for persons with ID diverted from nursing facility admissions
- New Rider directs HHSC to submit a **report on the cost effectiveness of converting Community ICFs to HCS** waiver placements.
- Reduces 1915 (c) waiver funding for FY18/19 biennium, maintaining lower estimate of August 2017 and forecasting a continued decline in Texas Home Living.

#### Early Childhood Intervention Services

- Impacting, but not specific to ECI services, adds **funds to restore approximately 25% of the reductions** made to reimbursement rates for acute care therapy services during the 2016-17 biennium,
  - Includes funds to phase-in and **delay the rate reduction for therapy assistants** until December 1, 2017;
  - Pays therapy assistants at 85% of rate paid to licensed therapist until September 1, 2018;

- Reduces therapy assistants to 70% beginning September 1, 2018.
- Adds \$9.5 million (biennium – All Funds) as **new forecast adjustment** (agency has been contacted and is evaluating funding implications).

## Mental Health, Substance Use, Criminal Justice & Veterans Services

### Outpatient Treatment, Homelessness & Substance Use Services

- New rider directs \$62.6 million (biennium) in added funds for MH adult & children's services to increase access to Community MH Services by **eliminating waitlists, increasing capacity across all local service areas to avoid future waitlists, addressing population growth, and increasing equity** in funding allocations to LMHAs & LBHAs. We will distribute the allocation table when it is released.
- New Rider adds \$3.4 million (All Funds/Biennium) for enactment of HB 1486 or similar legislation relating to **peer specialists and peer services** in the Medicaid program.
- New Rider adds \$2 million (2018) to establish a grant program for expanding LMHA or other non-profit entities provision of **TCM and MH Rehabilitative services for high-needs children in foster care services.**
- New rider adds \$30 million (biennium) for funding **local collaborative matching grants**, contingent upon passage of HB 13 (Price) or similar legislation.
- Rider adds \$871,348 each year for **recovery focused clubhouses at 2017 funding levels and \$3.9 m per year for relinquishment prevention slots**, including \$1.4 m to fund **additional relinquishment slots** about fiscal year 2017 service levels.
- Existing Rider directing \$25 million (biennium) for **Healthy Community Collaboratives** is amended to permit use of \$10 million of these funds for **rural areas**.

### Inpatient Treatment

- **Adds \$300 million (biennium)** and new Rider directs HHSC to develop and submit a comprehensive inpatient mental health plan and to seek approval to expend funds appropriated for **purpose of new construction of state hospitals.**
- New Rider authorizes, contingent on appropriation of funds for repair and replacement of state hospitals, improving State Hospital facilities, and other state facility needs, **HHSC to partner with public or private entities**, including Health Related institutions, other neuropsychiatric care institutions, and other health care providers in the catchment area of each state hospital, **to develop a master plan for the design of neuropsychiatric healthcare delivery systems** in the area served by each facility.



- Adds \$24.8 million (biennium) to maintain FY 2017 mental health state hospital service levels.
- Adds \$10.3 million (biennium) to increase maximum security bed capacity by 24 beds at North Texas State Hospital – Vernon campus.
- Adds \$160 million (biennium) in Economic Stabilization Funds (Rainy Day) for deferred maintenance and facility needs at state hospitals and SSLCs.
- Adds \$3.2 million (biennium) to **increase contracted rates for community and private psychiatric hospital beds.**
- Adds \$10 million (biennium) to maintain level funding for FY 2017 purchased psychiatric hospital beds.
- Adds \$20.7 million (biennium) to purchase additional community psychiatric hospital beds.

#### **Criminal Justice**

- New rider adds \$37.5 million (biennium) for funding jail diversion matching grants, contingent upon passage of HB 12 (Price) or similar legislation, such as SB 292 (Huffman).
- New Rider in Article V (Criminal Justice) directs TDCJ to use \$743,000 GR (biennium) to extend prescriptions for released offenders to 30 days, requires emphasis on mental health and medical issues impacted by a lapse.
- Amends existing 3 in Article IV (Judiciary) to add \$262,000 GR for the biennium to contract with statewide professional associations and other entities whose purpose includes providing judicial education services to provide training on indigent defendants and mental health. And \$413,000 for the biennium to provide education for judges and court personnel regarding bail, fines, fees, requests for community services, jail commitments, time credits, development of municipal court mentor program for new judges, webinars on legislative reform relating to bail, jail commitments, alternate sentencing, etc.
- Allocates \$1 million (biennium) for Mental Health Peer Support Re-entry Pilot

#### **Veterans**

- New Rider directs a study with UT Health Science Center at Houston on the benefits of providing **integrated care to veterans with post-traumatic stress disorder.**
- Existing Rider directing \$5 million (each year of the biennium) is amended to expand access to licensed mental health professionals for volunteer coordinators and peers.

- Base bill includes an additional \$20 million to continue Veterans and Family Grant Program (SB 55, 84<sup>th</sup> session) for FY18-19 biennium.

### Regulatory & Other Such Things

- Existing Mental Health Outcomes and Accountability Rider, directing **10% withhold, is amended to strike “withhold” and insert “at risk”**, meaning funds will be allocated prospectively and subject to recoupment for failure to achieve outcomes targets set by HHSC.
- New Rider directs HHSC to develop and procure a **managed care program to serve individuals with serious mental illness**, and requires HHSC to provide a report if the agency does not choose to procure for the managed care program.
- New Rider requires **HHSC to collaborate with a third-party entity** to improve the efficiency of behavioral health care delivery.
- New Rider requires HHSC to submit a plan to establish a centralized **Medicaid provider enrollment portal**. Contingent upon LBB and Governor approval, HHSC is required to implement the plan and would be provided capital authority to expend \$30.1 million in All Funds.
- New Rider directs a reduction of the **Managed Care Risk Margin** from 2% to 1.5% and commensurate reduction in Medicaid and CHIP general revenue and federal funds.
- New Rider directs HHSC to utilize funds appropriated to allocate no more than 2 FTEs to create an **Ombudsman for behavioral health** access to care, contingent on enactment of HB 10 (Price) relating to access to and benefits for mental health conditions and substance use disorders (known as “Parity Bill”).
- New Rider directs HHSC to pursue federal funds for screening and treatment of **postpartum depression** pursuant to the 21<sup>st</sup> Century Cures Act.
- New Rider directs HHSC to **study the workforce** at the 10 state hospitals and provide recommendations to reduce turnover and vacancy rates to the LBB and the Governor by August 31, 2018.
- New Rider directs HHSC to **educate and inform the public that pregnant women with dependent children are a priority population** of the federal Substance Abuse Prevention and Treatment Block Grant.
- New Rider directs HHSC to ensure managed care organizations maintain an **adequate network of providers, especially with respect to community attendants**.

- New Rider authorizes HHSC to enter into **contracts with state universities to provide services at the state hospitals.**
- New Rider directs HHSC to conduct a study (with LBB) on the **feasibility of developing enhanced criminal background check standards** for individuals who work with children and the elderly as an employee of an entity that contracts with HHSC.
- Existing rider amended to **require community collaboratives to present on project implementation and outcomes to the statewide behavioral health coordinating council.**
- New Rider directs HHSC to **report quarterly on services provided at behavioral health authorities serving the former NorthSTAR area.**
- New Rider directs HHSC to **evaluate and review Medicaid managed care processes and contracts.**
- New Special Provision directs approximately \$450 million (biennium) reduction in GR from Article II agencies for **contract cost containment.**
- New Special Provision directs HHSC to **review case management services in collaboration with DFPS, DSHS, and managed care organizations,** and report by May 1, 2018 on opportunities to streamline services, clarify responsibility, and reduce duplicative efforts.

## **CHIEF FINANCIAL OFFICER'S REPORT**

### **May 25, 2017**

**FY 2018 Budget Process** – We sent out the FY 2018 budget information for managers to prepare their preliminary budgets. Managers have until June 16<sup>th</sup> to submit their estimates. Over the next couple of weeks, managers will be meeting with fiscal staff if they have any questions or concerns pertaining to their cost centers. After they have submitted the preliminary budgets, we will consolidate them into the agency-wide budget and determine areas that need adjusting by comparing it to the current center trends. We should be close to a final budget by the July Board meeting. However, budgets may need adjusting depending on any changes based on allocations from HHSC.

**County Annual Funding Request** – We submitted the funding request to Montgomery County. We requested an increase of \$250,000 as potential County Match for funding that may be available as a part of House Bill 12 or similar legislation related to programs for persons with mental illness who interact with the criminal justice system. This request is subject to further conversations between Tri-County Behavioral Healthcare, Montgomery County and the Montgomery County Hospital District.

We have not seen a request yet from Walker County, but are anticipating it to arrive in the next couple of weeks.

We should hear back from the County offices in early summer regarding budget hearings.

**Fixed Asset Inventory** – The fixed asset inventory process has started. Every two years, we conduct a complete inventory count and this is the non-complete year. Since the locations in Montgomery County have consolidated, we will be doing a complete inventory in this county. We will also be spot checking other locations and any programs that may have moved in the outlying areas. Both complete and non-complete inventory counts are very labor-intensive, so we ask the building coordinators to assist with the actual count at each location.



<b>Agenda Item:</b> Community Resources Report  <b>Committee:</b> Program	<b>Board Meeting Date:</b>  May 25, 2017
<b>Background Information:</b>  None	
<b>Supporting Documentation:</b>  Community Resources Report	
<b>Recommended Action:</b>  <b>For Information Only</b>	



# Community Resources Report

## April 28, 2017 – May 25, 2017

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### Volunteer Hours:

Location	April
Conroe	45.5
Cleveland	0
Liberty	13.5
Huntsville	201.5
<b>Total</b>	<b>260.5</b>

### COMMUNITY ACTIVITIES:

4/28/17	The Council on Recovery Annual Spring Luncheon	Houston
4/28/17	Walker County Juvenile Justice Meeting	Huntsville
4/28/17	United Way Executive's Meeting	Houston
5/1/17	Veteran 101 Class	Conroe
5/1/17	Veteran Lunch and Learn with Tri-County Staff	Conroe
5/1/17	Homeless Coalition Board Meeting	Conroe
5/1/17	Conroe ISD Mentor Luncheon	Conroe
5/2/17	Montgomery County Area Business Women's Breakfast	The Woodlands
5/3/17	Training with Law Enforcement Management Institute of Texas Staff (LEMIT) for Trauma Affected Veterans TCOLE 4067	Huntsville
5/3/17	Conroe Noon Lions Club Luncheon	Conroe
5/3/17	Quarterly Multidisciplinary Behavioral Health Team Meeting – Huntsville Memorial Hospital	Huntsville
5/3/17	Sam Houston State Job Fair	Huntsville
5/4/17	Montgomery County Business Women's Breakfast	Conroe
5/4/17	Cleveland Chamber of Commerce Luncheon	Cleveland
5/8/17	Conroe ISD Mentor Luncheon	Conroe
5/8/17	Marketing Meeting with the Cheyenne Center for Chemical Dependency	Houston
5/9/17	Magnolia Parkway Chamber Networking Breakfast	Magnolia
5/10/17	Veterans Treatment Court	Conroe
5/10/17	Walker County Child Fatality Review Team	Huntsville
5/10/17	Conroe Noon Lions Club Luncheon	Conroe
5/10/17	Liberty County Community Resource Coordination Group	Liberty
5/11/17	Montgomery County Child Fatality Review Team	Conroe
5/11/17	Huntsville Chamber of Commerce Breakfast	Huntsville
5/11/17	Cleveland Chamber of Commerce Luncheon	Cleveland
5/11/17	7 <sup>th</sup> Annual Tastefest Conroe	Conroe
5/12/17	Montgomery County Youth Services Training Meeting	Conroe
5/13/17	Marriage Management Workshop	Conroe
5/15/17	Planning Meeting for Veterans Resource Fair	Liberty

5/15/17	Conroe ISD Mentor Luncheon	Conroe
5/16/17	Montgomery County Community Resource Coordination Group	Conroe
5/16/17	Liberty County EMS Meeting	Liberty
5/17/17	Henry's Home Veteran's Service Organization (VSO) Meet and Greet	Conroe
5/18/17	Huntsville Veterans Affairs Advisory Board (VAAB) Meeting	Huntsville
5/18/17	Homeless Coalition Meeting	Conroe
5/22/17	Military Veteran Peer Network (MVPN) Therapeutic Retreat	Rising Star
5/22/17	Conroe ISD Mentor Luncheon	Conroe
5/23/17	United Way of Greater Houston Funding Meeting	The Woodlands
5/23/17	Montgomery County Area Business Women's Luncheon	Conroe
5/23/17	United Way – 2017 Funding Conference	The Woodlands
5/24/17	Veterans Treatment Court	Conroe
5/24/17	Conroe Noon Lions Club Luncheon	Conroe
5/25/17	Liberty County Child Fatality Review Team	Liberty
5/25/17	Conroe Noon Lions Club Golf Tournament	Panorama
5/25/17	The Woodlands Church Career Fair	The Woodlands
5/25/17	Conroe ISD Mentor Appreciation Luncheon	Conroe

### **UPCOMING ACTIVITIES:**

5/26/17	Walker County Juvenile Justice Meeting	Huntsville
5/31/17	Conroe Noon Lions Club Luncheon	Conroe
6/1/17	Cleveland Chamber of Commerce Luncheon	Cleveland
6/1/17	Montgomery County Area Business Women's Lake Conroe Luncheon	Montgomery
6/5/17	Homeless Coalition Board Meeting	Conroe
6/7/17	Mental Health Training Meeting at Montgomery County Probation	Conroe
6/7/17	Conroe Noon Lions Club Luncheon	Conroe
6/8/17	YMHFA – Montgomery County Hospital District – Part I	Conroe
6/8/17	Huntsville Chamber of Commerce Breakfast	Huntsville
6/9/17	YMHFA – Montgomery County Hospital District – Part II	Conroe
6/14/17	Conroe Noon Lions Club Luncheon	Conroe
6/14/17	Liberty County Community Resource Coordination Group	Liberty
6/20/17	Montgomery County Community Resource Coordination Group	Conroe
6/30/17	Walker County Juvenile Justice Meeting	Huntsville

<b>Agenda Item:</b> Consumer Services Reports for April 2017  <b>Committee:</b> Program	<b>Board Meeting Date:</b>  May 25, 2017
<b>Background Information:</b>  None	
<b>Supporting Documentation:</b>  Consumer Services Reports for April 2017	
<b>Recommended Action:</b>  <b>For Information Only</b>	

## Consumer Services Report

### April 2017

Consumer Services	Montgomery County	Cleveland	Liberty	Walker County	Total
<b>Crisis Services, MH Adults/Children</b>					
Persons Screened, Intakes, Other Crisis Services	572	48	28	56	<b>704</b>
Crisis and Transitional Services (LOC 0, LOC 5)	69	2	0	0	<b>71</b>
Psychiatric Emergency Treatment Center (PETC) Served	59	9	1	10	<b>79</b>
Psychiatric Emergency Treatment Center (PETC) Bed Days	276	36	10	40	<b>362</b>
Contract Hospital Admissions	15	0	0	1	<b>16</b>
Diversion Admits	7	0	0	2	<b>9</b>
Total State Hospital Admissions	0	0	0	0	<b>0</b>
<b>Routine Services, MH Adults/Children</b>					
Adult Service Packages (LOC 1m,1s,2,3,4)	1093	128	104	100	<b>1425</b>
Adult Medication Services	767	77	83	77	<b>1004</b>
Child Service Packages (LOC 1-4 and YC)	514	41	18	62	<b>635</b>
Child Medication Services	239	15	6	22	<b>282</b>
TCOOMMI (Adult Only)	112	20	21	7	<b>160</b>
Adult Jail Diversions	2	0	0	0	<b>2</b>
<b>Persons Served by Program, IDD</b>					
Number of New Enrollments for IDD Services	7	0	0	0	<b>7</b>
Service Coordination	639	37	48	64	<b>788</b>
<b>Persons Enrolled in Programs, IDD</b>					
Center Waiver Services (HCS, Supervised Living, TxHmL)	38	5	19	22	<b>84</b>
Contractor Provided ICF-IID	17	12	12	6	<b>47</b>
<b>Substance Abuse Services</b>					
Children and Youth Prevention Services	69	20	0	59	<b>148</b>
Youth Substance Abuse Treatment Services/COPSD	10	0	0	0	<b>10</b>
Adult Substance Abuse Treatment Services/COPSD	29	0	0	0	<b>29</b>
<b>Waiting/Interest Lists as of Month End</b>					
Home and Community Based Services Interest List	1442	122	132	152	<b>1848</b>
<b>April Served by County</b>					
Adult Mental Health Services	1436	156	131	180	<b>1903</b>
Child Mental Health Services	648	47	21	68	<b>784</b>
Intellectual and Developmental Disabilities Services	663	51	53	71	<b>838</b>
<b>Total Served by County</b>	<b>2747</b>	<b>254</b>	<b>205</b>	<b>319</b>	<b>3525</b>
<b>March Served by County</b>					
Adult Mental Health Services	1332	167	100	172	<b>1771</b>
Child Mental Health Services	585	47	24	66	<b>722</b>
Intellectual and Developmental Disabilities Services	652	50	53	73	<b>828</b>
<b>Total Served by County</b>	<b>2569</b>	<b>264</b>	<b>177</b>	<b>311</b>	<b>3321</b>
<b>February Served by County</b>					
Adult Mental Health Services	1506	172	108	186	<b>1972</b>
Child Mental Health Services	579	44	29	75	<b>727</b>
Intellectual and Developmental Disabilities Services	685	54	58	75	<b>872</b>
<b>Total Served by County</b>	<b>2770</b>	<b>270</b>	<b>195</b>	<b>336</b>	<b>3571</b>

<b>Agenda Item:</b> Program Updates  <b>Committee:</b> Program	<b>Board Meeting Date:</b>  May 25, 2017
<b>Background Information:</b>  None	
<b>Supporting Documentation:</b>  Program Updates	
<b>Recommended Action:</b>  <b>For Information Only</b>	



# **Program Updates**

## **April 28, 2017 – May 25, 2017**

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### **Crisis Services**

1. The Director of Crisis Services was selected to be part of a committee for the Montgomery County Sheriff's Office (MCSO). This group was delegated with the task of identifying a healthcare vendor to provide more robust services and to prevent the deterioration of conditions while individuals are incarcerated in the county jail.
2. The Office of JD Lambright held meetings to discuss how various community partners can increase effective collaboration regarding the mental health needs of Montgomery County. There was a shared interest to divert the mentally ill to appropriate placements.
3. This past fall, the crisis department began utilizing outpatient court commitments as a means to help reduce psychiatric hospitalization, incarceration and to increase quality of life for individuals with histories of recidivism and chronic mental health conditions. There are now four adults under an outpatient court commitment receiving services through Tri-County. As a result, there has been a noticeable increase in appointment and medication compliance. To date, these factors have been instrumental in preventing the recurrence of crisis symptoms.

### **MH Adult Services**

1. In an attempt to make walk-in more accessible, efficient, and beneficial to the client, Routine Assessment Team (RAC) team is exploring options to make walk-in more successful. We are focusing on determining the best walk-in times, how many same day evaluations need to be offered versus scheduled appointment availability each week, and comparing data regarding show rates, productivity, and fill rate over the past year. In response to these findings, we are working on creating new methods for back-filling appointment slots, making sure we can feasibly accommodate the number of individuals walking in each day in same day evaluation times, and offering scheduled appointments on days/times that are convenient for clients.
2. Routine Assessment Team (RAC) team is also focusing on ensuring that intake and Initial Psychiatric Evaluation (IPE) are available and consistently scheduled within 2 weeks of walk-in for initial triage and screening. The team has been successful over the past month in meeting this standard and are offering at least 70% of all appropriate walk-ins with a same day evaluation.
3. Adult outpatient services in Conroe are currently scheduling 33 initial psychiatric assessments per week.
4. Our new Rural Clinic Administrator has been through orientation and is starting to provide support to the rural clinics.
5. Caseloads have stabilized for field-level clients in care with ability to bring deviations to LOC1S up to LOC3 as availability allows.

## **MH Child Services**

1. Our community's growing needs keep driving growth in Child and Youth Services. Last month 6 positions were added to keep up with caseload growth. Child and Youth services currently has 13 current job openings (including the 6 new positions), and are working to recruit Child and Youth (C&Y) Rehab Specialists.
2. Child and Youth Services are developing our provider network for the Youth Empowerment Services (YES) waiver. Services available to our most intensive clients include specialized therapies, such as animal assisted therapy, art therapy, and recreational therapy.

## **Criminal Justice Services**

1. TCOOMMI adult caseloads are at contracted numbers and revenue is steady.
2. Jail Liaison assessed 45 individuals and coordinated the treatment of 63 others in Montgomery County Jail in April.
3. Outpatient Competency Restoration (OCR) has served 9 individuals in FY 17.

## **Substance Abuse Services**

1. In response to the initiative of using Person Centered Recovery Planning (PCRP), the Adult Substance Abuse Treatment Team has been trained on use of the PCRP model and have implemented learning. As part of an initiative to keep PCRP relevant, staff have participated in peer review as well as random self-audits of recovery plans. Overall, staff are doing well with incorporating the principles of PCRP into recovery plans and express understanding of the concepts and implementation strategies during recovery plan development.
2. Referrals continue to come in from Juvenile Justice, the Child Mental Health team, and schools for Youth Substance Abuse Treatment Services.
3. Our Youth Substance Abuse Program manager's focus has been on the challenge of engaging the referred individuals into treatment.
4. Substance Abuse Prevention staff have been working hard and are on track for meeting the long list of contractual measures for this program for this fiscal year.

## **IDD Services**

1. IDD Authority is working with staff to identify efficiencies in documentation.
2. IDD Authority is striving to cross train administrators and supervisors.
3. IDD Provider staff are preparing for annual audit. Last year they arrived at the end of May, no date set for this year.
4. IDD Provider staff is scheduled to attend one day HCS/TxHmL training in Austin on May 23<sup>rd</sup>. This training is contingent on our audit date.

## **Support Services**

### **1. Quality Management:**

- a. Staff are currently conducting Program Surveys of the Assertive Community Treatment (ACT) and Pre-Admission Screening and Resident Review (PASRR) Programs.
- b. QM staff, in coordination with the Credentialing Department, prepared for and participated in two site visits from insurance companies (United Behavioral Healthcare and Cenpatico).

### **2. Utilization Management:**

- a. Staff continues to review monthly discharge reports to ensure appropriate discharge processes are in place and that quality continuity of care is provided.
- b. Center staff are working through the details of a new Level of Care (LOC) implemented by the State called LOC TAY (Transitional Age Youth) which is aimed at providing case management and improved Continuity of Care for those youth who are aging out of children's services and into adult services.

### **3. Training:**

- a. The Administrator of Quality Management and the Administrator of Outpatient Mental Health Services completed the Psychological First Aid Train-the-Trainer course and are now certified to train additional staff on community disaster response.
- b. Following the State's release of new modifier geared toward identifying general time spent working with individuals served on Co-Occurring Psychiatric and Substance Use Disorders, staff have attended several mental health staff meetings to teach providers how to capture this time correctly.

### **4. Veteran Affairs:**

- a. The Veteran's Services Liaison staff hosted a Marriage Management workshop for veteran couples through Marriage Management. Seven (7) couples participated and feedback was very positive. Another workshop is planned for the fall.
- b. The Veteran's Services Liaison staff also attended a statewide Therapeutic Retreat in Rising Star, Texas. This event was organized by state representatives from the Texas Veteran's Commission for all MVPN Coordinators.

## **Community Activities**

1. Tri-County's Consumer Foundation is working on their first fundraising breakfast to be held in August.
2. Staff continue to increase community outreach in Liberty and Walker counties.

<b>Agenda Item:</b> Regional Planning Network Advisory Committee's FY 2017 Transportation Recommendations  <b>Committee:</b> Program	<b>Board Meeting Date</b>  May 25, 2017
<b>Background Information:</b>  <p>Tri-County, as a member of the East Texas Behavioral Healthcare Network (ETBHN), collaborates with member Centers for the provision of certain administrative support. ETBHN formed a Regional Planning Network Advisory Committee (RPNAC) made up of at least one PNAC member from each ETBHN member Center (although it can be as many as two from each Center). At least one of Tri-County's PNAC members and the Administrator of Quality Management attend the quarterly RPNAC meetings. RPNAC members, Leadership staff and Quality Management staff work with other ETBHN Centers to meet the following goals:</p> <ul style="list-style-type: none"> <li>• To assure that the ETBHN network of providers will continuously improve the quality of services provided to all clients through prudent mediation by network leadership.</li> <li>• To continuously evaluate efforts to improve clinical outcomes and practices.</li> <li>• To maintain a process by which unacceptable outcomes, processes, and practices can be identified.</li> <li>• Evaluations shall take place one Center program at a time as determined by the Regional Oversight Committee (ROC). ETBHN will collect and compile data and distribute it to member Centers.</li> </ul> <p>The RPNAC reviewed The Transportation Survey results for each Center. This evaluation represents part of an ongoing effort to gather information to assure the Local Authority Management Team and Board of Trustees that any problems identified are properly understood and addressed.</p> <p>Based on the findings from the RPNAC Transportation Comprehensive Study, which included evaluation of available transportation options in the Tri-County Behavioral Healthcare catchment area as well as the other ETBHN Centers, several recommendations were made in the attached report.</p>	
<b>Supporting Documentation:</b>  Transportation Comprehensive Study from the ETBHN RPNAC	
<b>Recommended Action:</b>  <b>For Information Only</b>	

# **REGIONAL PLANNING AND NETWORK ADVISORY COMMITTEE**

## **EVALUATION OF SERVICES**

### **SERVICE: INTELLECTUAL DISABILITY TRANSPORTATION SERVICES**

#### **LOCAL AUTHORITY: TRI-COUNTY BEHAVIORAL HEALTHCARE**

##### ***EXECUTIVE SUMMARY:***

It is the policy of TRI-COUNTY BEHAVIORAL HEALTHCARE to have a procedure in place for the systematic and objective evaluation of services on a routine basis and that best use of public money is considered in Network Development. To ensure this, TRI-COUNTY BEHAVIORAL HEALTHCARE will assure that each of its decisions involving Network Development and Provider Procurement considers the results of service evaluations. In general, a service evaluation determination is an evaluation of the overall worth of a service. Many subjective elements are involved in such an assessment, but it is the role of the Center Board, the Center staff, and the Regional Planning and Network Advisory Committee (RPNAC) to attempt to quantify and qualify various aspects of services into objective measures that can be applied to all services and providers.

The RPNAC will make reports to each East Texas Behavioral Health Network (ETBHN) members' board/governing body regarding planning, development, design, management, and evaluation of the local provider network, including but not limited to:

- Client care issues in Network development;
- Consumer choice issues in Network development;
- Ultimate cost-benefit issues in Network development; and
- Best use of public money in Network development.

The FY 2017 Department of State Health Services and Department of Aging and Disability Services Performance Contracts requires that each Local Authority have a process to establish outcome and reporting requirements. For the Member Centers of ETBHN, the Regional Planning and Network Advisory Committee is charged with this required evaluation. The ETBHN Regional Oversight Committee selects the services for evaluation. The final recommendations from the RPNAC are compiled for distribution to the respective Centers' Board of Trustees.

This evaluation represents part of an ongoing effort to gather information to assure the Local Authority Management Team and Board of Trustees that any problems identified are properly understood and addressed. While the purpose of these evaluations is to examine the Local Authority's needs and capabilities of the current system, it is also important to note that, in time, this process will also allow Local Authorities to utilize trends in provider services and consumer



utilization. In turn, a Local Authority can use this data to ensure the proper capacity of its provider network to ensure the best interests of the consumers are met.

The Regional Planning and Network Advisory Committee is comprised of members representing each of the eleven Centers of the East Texas Behavioral Healthcare Network, appointed by the Local Authority Board/Governing Body of each respective Member Center.

### ***SERVICE DEFINITION:***

IDD Transportation is planned transportation to and from services at the Center. This may include clinical services or workshop/training services. The service includes assistance with transportation to and from location of services, only when needed, by a Center vehicle and trained driver from the Center.

### ***REVIEW METHODOLOGY:***

The RPNAC Center Representatives presented a description of IDD transportation services to the RPNAC. Also, ETBHN has a very active IDD Committee. This Committee gave input and helped design the survey for each Center. The RPNAC members determined the data necessary to evaluate the service. From this discussion, the following outcomes were determined:

- a. The Evaluation will gather data on if the center offers the service, and how many consumers are served.
- b. The Evaluation will gather data on whether the service is provided by the center or contracted out, how many sites are used, and how it is staffed.
- c. The Evaluation will examine any changes that have been made to the program for the next fiscal year.

Both center liaisons and ETBHN staff compiled this information and the RPNAC completed its evaluation of services. Please find attached the results of the survey that was completed by each Center. Committee members and center liaisons identified outliers and preferred practices and determined recommendations to be made to each center based on the outcomes of the evaluation.

### ***FINDINGS AND STATISTICS:***

Findings for FY17 were compiled in spreadsheet. **Survey results are attached. Please note that all Centers participated in the survey; however ACCESS and Andrews Center do not provide this service.**

### ***RECOMMENDATIONS:***

The recommendations and comments for TRI-COUNTY BEHAVIORAL HEALTHCARE are included in a general format that applies to all Centers in the ETBHN Network. The recommendations are as follows:

- Reimbursement and cost for this service is a problem. Every Center providing this service expressed the high cost of providing transportation and the challenge to operate without some loss.
- Each Center that is providing this service continues to do so because they believe it is the right thing to do.
- It is becoming more and more difficult to continue the service due to financial loss.
- The financial difficulty is largely due to rural areas and route lengths.
- Burke was commended for the organization of their fleet management, replacement of vehicle schedule, and budgeting through each program. It was advised that all Centers providing this service review Burke fleet management procedures.
- It is not just the Community Centers having difficulties. Other community organizations are experiencing the same financial issue. Nursing Homes were specifically cited.
- Collaborations with other community organizations was brought up as a key to helping with this issue.
- Need cost data to really see financial loss. Involving CFO's to gather more information on this would be helpful.
- Need to make sure all alternatives for transportation are exhausted before using Center transportation. Center transportation needs to be last resort.
- To fully explore the issue, it might be beneficial to review transportation practices in mental health side.

## Transportation Survey

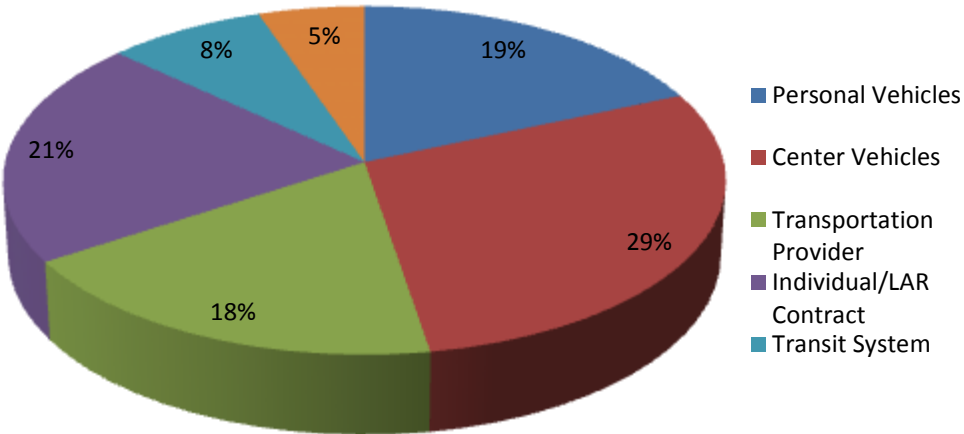
### Results



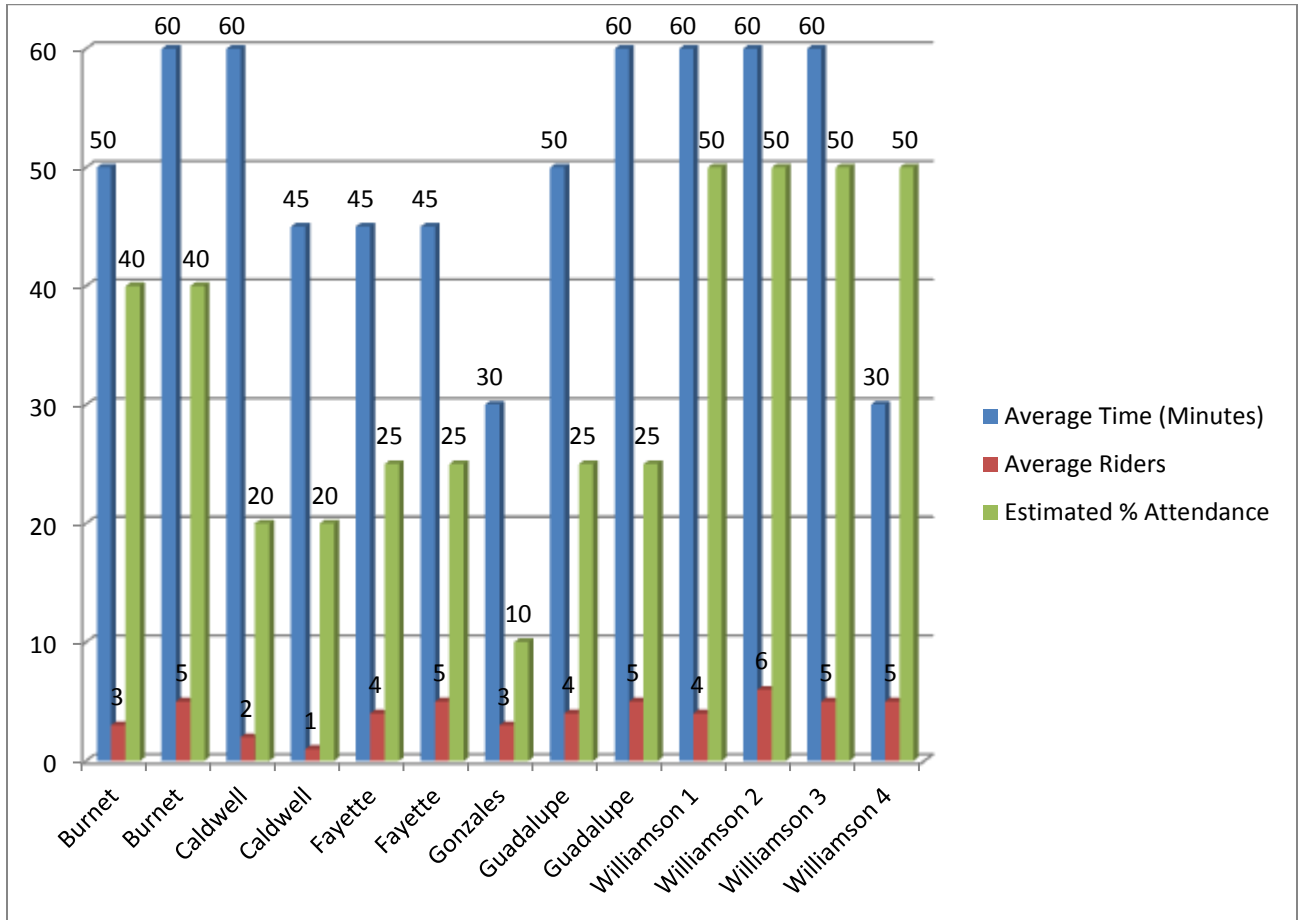
#### Data Derived From:

Access  
Andrews  
Bluebonnet  
Burke  
Community Healthcore  
Gulf Bend  
Gulf Coast  
Lakes Regional  
Pecan Valley  
Spindletop  
Tri-County

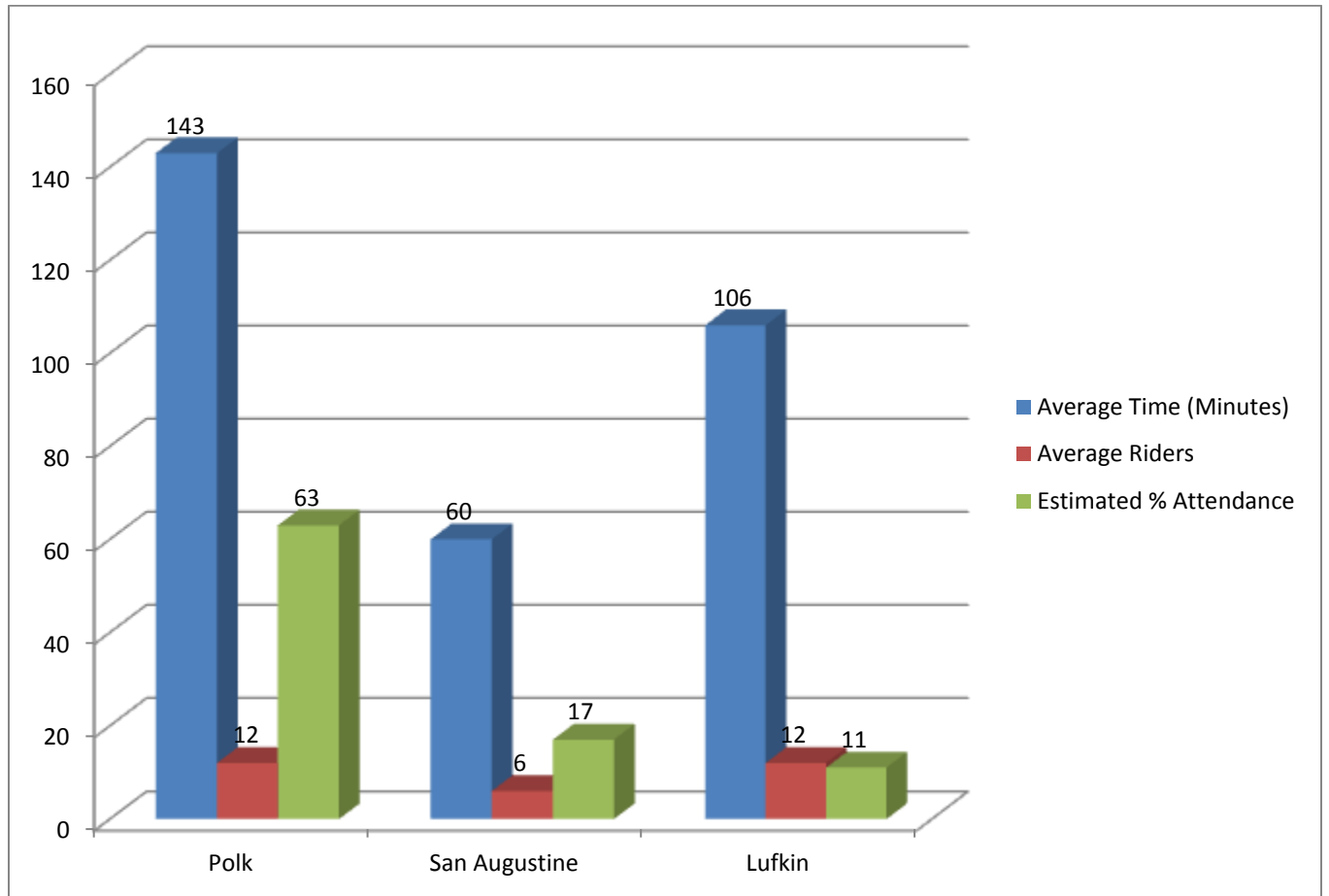
How do you provide transportation for persons receiving IDD services?



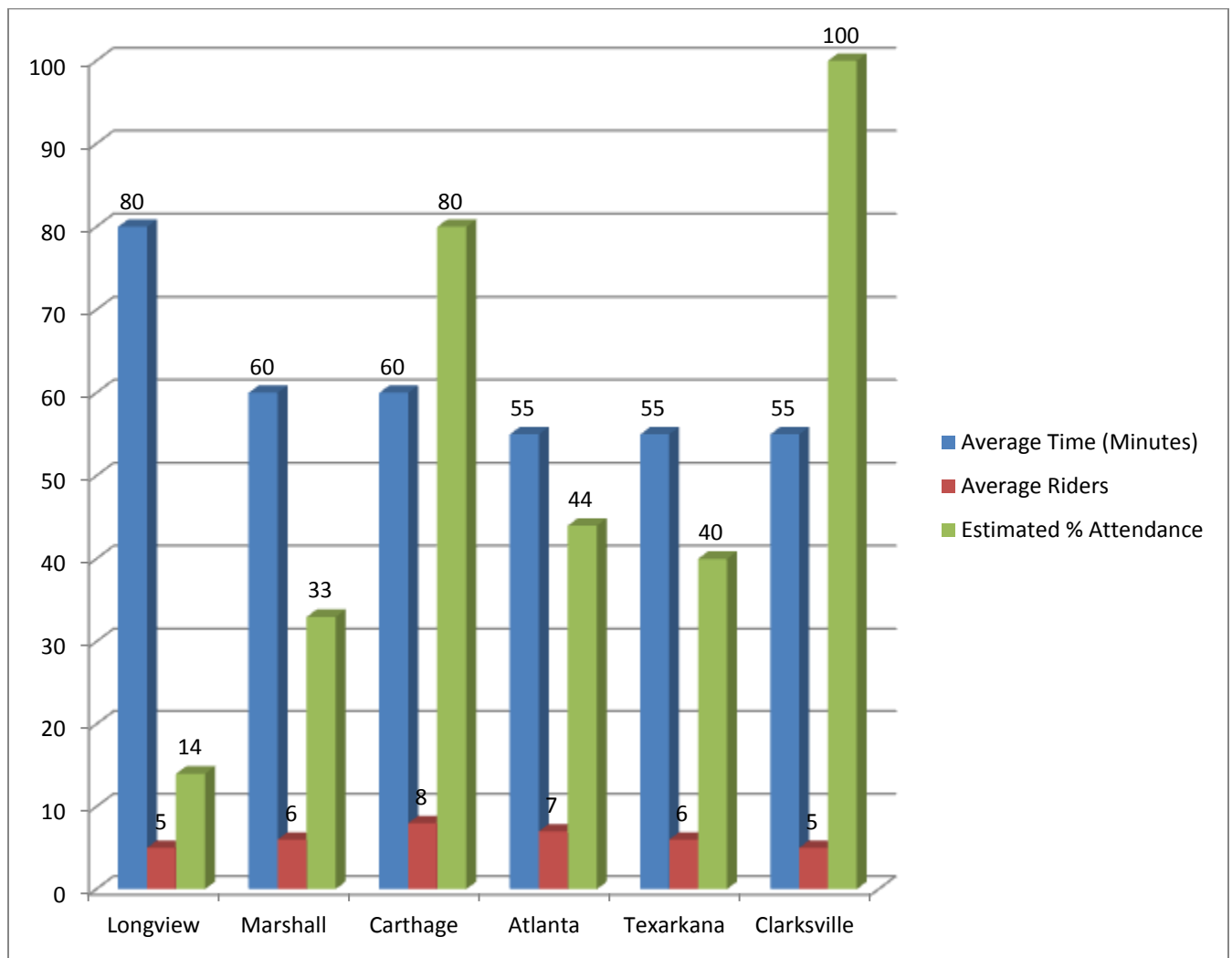
## Day Habilitation Routes (Bluebonnet Trails)



## Day Habilitation Routes (Burke)

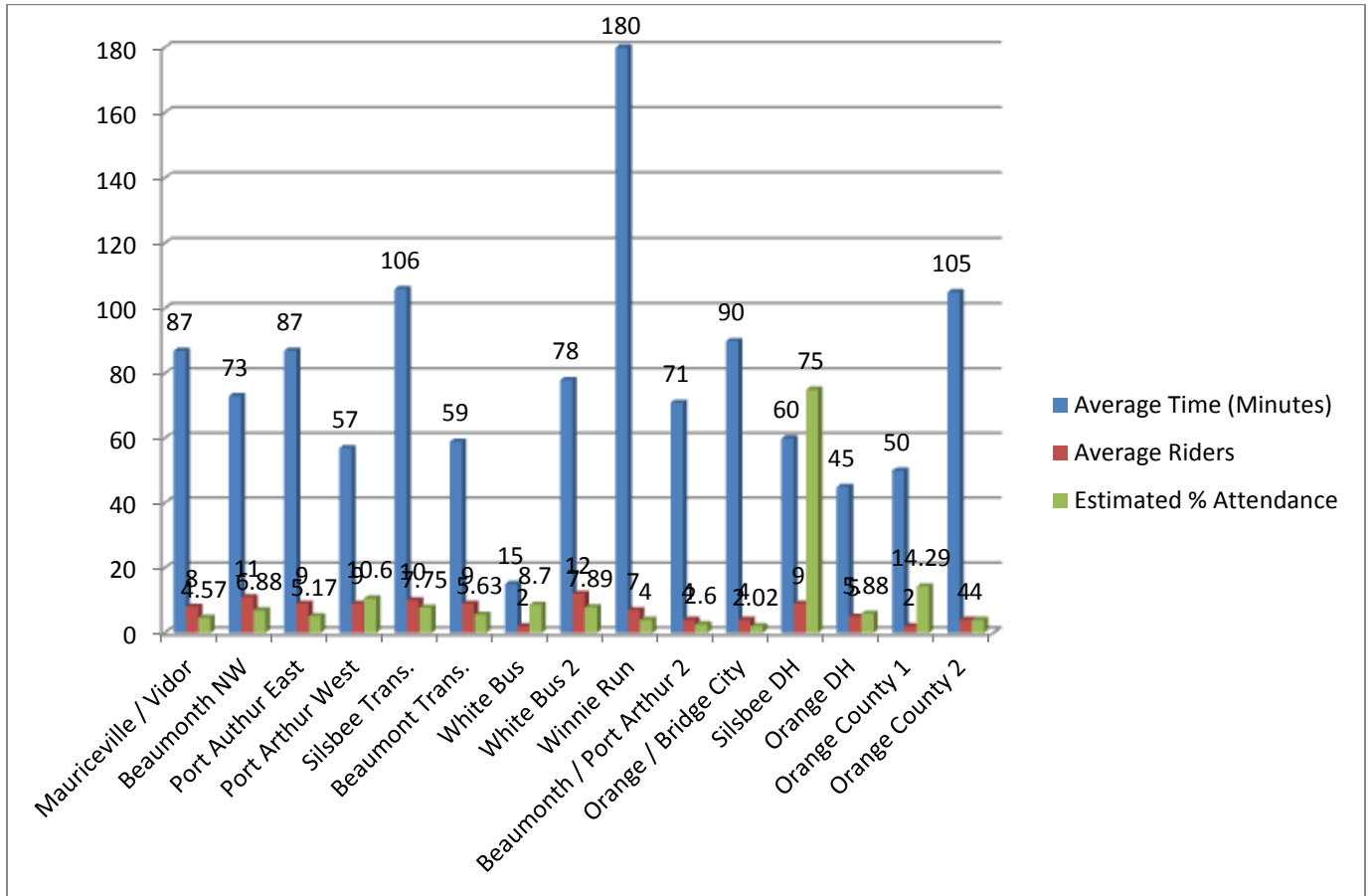


## Day Habilitation Routes (Community HealthCore)

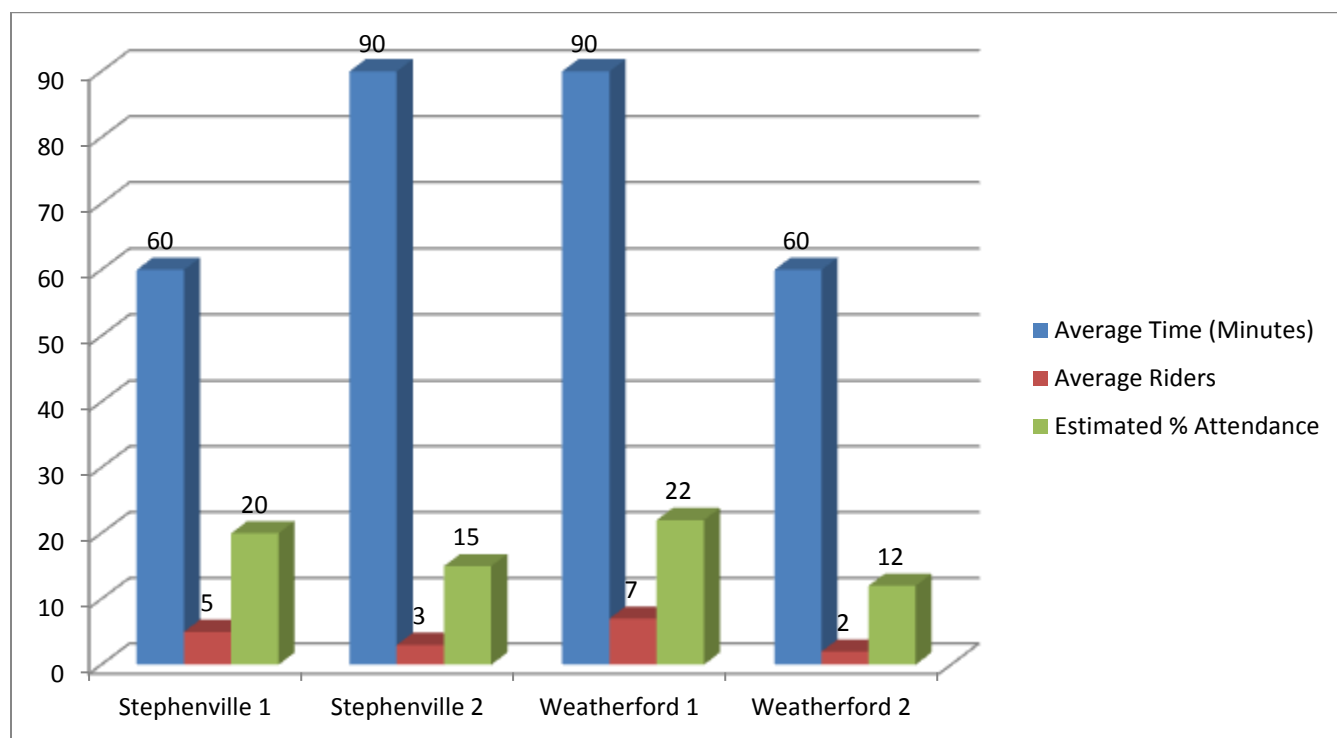




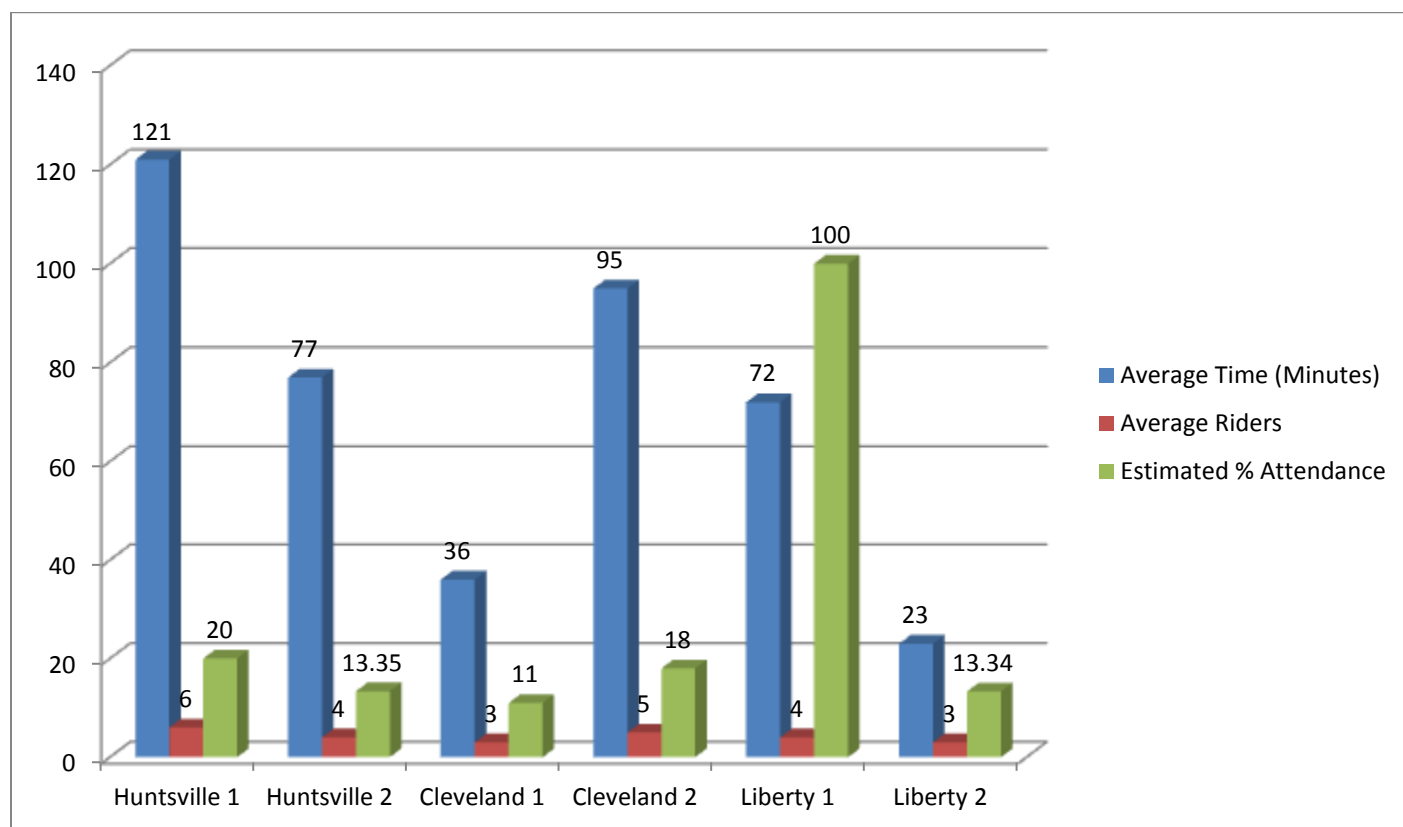
## Day Habilitation Routes (Spindletop)



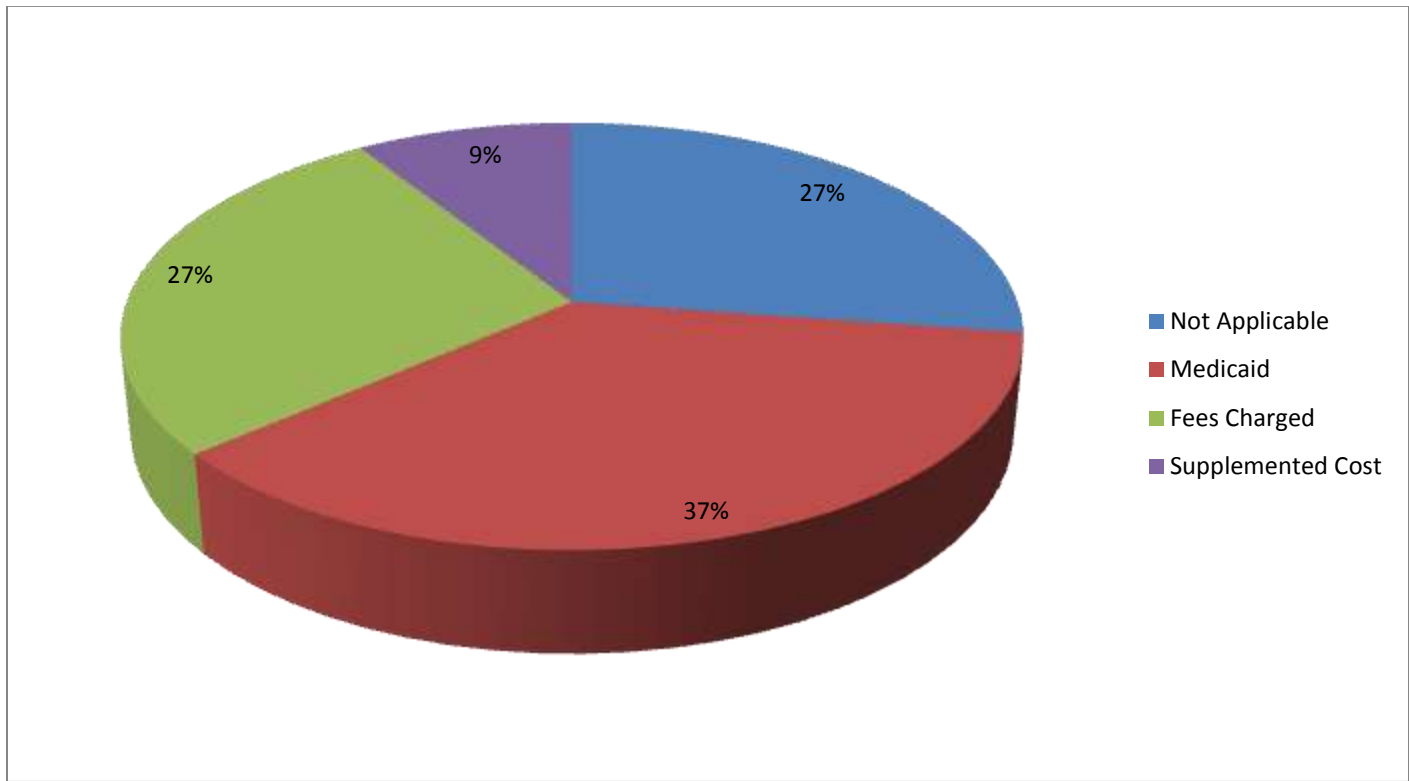
## Day Habilitation Routes (Pecan Valley)



## Day Habilitation Routes (Tri-County)

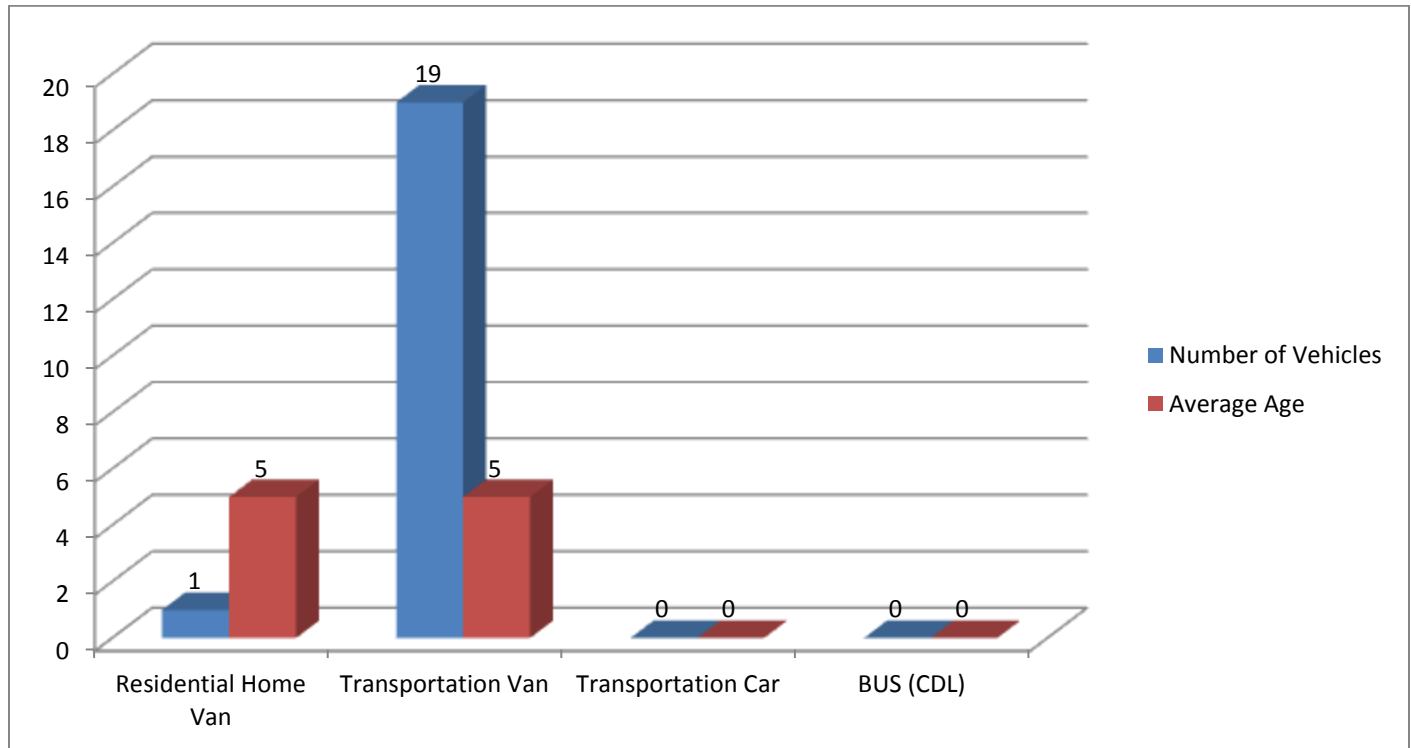


## How are the costs covered for transportation?

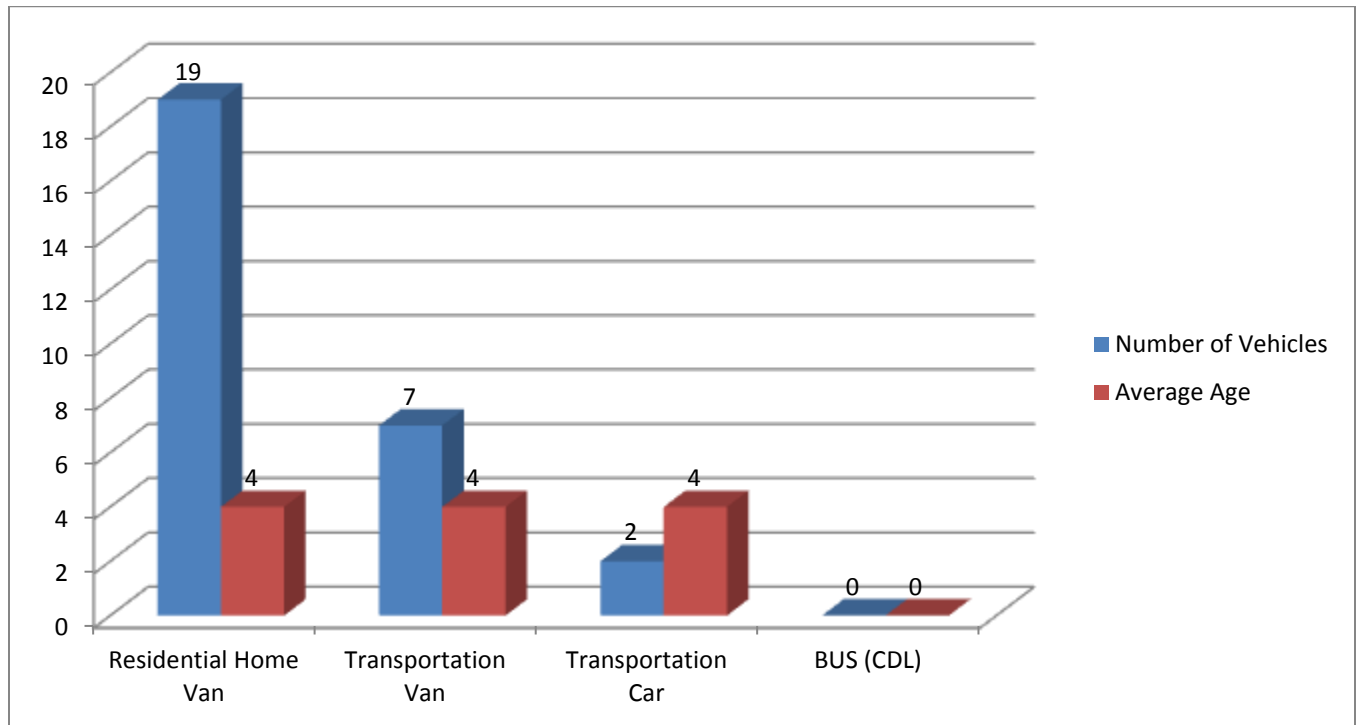


- \* **Gulf Bend Center** – Community support staff provides general revenue funds
- \* **Gulf Coast Center** – Federally funded transportation system. All day hab services are privately contracted / some families have personal agreements
- \* **Lakes Regional** – Pays for public transit in areas with no other available options
- \* **Pecan Valley** – Bills SHL or CS transportation code when the individual is in one of the waiver programs
- \* **Tri-County** – Contracts with private day program provider to transport a few individuals at higher cost. Loss is less by paying contractor higher than the reimbursement rate

## IDD Transportation Vehicle Fleet (Bluebonnet Trails)

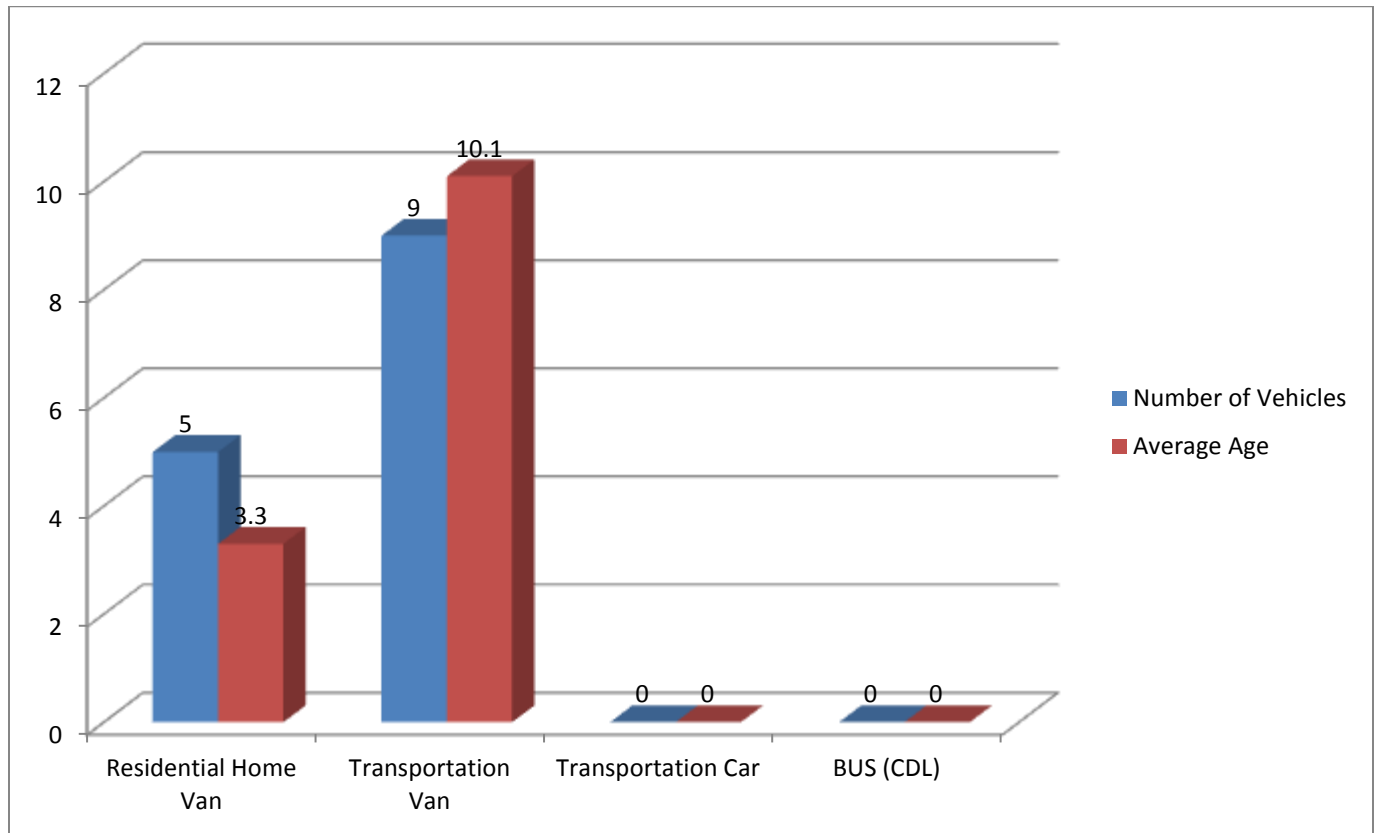


## IDD Transportation Vehicle Fleet (Burke)



\*No centers use rentals for transportation

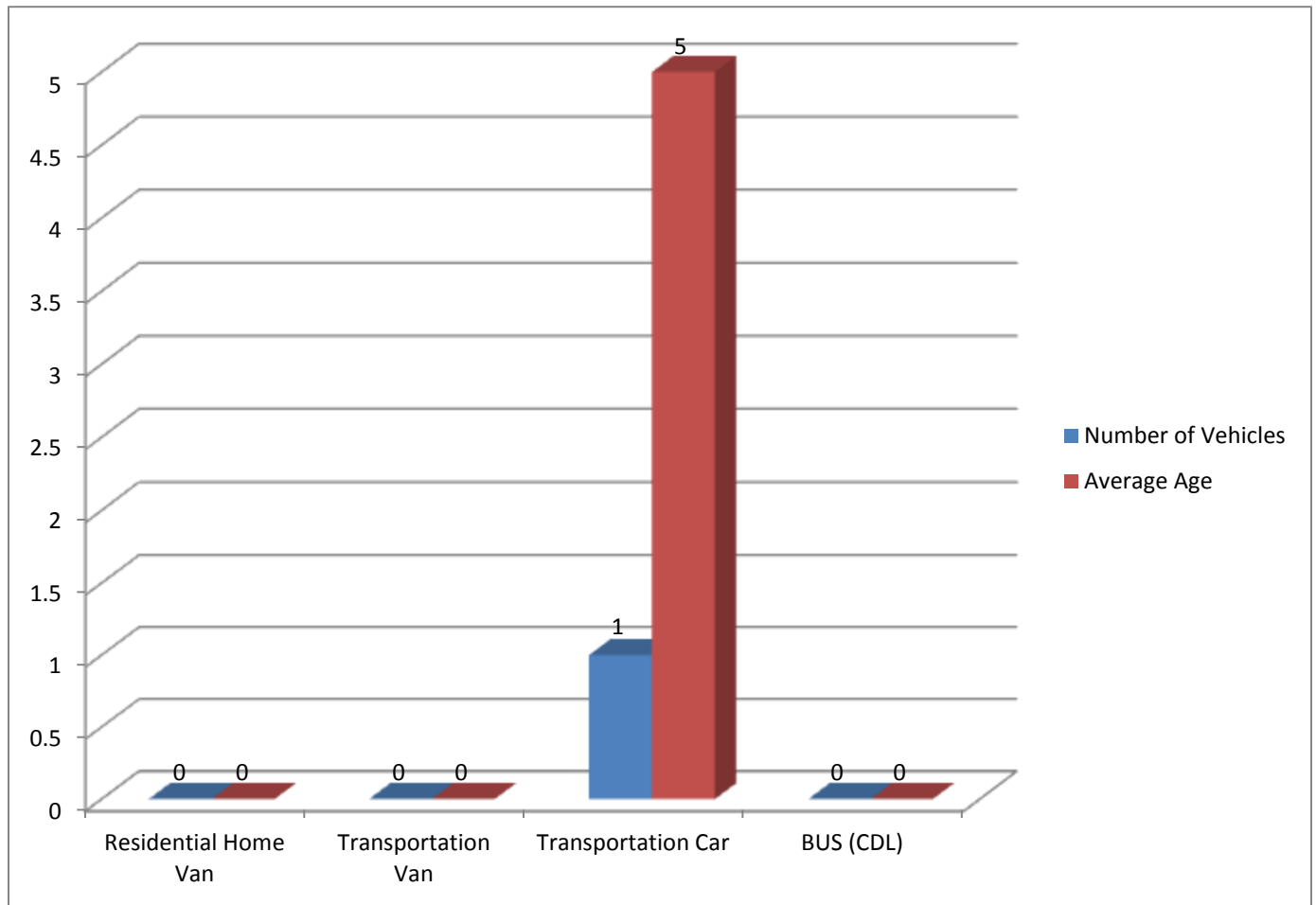
## IDD Transportation Vehicle Fleet (Community HealthCore)



\*No centers use rentals for transportation

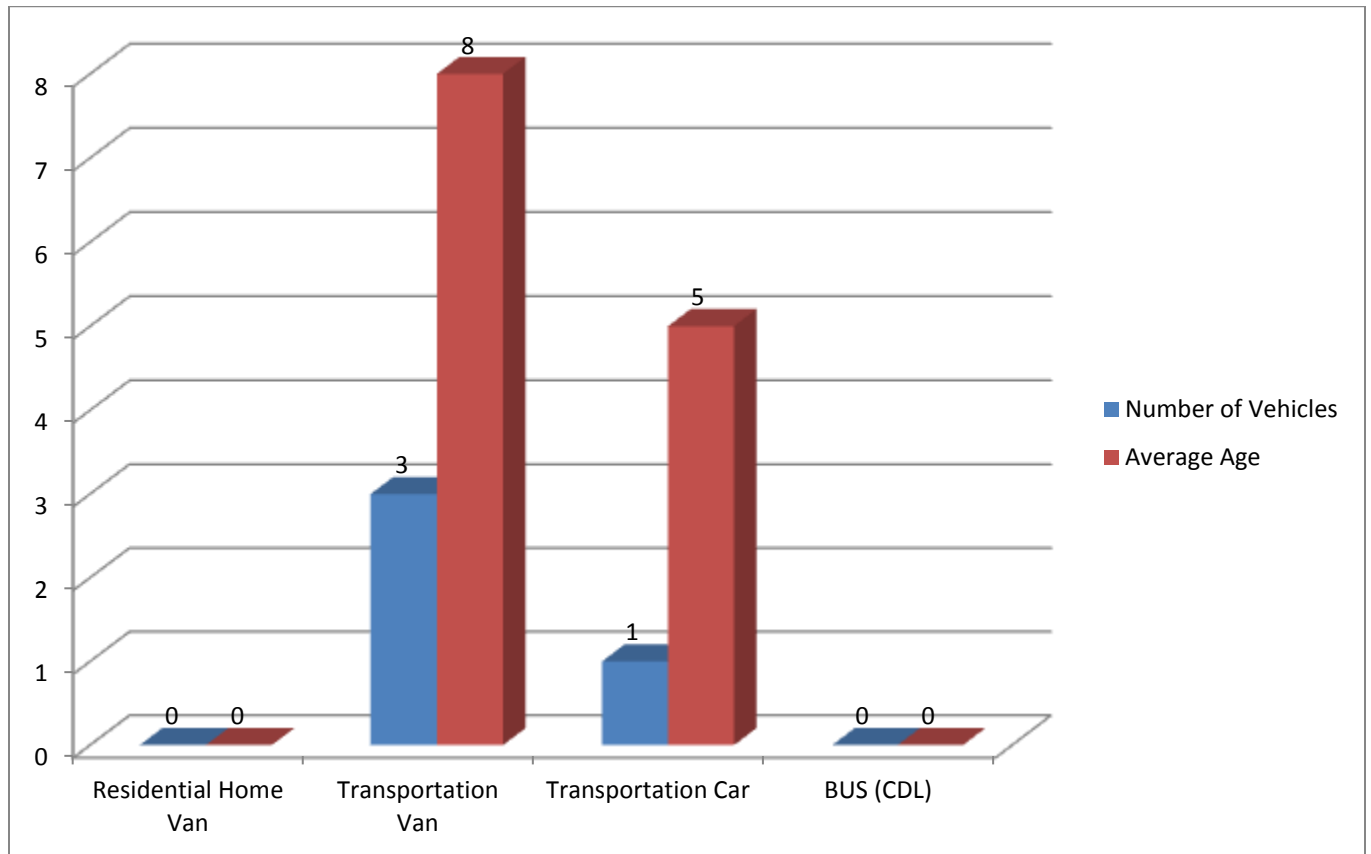


## IDD Transportation Vehicle Fleet (Gulf Bend)



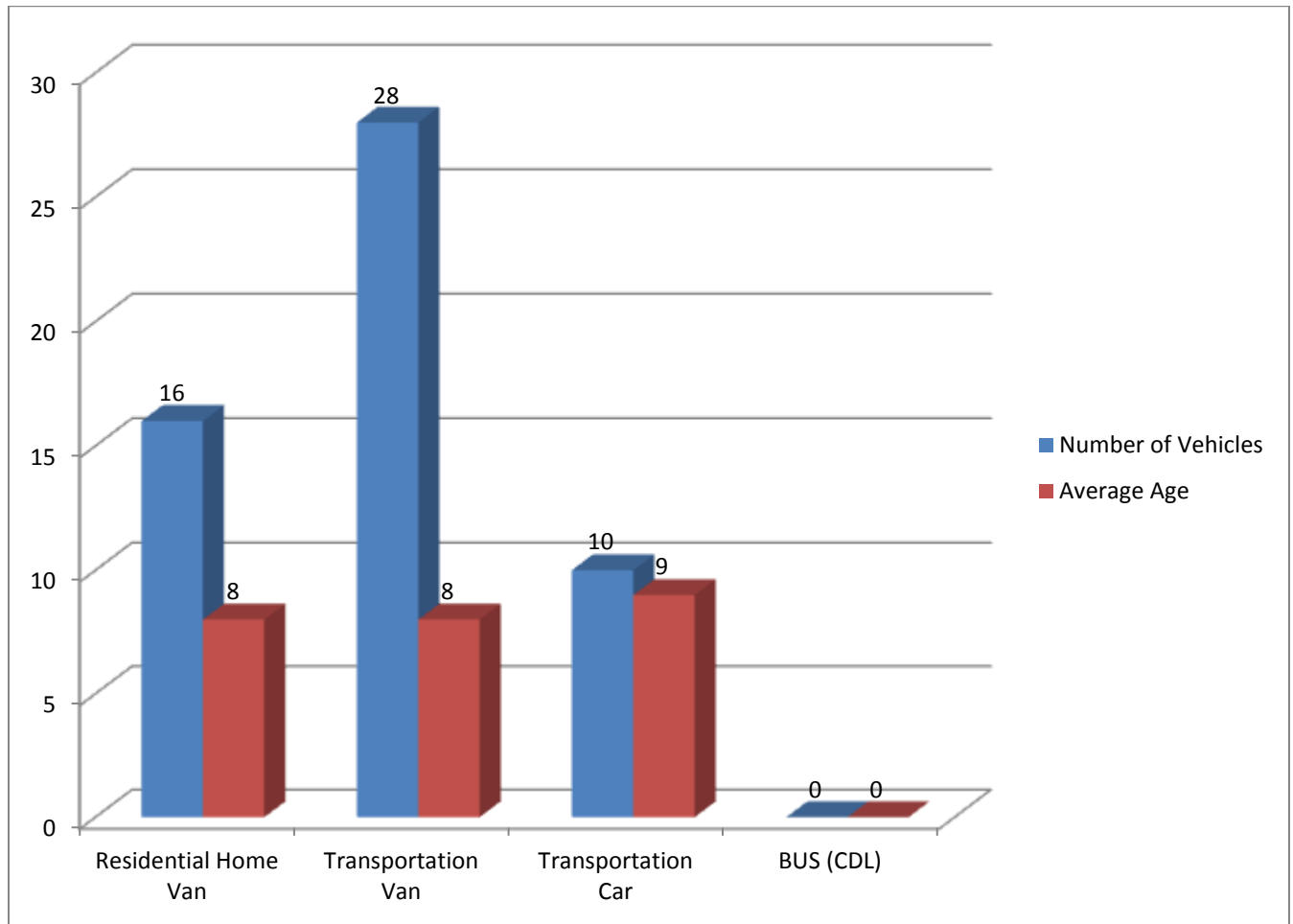
\*No centers use rentals for transportation

## IDD Transportation Vehicle Fleet (Gulf Coast)



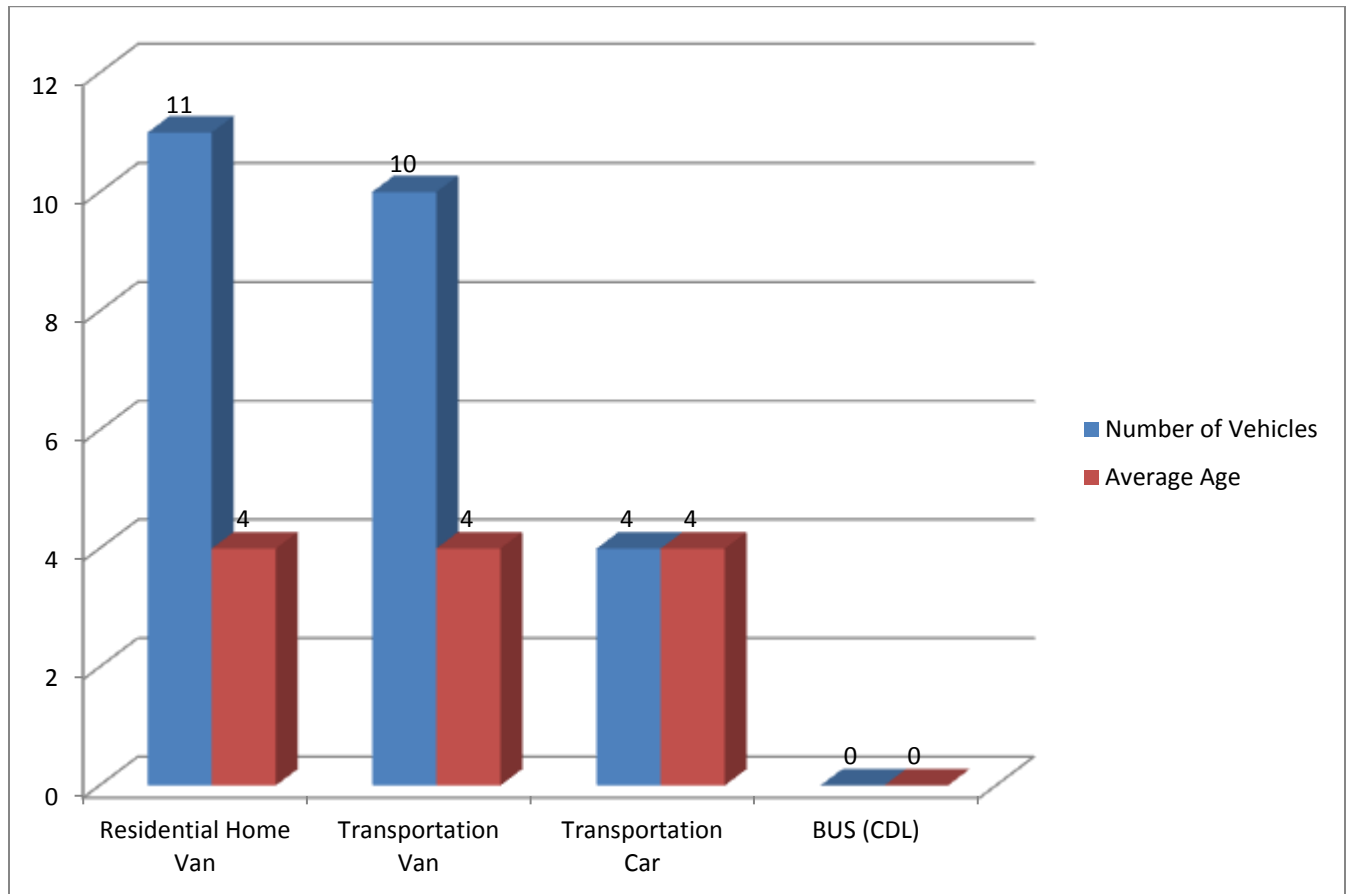
\*No centers use rentals for transportation

## IDD Transportation Vehicle Fleet (Lakes Regional)

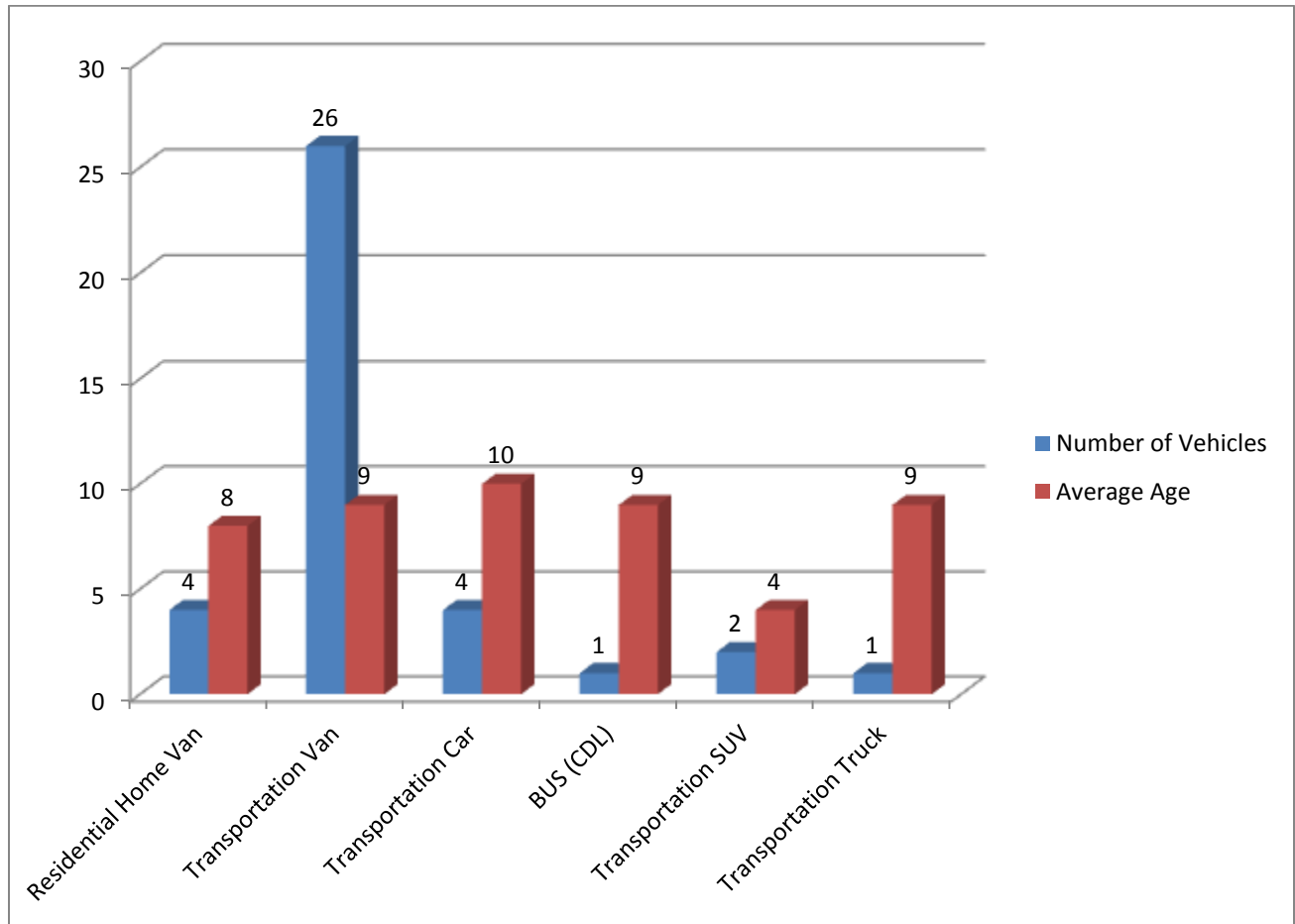


\*No centers use rentals for transportation

## IDD Transportation Vehicle Fleet (Pecan Valley)

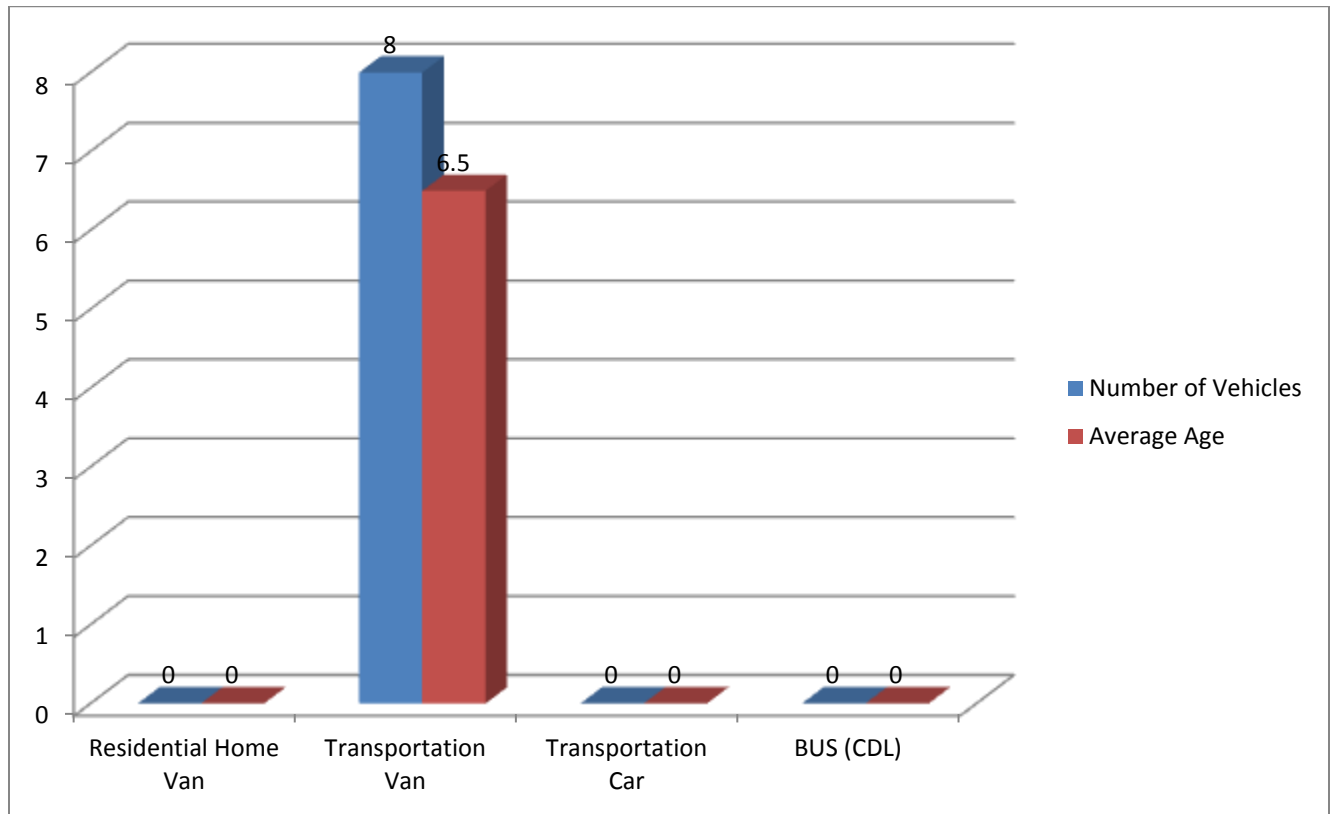


## IDD Transportation Vehicle Fleet (Spindletop)



\*No centers use rentals for transportation

## IDD Transportation Vehicle Fleet (Tri-County)



\*No centers use rentals for transportation

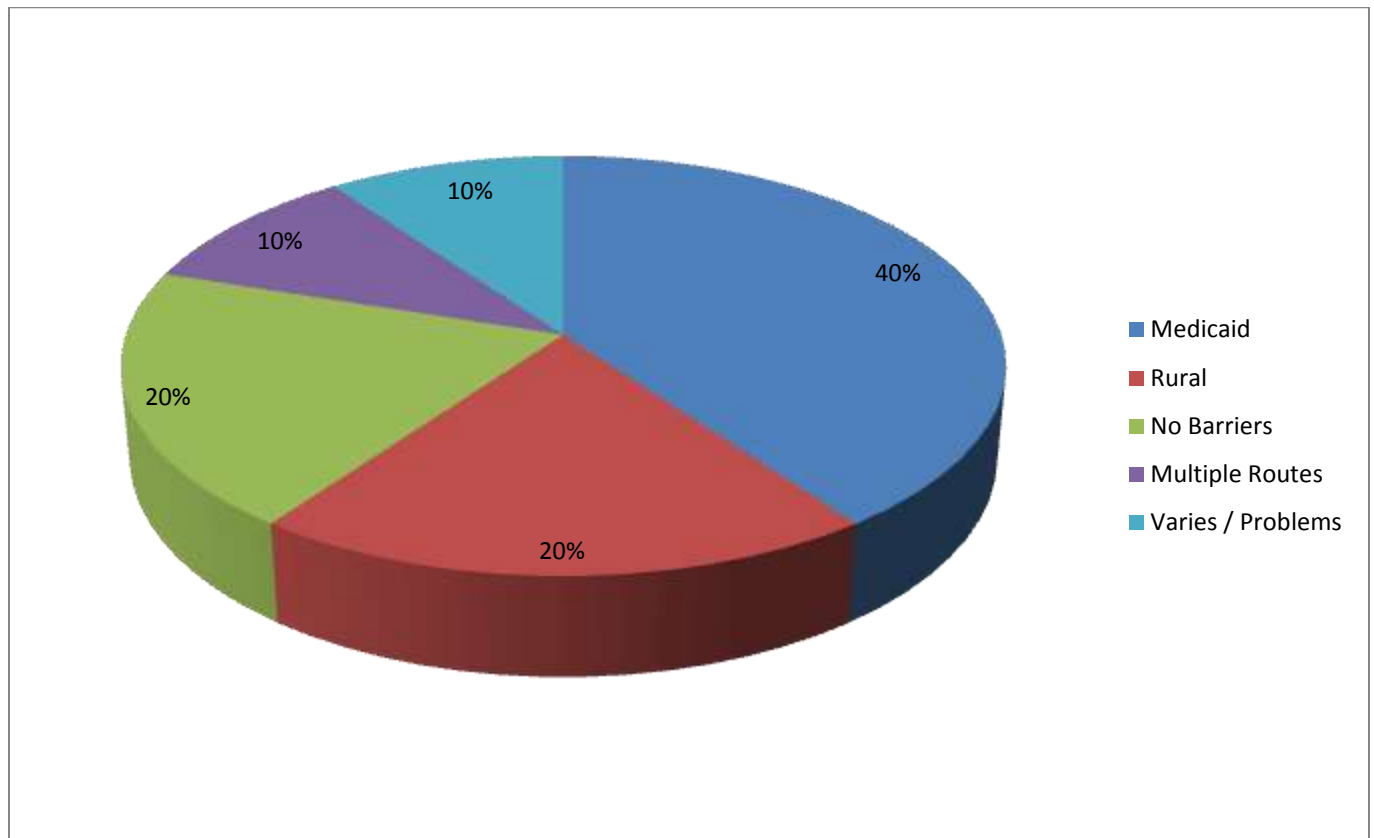
## Fleet Maintenance

<b>Bluebonnet Trails</b>	<ul style="list-style-type: none"> <li>• Park at each center.</li> <li>• Inspection and cleaning are staff responsibility.</li> <li>• Use local garages for repair and maintenance.</li> <li>• Corp office sends out yearly registrations and insurance cards.</li> </ul>
<b>Burke</b>	<ul style="list-style-type: none"> <li>• <u>Center-wide Fleet Policy</u>: Regular maintenance schedules, monthly mileage recording, vehicle inspections and registration notices sent from Business Services.</li> <li>• <u>Service Stations</u>: Fleet is mostly located in Lufkin where a preferred repair shop is used exclusively. Permission is granted through COO of any service or tire changes and bill Burke directly. Shop is aware of fleet replacement timelines and deny scheduling of services at end of service.</li> <li>• <u>Fleet Replacement Program</u>: 125 vehicles are managed across all programs; the monthly vehicle log and service stations owner are tools used for which vehicles should be replaced and when. General guidelines include sedans/minivans/passenger vans replaced at 120k-125k miles. Trucks, law enforcement vehicles, and wheelchair vans are replaced between 130k-150k miles. Any vehicles with major issues (powertrain) or frequent repairs are replaced immediately. State contract dealers are used for all purchases and decommissioned vehicles are sent to auction for sale.</li> <li>• <u>Fleet Financing</u>: Burke pays cash for all vehicle purchases. Internal lease-type plans are set up for the programs to pay a monthly fee for each vehicle (\$225 for sedans, \$250 for vans/suv, \$300 for truck/law enforcement, \$375 for WC Vans). Established a "Vehicle Replacement Reserve Account" where usage fees are expensed to the program and credited to the reserve account, and fleet purchases are paid from this fund. Auction sales are credited to this account. When a new vehicle is obtained, their income statement receives revenue and expenses for the purchased value. This prevents unplanned vehicle purchases from blowing a hole in a program's P/L statement. Fleet usage fees generate approx. \$28k / month leaving approx. \$336k budget for annual vehicle replacements.</li> </ul>
<b>Community HealthCore</b>	<ul style="list-style-type: none"> <li>• Monthly inspections, oil changes, keep inside/outside clean, in-shop repairs as needed, and daily inspections.</li> </ul>
<b>Gulf Bend</b>	<ul style="list-style-type: none"> <li>• Staff provides building / maintenance managers with requests for maintenance needs, and service is arranged.</li> </ul>
<b>Gulf Coast</b>	<ul style="list-style-type: none"> <li>• Each vehicle is assigned to staff as the custodian to perform weekly and/or monthly checks on each vehicle.</li> <li>• Mileage, gas, and maintenance reports are completed then sent to the GCC fleet manager.</li> <li>• The fleet manager assists in locating and transporting staff to vendors to drop off or pick up the vehicles being repaired.</li> <li>• The asset manager for CGG monitors and sends monthly reports on vehicle usage, repairs, mileage, etc. to custodians and supervisors.</li> <li>• The asset manager makes recommendations to the management team on need to transfer, purchase, lease, or retire vehicles no longer cost effective to maintain.</li> </ul>
<b>Lakes Regional</b>	<ul style="list-style-type: none"> <li>• Monthly routine maintenance is performed on an on-going basis.</li> <li>• Each employee is responsible for completing an inspection checklist on the program's assigned vehicles before each use.</li> <li>• Yearly inspections are completed per state guidelines.</li> </ul>

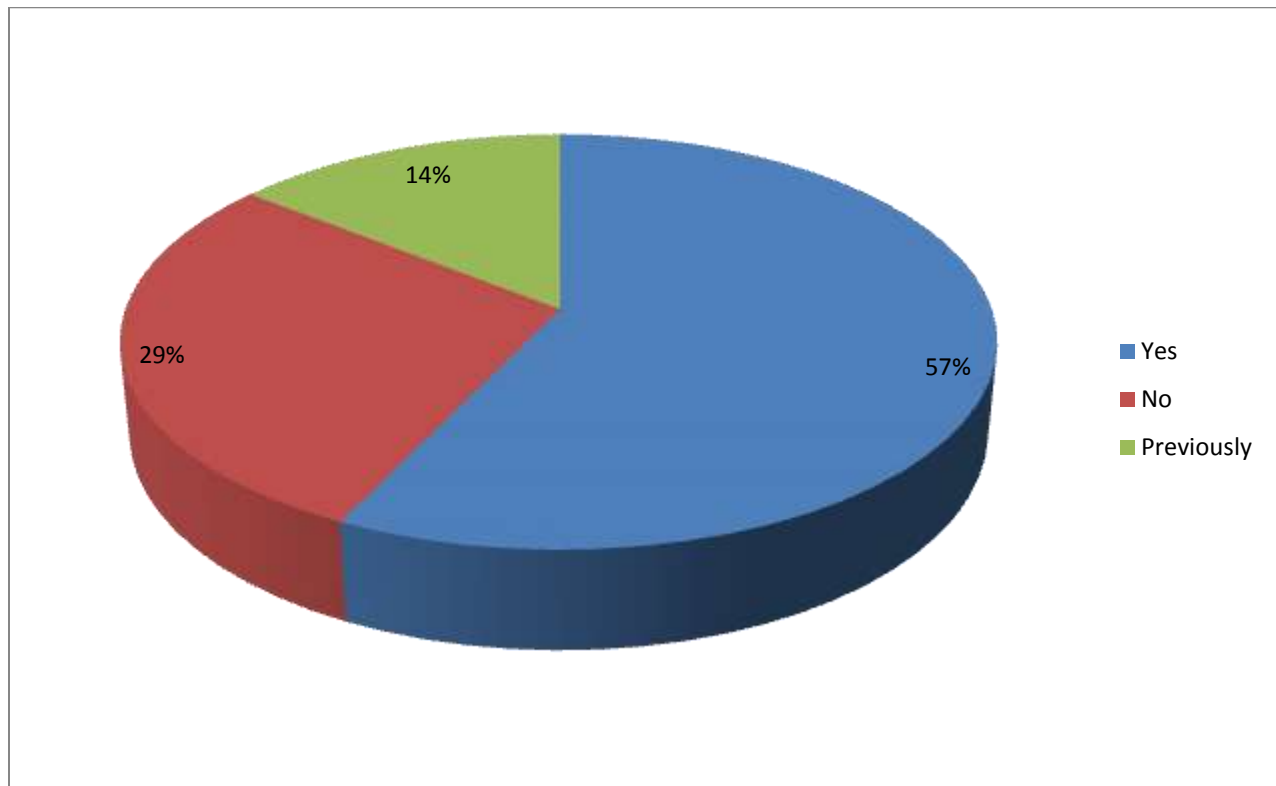


	<ul style="list-style-type: none"> <li>• Detected issues are repaired in a timely manner.</li> <li>• When repairs and maintenance is needed, local and reputable auto mechanics are utilized.</li> </ul>
<b>Pecan Valley</b>	<ul style="list-style-type: none"> <li>• 10 point checklist and walk around for every new driver</li> <li>• Scheduled oil changes, car washes and other maintenance checks with local service provider</li> <li>• Monitor mileage and replace when mileage is high</li> </ul>
<b>Spindletop</b>	<ul style="list-style-type: none"> <li>• Tire rotations</li> <li>• Oil changes and fluids checked</li> <li>• Concerns noted by each department are reported to maintenance for further inspection.</li> <li>• All services to vehicles are provided through community vendors.</li> <li>• Internal maintenance department completes an inspection of each vehicle prior to returning to the assigned unit.</li> </ul>
<b>Tri-County</b>	<ul style="list-style-type: none"> <li>• Vehicle inspections by staff are done daily before the route begins.</li> <li>• When issues are identified, repair needs are arranged at local vendors.</li> </ul>

## Transportation From Other Providers/Funders (Medicaid / Rural)



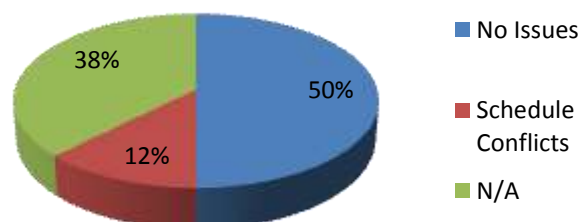
## Mobility Training or Transportation Fees Paid (Medicaid / Rural)



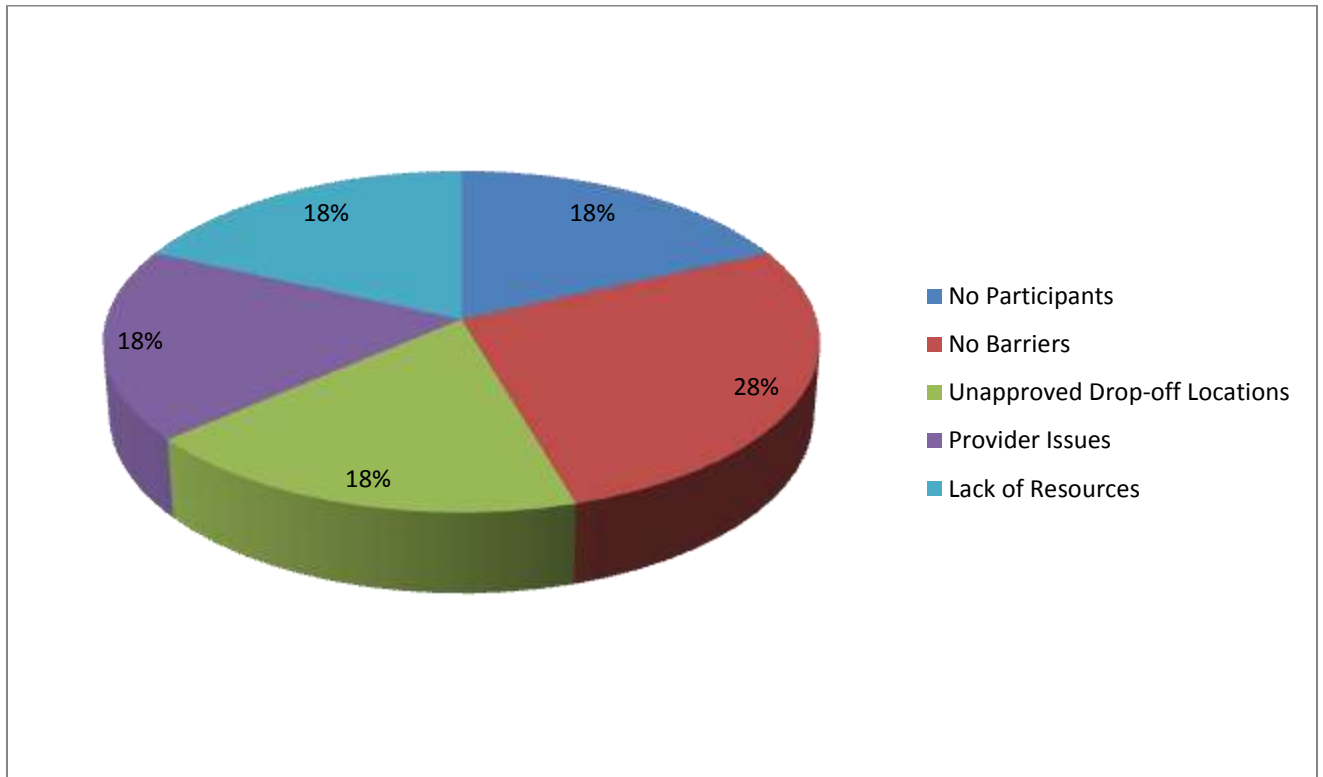
## CDS Transportation

<b>Access</b>	<ul style="list-style-type: none"> <li>CDS is an option only for individuals in waiver programs at our center. Individuals experience an increase in the community integration opportunities and enjoy the interaction it brings.</li> </ul>
<b>Bluebonnet Trails</b>	<ul style="list-style-type: none"> <li>N/A</li> </ul>
<b>Burke</b>	<ul style="list-style-type: none"> <li>In the rural areas, it has alleviated some of the staffing and mileage costs.</li> </ul>
<b>Community HealthCore</b>	<ul style="list-style-type: none"> <li>CDS is their only means of transportation to and from Day Hab.</li> </ul>
<b>Gulf Bend</b>	<ul style="list-style-type: none"> <li>Individuals receiving CDS services have access to transportation because they have chosen the individual and have made it clear that transportation will be needed.</li> </ul>
<b>Gulf Coast</b>	<ul style="list-style-type: none"> <li>N/A</li> </ul>
<b>Lakes Regional</b>	<ul style="list-style-type: none"> <li>N/A</li> </ul>
<b>Pecan Valley</b>	<ul style="list-style-type: none"> <li>N/A</li> </ul>
<b>Spindletop</b>	<ul style="list-style-type: none"> <li>Not a CDS provider and don't provide transportation for individuals utilizing their CDS services for transportation.</li> </ul>
<b>Tri-County</b>	<ul style="list-style-type: none"> <li>Family or consumer controls who is hired to provide the transportation and the rate they pay.</li> </ul>

### Unable to Receive Transportation / Issues



## Community First Choice



## Specialized Services Issues

<b>Access</b>	<ul style="list-style-type: none"> <li>Access has experienced some barriers with PASSR individuals who wish to participate in outside programming. One of the main barriers is that the nursing facility never has time to transport individuals to outside programming. However, Access is currently working on ways to resolve this such as offering outside programming to those individuals who are interested in increasing their independent living skills in the community. We are contracting with a provider who is willing to provide that need upon the individual's request.</li> </ul>
<b>Bluebonnet Trails</b>	<ul style="list-style-type: none"> <li>Issues, at times, due to individuals requiring a wheelchair lift.</li> </ul>
<b>Burke</b>	<ul style="list-style-type: none"> <li>Currently, Burke is not serving any PASSR individuals transportation. No foreseeable issues are expected except within the rural areas that are currently being served mostly by CDS at this time if there were any PASSR individuals needing transportation.</li> </ul>
<b>Community HealthCore</b>	<ul style="list-style-type: none"> <li>There are many NF's who only have one or two vans for transportation while medical appointments rank higher than day hab. This can affect the resident who wants to attend but can't due to lack of transportation resources.</li> </ul>
<b>Gulf Bend</b>	<ul style="list-style-type: none"> <li>GBC is anticipating transportation issues for individuals who reside in nursing homes and are interested in attending day hab services. Nursing home facilities are usually very limited in regards to transportation needs; their priority would be to ensure that individuals who require transportation to and from all medical appointments. There has been some cost for the day hab provider to provide the services. There has been no further discussion or resolution to this issue.</li> </ul>
<b>Gulf Coast</b>	<ul style="list-style-type: none"> <li>Many individuals in the NF are confined to wheelchairs. The GCC staff providing the services has access to only 2 wheelchair accessible vans; one in Galveston County and one in Brazoria County. There is a growing list of PASSR individuals requesting community access, but providing them with the numbers of times per month they would like to go to an outing has been an issue. Additionally, they contract with approx. 10-12 non-traditional providers for individuals in nursing facilities, but community access is available for only those who are mobile.</li> <li>Some nursing facilities are not willing to provide the transportation to the day programs while others that can are not always able to due to having very limited access to wheelchair accessible vehicles.</li> </ul>
<b>Lakes Regional</b>	<ul style="list-style-type: none"> <li>Many nursing facilities are not willing to transport to day programs.</li> </ul>
<b>Pecan Valley</b>	<ul style="list-style-type: none"> <li>Has not experienced problems yet, but anticipates some issues going forward as they evolve their specialized services.</li> </ul>
<b>Spindletop</b>	<ul style="list-style-type: none"> <li>There is a limited number of wheelchair accessible vans and that are already in services for meeting the needs of individuals living in residential settings and weekday transportation to DH programs. One vehicle requires a driver with a CDL, so it is not available to staff providing independent living skills. Many of our wheelchair vans are several years old, and in addition to the routine maintenance, require frequent repairs. Families of individuals receiving ILS services have also raised concerns about the age of the vehicles and declined services due to the concerns, although, a new wheelchair van that transports up to 4 individuals in wheelchairs has been added to the fleet.</li> </ul>
<b>Tri-County</b>	<ul style="list-style-type: none"> <li>Transportation to DH site is 30-45 miles one-way in one area. The van servicing this area is full and cannot accommodate additional riders. If the agency were to provide transportation, it would require a 2<sup>nd</sup> route in the same direction and resources are currently not available.</li> <li>Nursing homes have expressed they use their vehicle for medical appointments and outings and cannot transport.</li> </ul>

<b>Agenda Item:</b> Approve Revisions to Board Policy D.6  <b>Committee:</b> Executive	<b>Board Meeting Date</b>  May 25, 2017
<b>Background Information:</b>  As staff continues to update Board Policy statements, one (1) Board Policy change is recommended for approval by the Board.  <b>D.6-Client Rights</b> —Last Revised May 2002—Formatting changes only.	
<b>Supporting Documentation:</b>  Revised Board Policy (Markup Version)	
<b>Recommended Action:</b>  <b>Approve Revisions to Board Policy D.6</b>	



# TRI-COUNTY **BEHAVIORAL HEALTHCARE** ~~MENTAL HEALTH~~ ~~MENTAL RETARDATION SERVICES~~

## STATEMENT OF POLICY

\_\_\_\_\_  
**Patti Atkins, Chair** ~~Donald L. Kraemer, Chairman~~

**SUBJECT:** Client Rights

**Original Effective Date:** July 26, 1990

**Revised Effective Date:** February 28, 2002, May 23, 2002, **May 25, 2017**

It is the policy of the Board of Trustees that individuals will be served without regard of race, nationality, religion, ethnicity, sex, sexual orientation, age, disability, or political affiliation.

All programs and services shall be provided in a way that preserves the dignity of the individual. Procedures will be developed in accordance with applicable local, state, and federal laws and regulations, and in a manner consistent with recognized professional and ethical standards. Procedures will be developed for informing individuals of their rights and for investigating allegations of client abuse and rights violations.

<b>Agenda Item:</b> Personnel Report for April 2017  <b>Committee:</b> Executive	<b>Board Meeting Date:</b>  May 25, 2017
<b>Background Information:</b>  None	
<b>Supporting Documentation:</b>  Personnel Reports for April 2017	
<b>Recommended Action:</b>  <b>For Information Only</b>	

## Personnel Report April 2017

Total Applications received in April = 290

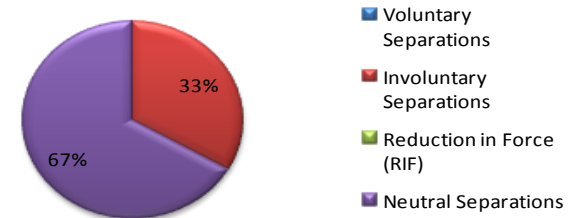
Total New Hires for the month of April = 5

Total New Hires Year to Date = 71

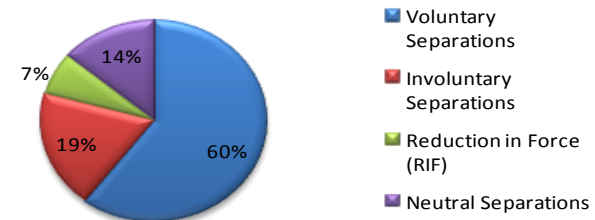
April Turnover	FY17	FY16
Number of Active Employees	349	333
Number of Monthly Separations	3	6
Number of Separations YTD	58	55
Year to Date Turnover Rate	16%	17%
April Turnover	1%	2%

Separations by Reason	April Separations	Year to Date
Retired	0	2
Involuntarily Terminated	1	11
Neutral Termination	2	8
Dissatisfied	0	0
Lack of Support from Administration	0	0
Micro-managing supervisor	0	0
Lack of growth opportunities/recognition	0	0
Difficulty learning new job	0	0
Co-workers	0	0
Work Related Stress/Environment	0	0
RIF	0	4
Deceased	0	0
Pay	0	0
Health	0	0
Family	0	2
Relocation	0	3
School	0	1
Personal	0	2
Unknown	0	2
New Job	0	23
<b>Total Separations</b>	<b>3</b>	<b>58</b>

**April Voluntary, Involuntary, RIF and Neutral Separations**



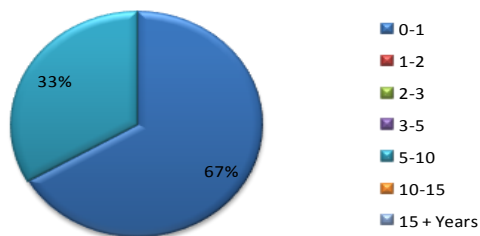
**Year to Date Voluntary, Involuntary, RIF and Neutral Separations**



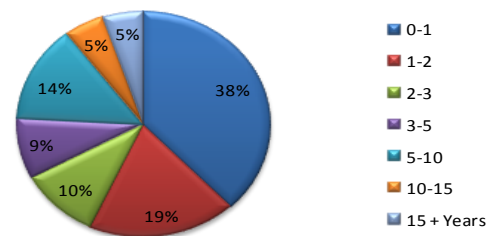
Management Team	# of Employees	Monthly Separations	Year to Date Separations	% April	% YTD
Evan Roberson	26	0	2	0%	8%
Millie McDuffey	27	0	10	0%	37%
Amy Foerster	17	1	4	6%	24%
Tanya Bryant	11	0	0	0%	0%
Behavioral Health Director	130	2	27	2%	21%
Breanna Robertson	61	0	7	0%	11%
Kelly Shropshire	34	0	2	0%	6%
Kathy Foster	35	0	5	0%	14%
Kenneth Barfield	8	0	1	0%	13%
<b>Total</b>	<b>349</b>	<b>3</b>	<b>58</b>		

Separation by EEO Category	# of Employees	Monthly Separations	Year to Date	% April	% Year to Date
Supervisors & Managers	23	0	4	0%	17%
Medical (MD,DO, LVN, RN, APN, PA, Psychologist)	48	1	7	2%	15%
Professionals (QMHP)	95	1	22	1%	23%
Professionals (QIDP)	28	0	2	0%	7%
Licensed Staff (LCDC, LPC...)	19	0	0	0%	0%
Business Services (Accounting)	14	0	0	0%	0%
Central Administration (HR, IT, Executive Director)	23	0	0	0%	0%
Program Support(Financial Counselors, QA, Training, Med. Records)	38	0	13	0%	34%
Nurse Technicians/Aides	17	0	1	0%	6%
Service/Maintenance	15	1	5	7%	33%
Direct Care (HCS, Respite, Life Skills)	29	0	4	0%	14%
<b>Total</b>	<b>349</b>	<b>3</b>	<b>58</b>		

**April Separations by Tenure**

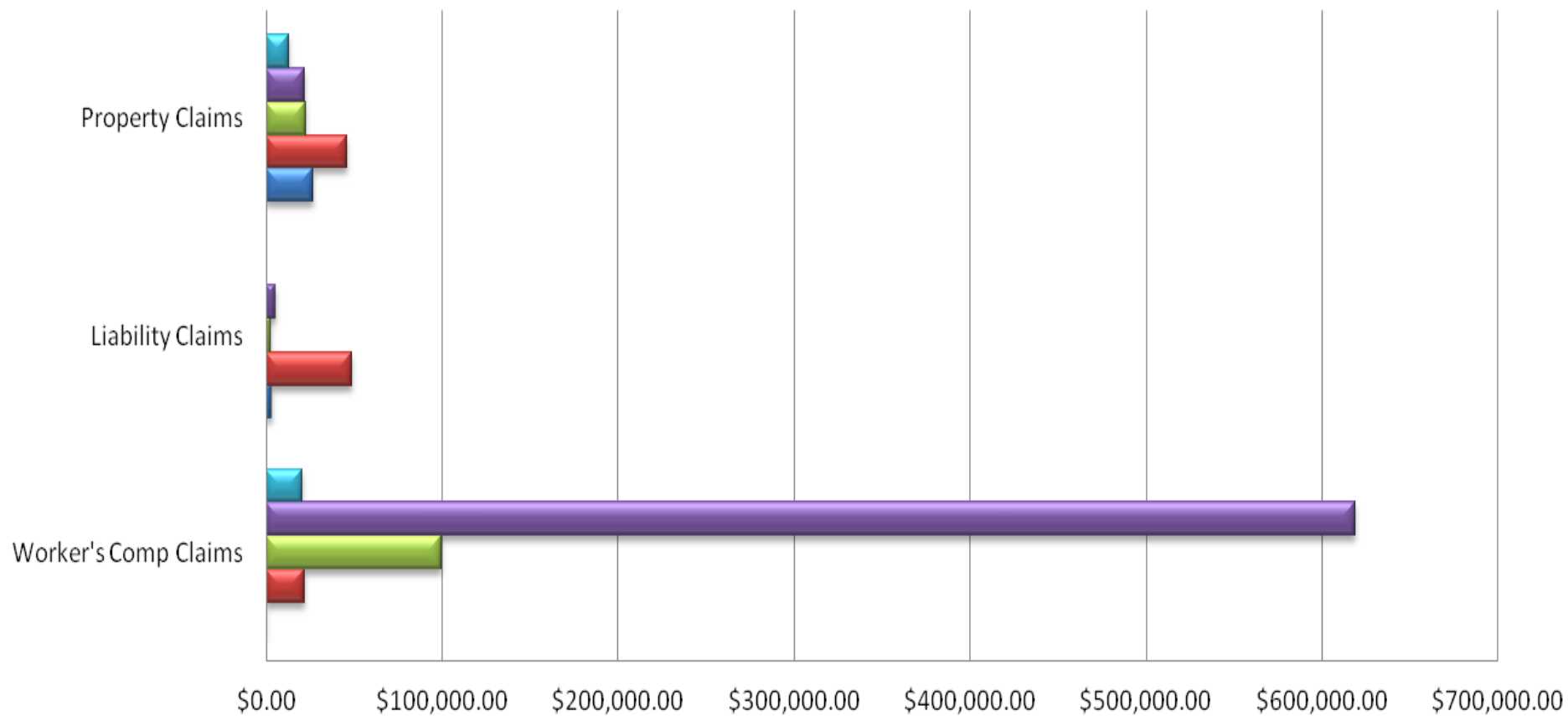


**Year to Date Separations by Tenure**



<b>Agenda Item:</b> Texas Council Risk Management Fund Claims Summary as of April 2017  <b>Committee:</b> Executive	<b>Board Meeting Date:</b>  May 25, 2017
<b>Background Information:</b>  None	
<b>Supporting Documentation:</b>  Texas Council Risk Management Fund Claims Summary as of April 2017	
<b>Recommended Action:</b>  <b>For Information Only</b>	

## TCRMF Claims Summary April 2017



	Worker's Comp Claims	Liability Claims	Property Claims
2013	\$20,263.00	\$0.00	\$12,869.00
2014	\$618,699.00	\$5,295.00	\$21,931.00
2015	\$99,223.00	\$2,556.00	\$22,505.00
2016	\$21,868.00	\$48,979.00	\$46,114.00
2017	\$607.00	\$2,912.00	\$26,625.00

<b>Agenda Item:</b> Texas Council Quarterly Board Meeting Update  <b>Committee:</b> Executive	<b>Board Meeting Date:</b>  May 25, 2017
<b>Background Information:</b>  The Texas Council has requested that Center representatives give updates to Trustees regarding their quarterly Board meeting. A verbal update will be given by Sharon Walker.	
<b>Supporting Documentation:</b>  Texas Council Staff Report	
<b>Recommended Action:</b>  <b>For Information Only</b>	

<b>Agenda Item:</b> Approve April 2017 Financial Statements  <b>Committee:</b> Business	<b>Board Meeting Date</b>  May 25, 2017
<b>Background Information:</b>  None	
<b>Supporting Documentation:</b>  April 2017 Financial Statements	
<b>Recommended Action:</b>  <b>Approve April 2017 Financial Statements</b>	



## April 2017 Financial Summary

Revenues for April 2017 were \$4,927,222 and operating expenses were \$2,583,785; resulting in a gain in operations of \$2,343,437. Capital Expenditures and Extraordinary Expenses for April were \$109,010; resulting in a gain of \$2,234,427. Total revenues were 152.91% of the monthly budgeted revenues and total expenses were 77.10% of the monthly budgeted expenses.

Year to date revenues are \$23,426,358 and operating expenses are \$20,104,308; leaving excess operating revenues of \$3,322,050. YTD Capital Expenditures and Extraordinary Expenses are \$1,319,583; resulting in a gain YTD of \$2,002,466. Total revenues are 110.41% of the YTD budgeted revenues and total expenses are 99.52% of the YTD budgeted expenses

### **REVENUES**

YTD Revenue items that are below the budget by more than \$10,000:

<b>Revenue Source</b>	<b>YTD Revenue</b>	<b>YTD Budget</b>	<b>% of Budget</b>	<b>\$ Variance</b>
Rehab – Title XIX	1,224,754	1,255,422	97.56%	30,668
DSHS – SA Treatment Youth	0	18,798	0	18,798

Rehab – Title XIX – This line item remains on the narrative mainly due to a continued decrease in the number of adult Medicaid clients being seen for Rehab services. We have seen this percentage continue to decrease over the past 3+ years. We will continue to monitor our data to ensure our revenue expectations are realistic.

DSHS – SA Treatment Youth – This line item represents the Substance Treatment program for youths. As of this time, we have not billed any services in FY 2017. This line item will continue to be monitored and adjustments will be made during the final revision if necessary.

### **EXPENSES**

YTD Individual line expense items that exceed the YTD budget by more than \$10,000:

<b>Expense Source</b>	<b>YTD Expenses</b>	<b>YTD Budget</b>	<b>% of Budget</b>	<b>\$ Variance</b>
Building Repairs & Maintenance	267,012	242,532	1.10%	24,480
Contract - Clinical	604,840	588,510	1.03%	16,330

Building Repairs & Maintenance – This line item continues to represent expenses for existing facilities. We anticipate this line will balance out after we sell the remaining vacant buildings.

Contract – Clinical – This line item represents clinical contracts across the agency. This amount is slightly over in a couple of cost centers. We will monitor this line to ensure that the budget is adequate through the remaining months of the fiscal year.

**TRI-COUNTY BEHAVIORAL HEALTHCARE**  
**CONSOLIDATED BALANCE SHEET**  
For the Month Ended April 30, 2017

	<b>TOTALS COMBINED FUNDS April 2017</b>	<b>TOTALS COMBINED FUNDS March 2017</b>	<b>Increase (Decrease)</b>
<b>ASSETS</b>			
<b>CURRENT ASSETS</b>			
Imprest Cash Funds	3,890	3,840	50
Cash on Deposit-General Fund	8,065,369	7,561,524	503,845
Cash on Deposit-Debt Fund			-
Accounts Receivable	1,867,578	1,753,758	113,820
Inventory	5,442	5,480	(38)
<b>TOTAL CURRENT ASSETS</b>	<b>9,942,279</b>	<b>9,324,602</b>	<b>617,677</b>
<b>FIXED ASSETS</b>	15,648,025	15,648,025	-
<b>OTHER ASSETS</b>	86,795	103,675	(16,880)
<b>TOTAL ASSETS</b>	<b>\$ 25,677,099</b>	<b>\$ 25,076,302</b>	<b>\$ 600,798</b>
<b>LIABILITIES, DEFERRED REVENUE, FUND BALANCES</b>			
<b>CURRENT LIABILITIES</b>	990,402	1,114,671	(124,269)
<b>NOTES PAYABLE</b>	607,292	607,292	-
<b>DEFERRED REVENUE</b>	1,528,353	3,043,881	(1,515,528)
<b>LONG-TERM LIABILITIES FOR</b>			
Line of Credit - Tradition Bank	266,754	286,967	(20,212)
Note Payable Prosperity Bank	502,720	515,750	(13,030)
First Financial loan tied to CD	1,100,000	1,100,000	-
First Financial Construction Loan	3,113,876	3,113,876	-
<b>EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR</b>			
General Fund	2,002,466	(231,961)	2,234,427
<b>FUND EQUITY</b>			
<b>RESTRICTED</b>			
Net Assets Reserved for Debt Service	(4,983,350)	(5,016,593)	33,243
Reserved for Debt Retirement	963,631	963,631	-
<b>COMMITTED</b>			
Net Assets-Property and Equipment	15,648,025	15,648,025	-
Reserved for Vehicles & Equipment Replacement	678,112	678,112	-
Reserved for Facility Improvement & Acquisitions	-	-	-
Reserved for Board Initiatives	1,464,542	1,464,542	-
Reserved for 1115 Waiver Programs	516,833	516,833	-
<b>ASSIGNED</b>			
Reserved for Workers' Compensation	274,409	274,409	-
Reserved for Current Year Budgeted Reserve	49,332	43,165	6,167
Reserved for Insurance Deductibles	100,000	100,000	-
Reserved for Accrued Paid Time Off	(607,292)	(607,292)	-
<b>UNASSIGNED</b>			
Unrestricted and Undesignated	1,460,994	1,460,994	-
<b>TOTAL LIABILITIES/FUND BALANCE</b>	<b>\$ 25,677,099</b>	<b>\$ 25,076,302</b>	<b>\$ 600,797</b>

**TRI-COUNTY BEHAVIORAL HEALTHCARE  
CONSOLIDATED BALANCE SHEET  
For the Month Ended April 30, 2017**

	<b>General Operating Funds</b>	<b>Memorandum Only Final August 2016</b>
<b>ASSETS</b>		
<b>CURRENT ASSETS</b>		
Imprest Cash Funds	3,890	2,985
Cash on Deposit-General Fund	8,065,369	4,841,244
Cash on Deposit-Debt Fund	-	-
Accounts Receivable	1,867,578	1,703,269
Inventory	5,442	6,455
<b>TOTAL CURRENT ASSETS</b>	<b>9,942,279</b>	<b>6,553,953</b>
<b>FIXED ASSETS</b>	<b>15,648,025</b>	<b>15,648,025</b>
<b>OTHER ASSETS</b>	<b>86,795</b>	<b>68,231</b>
	<b>\$ 25,677,099</b>	<b>\$ 22,270,209</b>
<b>LIABILITIES, DEFERRED REVENUE, FUND BALANCES</b>		
<b>CURRENT LIABILITIES</b>	990,402	1,235,254
<b>NOTES PAYABLE</b>	607,292	607,292
<b>DEFERRED REVENUE</b>	1,528,353	(107,050)
<b>LONG-TERM LIABILITIES FOR</b>		
Line of Credit - Tradition Bank	266,754	429,919
Note Payable Prosperity Bank	502,720	606,132
First Financial loan tied to CD	1,100,000	1,100,000
First Financial Construction Loan	3,113,876	3,113,876
<b>EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR</b>		
General Fund	2,002,466	(1,941,141)
<b>FUND EQUITY</b>		
<b>RESTRICTED</b>		
Net Assets Reserved for Debt service-Restricted	(4,983,350)	(5,249,927)
Reserved for Debt Retirement	963,631	963,631
<b>COMMITTED</b>		
Net Assets-Property and Equipment-Committed	15,648,025	15,648,025
Reserved for Vehicles & Equipment Replacement	678,112	678,112
Reserved for Facility Improvement & Acquisitions	-	2,136,013
Reserved for Board Initiatives	1,464,542	1,500,000
Reserved for 1115 Waiver Programs	516,833	516,833
<b>ASSIGNED</b>		
Reserved for Workers' Compensation-Assigned	274,409	274,409
Reserved for Current Year Budgeted Reserve -Assigned	49,332	-
Reserved for Insurance Deductibles-Assigned	100,000	100,000
Reserved for Accrued Paid Time Off	(607,292)	(607,292)
<b>UNASSIGNED</b>		
Unrestricted and Undesignated	1,460,994	1,266,122
<b>TOTAL LIABILITIES/FUND BALANCE</b>	<b>\$ 25,677,099</b>	<b>\$ 22,270,209</b>

**TRI-COUNTY BEHAVIORAL HEALTHCARE**  
**Revenue and Expense Summary**  
**For the Month Ended April 2017**  
**and Year To Date as of April 2017**

<b>INCOME:</b>	<b>MONTH OF April 2017</b>	<b>YTD April 2017</b>
Local Revenue Sources	2,515,639	3,530,537
Earned Income	1,218,023	9,652,109
General Revenue-Contract	1,193,560	10,243,711
<b>TOTAL INCOME</b>	<b>\$ 4,927,222</b>	<b>\$ 23,426,358</b>
<b>EXPENSES:</b>		
Salaries	1,486,389	10,991,026
Employee Benefits	234,661	2,173,473
Medication Expense	56,373	473,899
Travel-Board/Staff	41,160	310,926
Building Rent/Maintenance	23,357	286,426
Consultants/Contracts	480,716	4,034,181
Other Operating Expenses	261,131	1,834,377
<b>TOTAL EXPENSES</b>	<b>\$ 2,583,785</b>	<b>\$ 20,104,308</b>
<b>Excess(Deficiency) of Revenues over Expenses before Capital Expenditures</b>	<b>\$ 2,343,437</b>	<b>\$ 3,322,050</b>
<b>CAPITAL EXPENDITURES</b>		
Capital Outlay-FF&E, Automobiles, Building	19,926	836,541
Capital Outlay-Debt Service	89,084	483,042
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>\$ 109,010</b>	<b>\$ 1,319,583</b>
<b>GRAND TOTAL EXPENDITURES</b>	<b>\$ 2,692,795</b>	<b>\$ 21,423,891</b>
<b>Excess (Deficiency) of Revenues and Expenses</b>	<b>\$ 2,234,427</b>	<b>\$ 2,002,466</b>

<b>Debt Service and Fixed Asset Fund:</b>		
Debt Service	89,084	483,042
<b>Excess(Deficiency) of revenues over Expenses</b>	<b>89,084</b>	<b>483,042</b>

**TRI-COUNTY BEHAVIORAL HEALTHCARE**  
**Revenue and Expense Summary**  
**Compared to Budget**  
**Year to Date as of April 2017**

	YTD April 2017	APPROVED BUDGET	Increase (Decrease)
<b>INCOME:</b>			
Local Revenue Sources	3,530,537	1,397,405	2,133,132
Earned Income	9,652,109	9,640,654	11,455
General Revenue-Contract	10,243,711	10,180,084	63,627
<b>TOTAL INCOME</b>	<b>\$ 23,426,358</b>	<b>\$ 21,218,143</b>	<b>\$ 2,208,215</b>
<b>EXPENSES:</b>			
Salaries	10,991,026	11,013,492	(22,466)
Employee Benefits	2,173,473	2,175,999	(2,526)
Medication Expense	473,899	469,108	4,791
Travel-Board/Staff	310,926	313,174	(2,248)
Building Rent/Maintenance	286,426	257,532	28,894
Consultants/Contracts	4,034,181	4,171,654	(137,473)
Other Operating Expenses	1,834,377	1,846,534	(12,157)
<b>TOTAL EXPENSES</b>	<b>\$ 20,104,308</b>	<b>\$ 20,247,493</b>	<b>\$ (143,185)</b>
<b>Excess(Deficiency) of Revenues over Expenses before Capital Expenditures</b>	<b>\$ 3,322,050</b>	<b>\$ 970,650</b>	<b>\$ 2,351,400</b>
<b>CAPITAL EXPENDITURES</b>			
Capital Outlay-FF&E, Automobiles	836,541	826,199	10,342
Capital Outlay-Debt Service	483,042	484,359	(1,317)
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>\$ 1,319,583</b>	<b>\$ 1,310,558</b>	<b>\$ 9,025</b>
<b>GRAND TOTAL EXPENDITURES</b>	<b>\$ 21,423,891</b>	<b>\$ 21,558,051</b>	<b>\$ (134,160)</b>
<b>Excess (Deficiency) of Revenues and Expenses</b>	<b>\$ 2,002,466</b>	<b>\$ (339,908)</b>	<b>\$ 2,342,374</b>

**Debt Service and Fixed Asset Fund:**

Debt Service	483,042	484,359	(1,317)
<b>Excess(Deficiency) of revenues over Expenses</b>	<b>483,042</b>	<b>484,359</b>	<b>(1,317)</b>

**TRI-COUNTY BEHAVIORAL HEALTHCARE**  
**Revenue and Expense Summary**  
**Compared to Budget**  
**For the Month Ended April 2017**

<b>INCOME:</b>	<b>MONTH OF April 2017</b>	<b>APPROVED BUDGET</b>	<b>Increase (Decrease)</b>
Local Revenue Sources	2,515,639	619,250	1,896,389
Earned Income	1,218,023	1,432,357	(214,334)
General Revenue-Contract	1,193,560	1,170,769	22,791
<b>TOTAL INCOME</b>	<b>\$ 4,927,222</b>	<b>\$ 3,222,376</b>	<b>\$ 1,704,846</b>
<b>EXPENSES:</b>			
Salaries	1,486,389	1,254,553	231,836
Employee Benefits	234,661	169,714	64,947
Medication Expense	56,373	59,608	(3,235)
Travel-Board/Staff	41,160	50,691	(9,531)
Building Rent/Maintenance	23,357	138,117	(114,760)
Consultants/Contracts	480,716	613,038	(132,322)
Other Operating Expenses	261,131	266,554	(5,423)
<b>TOTAL EXPENSES</b>	<b>\$ 2,583,785</b>	<b>\$ 2,552,275</b>	<b>\$ 31,510</b>
<b>Excess(Deficiency) of Revenues over Expenses before Capital Expenditures</b>	<b>\$ 2,343,437</b>	<b>\$ 670,101</b>	<b>\$ 1,673,336</b>
<b>CAPITAL EXPENDITURES</b>			
Capital Outlay-FF&E, Automobiles	19,926	734,467	(714,541)
Capital Outlay-Debt Service	89,084	236,766	(147,682)
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>\$ 109,010</b>	<b>\$ 971,233</b>	<b>\$ (862,223)</b>
<b>GRAND TOTAL EXPENDITURES</b>	<b>\$ 2,692,795</b>	<b>\$ 3,523,508</b>	<b>\$ (830,713)</b>
<b>Excess (Deficiency) of Revenues and Expenses</b>	<b>\$ 2,234,427</b>	<b>\$ (301,132)</b>	<b>\$ 2,535,559</b>

**Debt Service and Fixed Asset Fund:**

Debt Service	89,084	236,766	(147,682)
<b>Excess(Deficiency) of revenues over Expenses</b>	<b>89,084</b>	<b>236,766</b>	<b>(147,682)</b>

**TRI-COUNTY BEHAVIORAL HEALTHCARE**  
**Revenue and Expense Summary**  
**With April 2016 Comparative Data**  
**Year to Date as of April 2017**

<b>INCOME:</b>	<b>YTD April 2017</b>	<b>YTD April 2016</b>	<b>Increase (Decrease)</b>
Local Revenue Sources	3,530,537	2,990,884	539,653
Earned Income	9,652,109	9,271,643	380,466
General Revenue-Contract	10,243,711	10,088,998	154,713
<b>TOTAL INCOME</b>	<b>\$ 23,426,358</b>	<b>\$ 22,351,525</b>	<b>\$ 1,074,833</b>
<b>EXPENSES:</b>			
Salaries	10,991,026	10,692,664	298,362
Employee Benefits	2,173,473	2,080,764	92,709
Medication Expense	473,899	488,856	(14,957)
Travel-Board/Staff	310,926	318,089	(7,163)
Building Rent/Maintenance	286,426	202,600	83,826
Consultants/Contracts	4,034,181	3,718,414	315,767
Other Operating Expenses	1,834,377	1,724,232	110,145
<b>TOTAL EXPENSES</b>	<b>\$ 20,104,308</b>	<b>\$ 19,225,619</b>	<b>\$ 878,689</b>
<b>Excess(Deficiency) of Revenues over Expenses before Capital Expenditures</b>	<b>\$ 3,322,050</b>	<b>\$ 3,125,906</b>	<b>\$ 196,144</b>
<b>CAPITAL EXPENDITURES</b>			
Capital Outlay-FF&E, Automobiles	836,541	2,349,462	(1,512,921)
Capital Outlay-Debt Service	483,042	286,713	196,329
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>\$ 1,319,583</b>	<b>\$ 2,636,175</b>	<b>\$ (1,316,592)</b>
<b>GRAND TOTAL EXPENDITURES</b>	<b>\$ 21,423,891</b>	<b>\$ 21,861,794</b>	<b>\$ (437,903)</b>
<b>Excess (Deficiency) of Revenues and Expenses</b>	<b>\$ 2,002,466</b>	<b>\$ 489,731</b>	<b>\$ 1,512,735</b>

**Debt Service and Fixed Asset Fund:**

Debt Service	483,042	286,713	196,329
<b>Excess(Deficiency) of revenues over Expenses</b>	<b>483,042</b>	<b>286,713</b>	<b>196,329</b>

**TRI-COUNTY BEHAVIORAL HEALTHCARE**  
**Revenue and Expense Summary**  
**With April 2016 Comparative Data**  
**For the Month Ended April 2017**

<b>INCOME:</b>	<b>MONTH OF April 2017</b>	<b>MONTH OF April 2016</b>	<b>Increase (Decrease)</b>
Local Revenue Sources	2,515,639	103,292	2,412,347
Earned Income	1,218,023	1,105,751	112,272
General Revenue-Contract	1,193,560	1,421,227	(227,667)
<b>TOTAL INCOME</b>	<b>\$ 4,927,222</b>	<b>\$ 2,630,270</b>	<b>\$ 2,296,952</b>
Salaries	1,486,389	1,466,013	20,376
Employee Benefits	234,661	266,353	(31,692)
Medication Expense	56,373	100,146	(43,773)
Travel-Board/Staff	41,160	39,687	1,473
Building Rent/Maintenance	23,357	28,646	(5,289)
Consultants/Contracts	480,716	531,656	(50,940)
Other Operating Expenses	261,131	203,300	57,831
<b>TOTAL EXPENSES</b>	<b>\$ 2,583,785</b>	<b>\$ 2,635,801</b>	<b>\$ (52,016)</b>
<b>Excess(Deficiency) of Revenues over Expenses before Capital Expenditures</b>	<b>\$ 2,343,437</b>	<b>\$ (5,531)</b>	<b>\$ 2,348,968</b>
<b>CAPITAL EXPENDITURES</b>			
Capital Outlay-FF&E, Automobiles	19,926	-	19,926
Capital Outlay-Debt Service	89,084	37,411	51,673
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>\$ 109,010</b>	<b>\$ 37,411</b>	<b>\$ 71,599</b>
<b>GRAND TOTAL EXPENDITURES</b>	<b>\$ 2,692,795</b>	<b>\$ 2,673,212</b>	<b>\$ 19,583</b>
<b>Excess (Deficiency) of Revenues and Expenses</b>	<b>\$ 2,234,427</b>	<b>\$ (42,942)</b>	<b>\$ 2,277,369</b>

**Debt Service and Fixed Asset Fund:**

Debt Service	89,084	37,411	51,673
<b>Excess(Deficiency) of revenues over Expenses</b>	<b>89,084</b>	<b>37,411</b>	<b>51,673</b>



**TRI-COUNTY BEHAVIORAL HEALTHCARE**  
**Revenue and Expense Summary**  
**With March 2017 Comparative Data**  
**For the Month Ended April 2017**

<b>INCOME:</b>	<b>MONTH OF April 2017</b>	<b>MONTH OF March 2017</b>	<b>Increase (Decrease)</b>
Local Revenue Sources	2,515,639	96,023	2,419,616
Earned Income	1,218,023	1,201,350	16,674
General Revenue-Contract	1,193,560	1,270,395	(76,835)
<b>TOTAL INCOME</b>	<b>\$ 4,927,222</b>	<b>\$ 2,567,768</b>	<b>\$ 2,359,454</b>
<b>EXPENSES:</b>			
Salaries	1,486,389	1,328,512	157,876
Employee Benefits	234,661	282,663	(48,002)
Medication Expense	56,373	75,309	(18,936)
Travel-Board/Staff	41,160	28,901	12,258
Building Rent/Maintenance	23,357	17,576	5,781
Consultants/Contracts	480,716	539,969	(59,253)
Other Operating Expenses	261,131	268,687	(7,556)
<b>TOTAL EXPENSES</b>	<b>\$ 2,583,785</b>	<b>\$ 2,541,617</b>	<b>\$ 42,168</b>
<b>Excess(Deficiency) of Revenues over Expenses before Capital Expenditures</b>	<b>\$ 2,343,437</b>	<b>\$ 26,151</b>	<b>\$ 2,317,286</b>
<b>CAPITAL EXPENDITURES</b>			
Capital Outlay-FF&E, Automobiles	19,926	38,347	(18,421)
Capital Outlay-Debt Service	89,084	64,012	25,072
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>\$ 109,010</b>	<b>\$ 102,359</b>	<b>\$ 6,650</b>
<b>GRAND TOTAL EXPENDITURES</b>	<b>\$ 2,692,795</b>	<b>\$ 2,643,977</b>	<b>\$ 48,819</b>
<b>Excess (Deficiency) of Revenues and Expenses</b>	<b>\$ 2,234,427</b>	<b>\$ (76,209)</b>	<b>\$ 2,310,636</b>

**Debt Service and Fixed Asset Fund:**

Debt Service	89,084	64,012	25,072
<b>Excess(Deficiency) of revenues over Expenses</b>	<b>89,084</b>	<b>64,012</b>	<b>25,072</b>

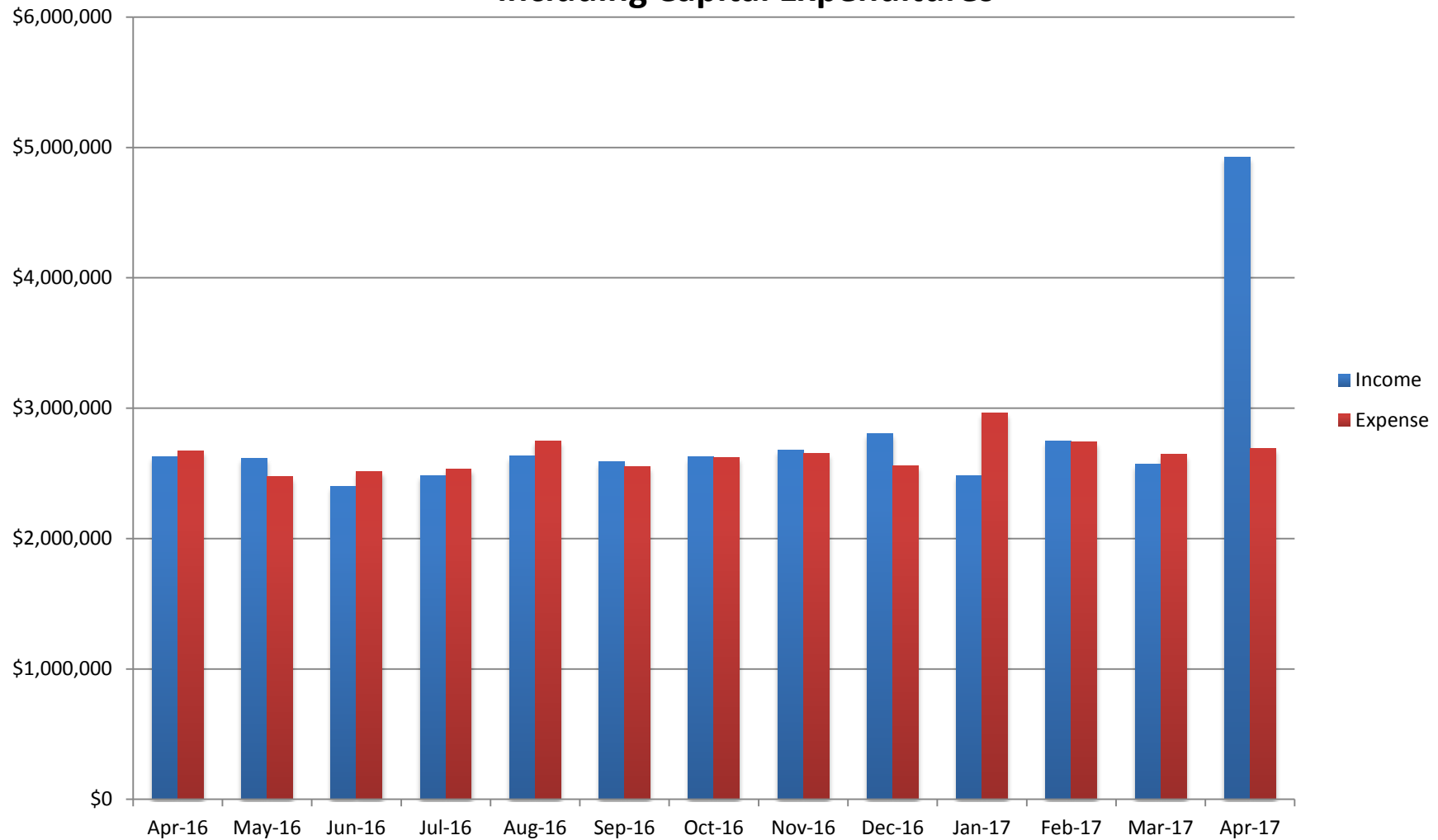
**TRI-COUNTY BEHAVIORAL HEALTHCARE**  
**Revenue and Expense Summary by Service Type**  
**Compared to Budget**  
**Year To Date as of April 2017**

	YTD Mental Health April 2017	YTD IDD April 2017	YTD Other Services April 2017	YTD Agency Total April 2017	YTD Approved Budget April 2017	Increase (Decrease)
<b>INCOME:</b>						
Local Revenue Sources	2,772,557	858,939	(100,958)	3,530,537	1,397,405	2,133,132
Earned Income	2,602,462	4,261,896	2,787,752	9,652,109	9,640,654	11,455
General Revenue-Contract	8,874,946	1,368,766	-	10,243,711	10,180,084	63,627
<b>TOTAL INCOME</b>	<b>\$ 14,249,965</b>	<b>\$ 6,489,601</b>	<b>\$ 2,686,794</b>	<b>\$ 23,426,357</b>	<b>\$ 21,218,143</b>	<b>\$ 2,208,214</b>
<b>EXPENSES:</b>						
Salaries	6,999,354	2,213,300	1,778,372	10,991,026	11,013,492	(22,466)
Employee Benefits	1,366,770	478,124	328,579	2,173,473	2,175,999	(2,526)
Medication Expense	367,664		106,234	473,899	469,108	4,791
Travel-Board/Staff	177,811	94,612	38,504	310,926	313,174	(2,248)
Building Rent/Maintenance	175,215	74,040	37,172	286,426	257,532	28,894
Consultants/Contracts	1,557,035	2,362,379	114,768	4,034,181	4,140,654	(106,473)
Other Operating Expenses	1,058,433	448,821	327,122	1,834,377	1,846,534	(12,157)
<b>TOTAL EXPENSES</b>	<b>\$ 11,702,282</b>	<b>\$ 5,671,276</b>	<b>\$ 2,730,751</b>	<b>\$ 20,104,308</b>	<b>\$ 20,216,493</b>	<b>\$ (112,185)</b>
<b>Excess(Deficiency) of Revenues over Expenses before Capital Expenditures</b>	<b>\$ 2,547,683</b>	<b>\$ 818,325</b>	<b>\$ (43,957)</b>	<b>\$ 3,322,049</b>	<b>\$ 1,001,650</b>	<b>\$ 2,320,399</b>
<b>CAPITAL EXPENDITURES</b>						
Capital Outlay-FF&E, Automobiles	482,002	213,676	140,865	836,541	826,199	10,342
Capital Outlay-Debt Service	203,797	76,100	203,145	483,042	484,359	(1,317)
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>\$ 685,799</b>	<b>\$ 289,776</b>	<b>\$ 344,010</b>	<b>\$ 1,319,583</b>	<b>\$ 1,310,558</b>	<b>\$ 9,025</b>
<b>GRAND TOTAL EXPENDITURES</b>	<b>\$ 12,388,081</b>	<b>\$ 5,961,052</b>	<b>\$ 3,074,761</b>	<b>\$ 21,423,891</b>	<b>\$ 21,527,051</b>	<b>\$ (103,160)</b>
<b>Excess (Deficiency) of Revenues and Expenses</b>	<b>\$ 1,861,884</b>	<b>\$ 528,549</b>	<b>\$ (387,967)</b>	<b>\$ 2,002,466</b>	<b>\$ (308,908)</b>	<b>\$ 2,311,374</b>
<b>Debt Service and Fixed Asset Fund:</b>						
Debt Service	203,797	76,100	203,145	483,042	484,359	(280,562)
		-	-	-	-	-
<b>Excess(Deficiency) of revenues over Expenses</b>	<b>203,797</b>	<b>76,100</b>	<b>203,145</b>	<b>483,042</b>	<b>484,359</b>	<b>(280,562)</b>

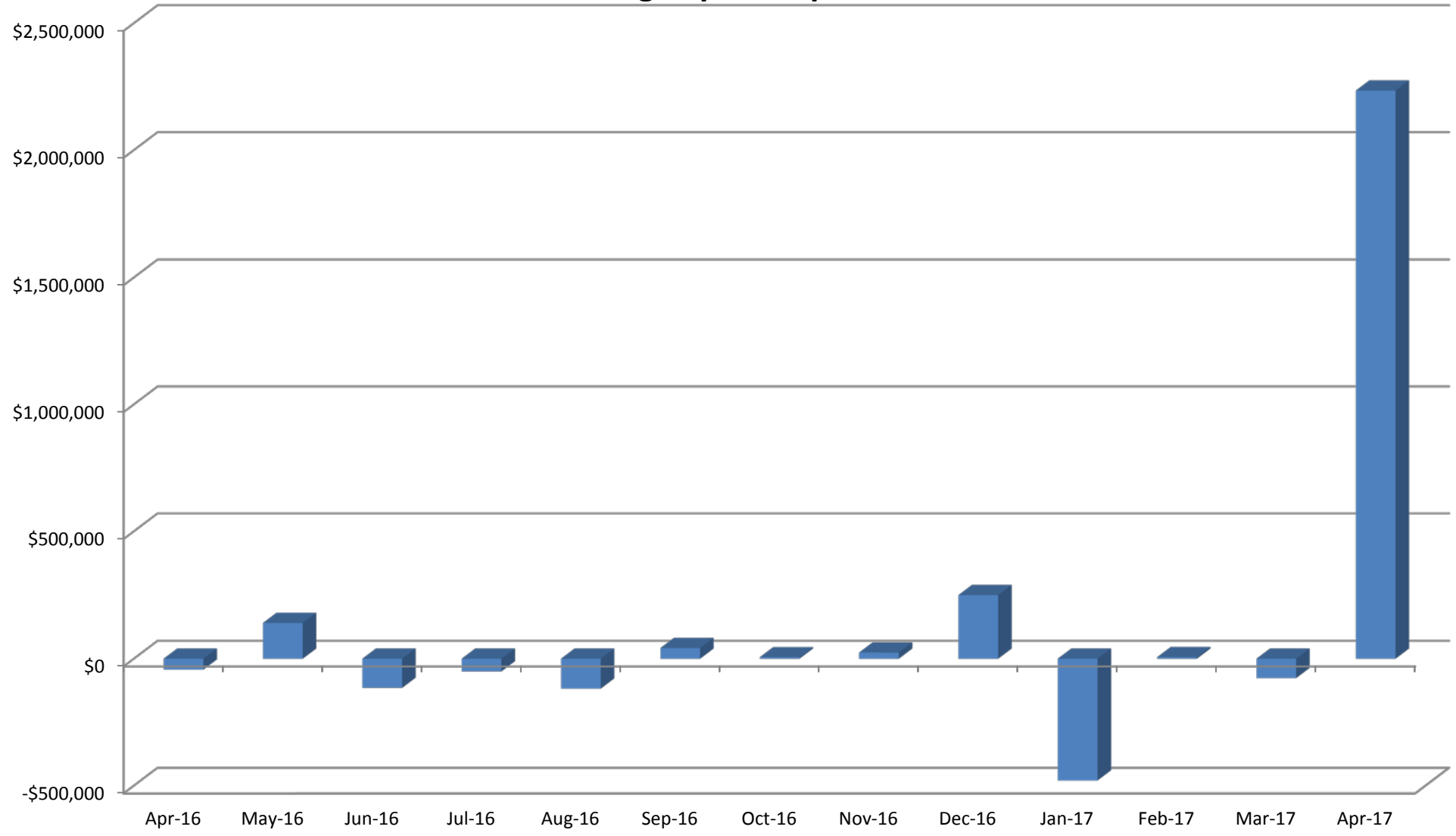
# TRI-COUNTY BEHAVIORAL HEALTHCARE

## Income and Expense

### including Capital Expenditures



**TRI-COUNTY BEHAVIORAL HEALTHCARE**  
**Income after Expense**  
**including Captial Expenditures**



<b>Agenda Item:</b> Approve PETC Air Conditioning Software System Change	<b>Board Meeting Date:</b>
<b>Committee:</b> Business	May 25, 2017
<p><b>Background Information:</b></p> <p>The PETC was built with a proprietary heating/cooling system from Digital Air Control (DAC). The proprietary nature of the system limits who can perform maintenance on the system. As well, the system's temperature is controlled by online access.</p> <p>The Maintenance department solicited quotes to make the system non-proprietary, to house the system on Tri-County servers, and redesign the system to have 6-7 control zones with individual and physical wall controls within those zones.</p> <p>We have received a quote from Mechanical 360 for \$46,250. Additional quotes will be provided at the Board Meeting.</p>	
<b>Supporting Documentation:</b>	
Quotes from Vendors	
<b>Recommended Action:</b>	
<b>Approve Replacement of Air Conditioning Software System at the PETC</b>	



7536 Harms Rd Ste. D  
Houston, TX 77041

# Estimate

Date	Estimate #
4/11/2017	730

Ph. 2815068334

E-mail amanda@mechanical360llc.com

Name / Address
Tri County Services PO Box 3067 Conroe, TX 77305

Job location			
Tri County MRMH Services			
Description	Qty	Rate	Total
We propose to provide and Install new Honeywell WEBs open protocol control system and demo existing DAC control BAS. The Honeywell system is HTML5 based and is encrypted. - The existing communication and sensor wiring will be reused to keep cost down. - Each VAV box will receive a new local controller and all new sensors due to the existing controllers and sensors not being compatible. Also the rooms will receive a new temperature sensor and allow each to have a temperature slide with adjustable temperature swing. - Both RTU's will receive new controllers and sensors. - New graphics will be created displaying dynamic temperature displays and hyperlinks to equipment and floorplans. Custom trends, schedules and alarms will also be created. - A (1) time (8) hour owner training is included and (3) remote login supports if outside access is given. - Quote includes a one-year labor install warranty and manufacture provided parts warranty. - Keep work areas clean and free of debris. - All work to be priced and completed after normal working hours. Your cost for this project will be \$ 46,250.00 plus applicable taxes	1	46,250.00	46,250.00
<b>Subtotal</b>			\$46,250.00
<b>Sales Tax (8.25%)</b>			\$0.00
<b>Total</b>			\$46,250.00



**Innovative Cooling & Energy Solutions, Inc.**

6 Kensington Ct.  
 Conroe Tx. 77304  
 Phone: 936-788-5263  
 Fax: 936-494-0859

Email: info@innovativecoolingtx.com  
 Website: www.innovativecoolingtx.com

**QUOTE**

DATE	INVOICE #	CUST #
5/22/2017	0000003867	0000609



**BILL TO:**  
 Tri-County  
 706 Old Montgomery Rd  
 Conroe TX 77301

936-521-6162

**SHIP TO:**  
 Tri-County  
 706 Old Montgomery Rd  
 Conroe TX 77301

P.O. NUMBER		TERMS	SALES PERSON	
		COD		
QUAN	DESCRIPTION	PRICE EACH	AMOUNT	
1.00	CIV-OPNPL I-VU OPEN PLUS - SUPPORTS UP TO 750			
	BACNET CONTROLLERS AND CCN CONTROLLERS			
1.00	XT-RB I-VU XT ROUTER - SUPPORTS UP TO 60			
	CONTROLLERS ON BACNET MS/TP AND 99 ON BACNET			
	ARCNET NETWORKS			
	GRAPHICS			
1.00	SCE-20N2008LP 20X20X8 NEMA 1 ENCLOSURE			
1.00	SCE-20N20MPP 20X20 PERFORATED SUB PANEL			
1.00	PSB100AB10 100VA POWER CENTER W/ OUTLET			
1.00	BT485 PACKAGE OF 16 TERMINATING BOARDS ( ADDS			
	TERMINATION AND BIAS)			
24.00	OPN-VAVB3 VAV ZONE FAN TERMINAL CONTROLLER			
24.00	CARRIER ZS PRO;SPACE TEMP SENSOR W LCD,			
	VERRIDE, SETPOINT ADJ AND COMM PORT			
24.00	DUCT SENSOR WITHOUT BOX 4' W/6' LEAD			
2.00	UPC OPEN- ACCEPTS FACTORY OR CUSTOM			
	PROGRAMMING TO INTERFACE WITH CCN EQUIPMENT			
1.00	UC OPEN XP - PROGRAMMABLE CONTROLLER (6- BO,			
	12-UI, 6 -AO			
	10K FREEZER TEMP PROBE			
	GLYCOL BOTTLE / MOUNTING BRACKET			
	WIRING			
35.00	Commercial labor	127.50	4,462.50	
1.00	This is a quote to provide a turn key solution to change out	36,500.00	36,500.00	
	control system to a carrier I-VU system. Includes remote			
	access and local work station with no monitoring fees. Thank			
	you.			
		<b>SUBTOTAL</b>	<b>\$40,962.50</b>	
		<b>TAX</b>	<b>\$3,011.25</b>	
		<b>TOTAL</b>	<b>\$43,973.75</b>	

PRINTED NAME  
 SIGNATURE  
 DATE

<p><b>Agenda Item:</b> Approve the FY 2018-FY 2019 HHSC IDD Performance Contract</p> <p><b>Committee:</b> Business</p>	<p><b>Board Meeting Date</b></p> <p>May 25, 2017</p>
<p><b>Background Information:</b></p> <p>Center staff has reviewed the proposed HHSC IDD (formerly DADS) Performance Contract and has noted a few changes from the previous biennial contract Amendment.</p> <p>The most substantive change to the FY18 – FY19 contract includes the performance compliance expectation of 95% to conduct Community Living Options (CLO) at a service coordinator’s first visit and then at least every 6 months thereafter to a designated individual residing in a nursing facility. This is to ensure the individual is aware that other less restrictive living options may be available. An additional change is an increase in the current requirement for the Nursing Facility Diversion Coordinator from one year experience to two.</p> <p>Due to possible upcoming legislative changes, amendments to this contract may be forthcoming.</p> <p>Core funding for LIDDA services is \$2,130,449.51. No changes from the previous contract.</p>	
<p><b>Supporting Documentation:</b></p> <p>Contract Available for Review at the Board Meeting</p>	
<p><b>Recommended Action:</b></p> <p><b>Approve FY 2018 – FY 2019 HHSC IDD Authority Services Performance Contract</b></p>	



<b>Agenda Item:</b> Consider Selection of FY 2017 Auditor	<b>Board Meeting Date</b>  May 25, 2017																
<b>Committee:</b> Business																	
<b>Background Information:</b>  Each year, Tri-County Behavioral Healthcare is required to select an outside auditor for our financial audit. We have previously used the following auditors:																	
<table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="padding: 5px;">FY 1992</td> <td style="padding: 5px;">Pircher and Co.</td> </tr> <tr> <td style="padding: 5px;">FY 1988 - 1993</td> <td style="padding: 5px;">Kenneth Davis</td> </tr> <tr> <td style="padding: 5px;">FY 1999</td> <td style="padding: 5px;">Vetter &amp; Taboada, PC</td> </tr> <tr> <td style="padding: 5px;">FY 2000 - 2003</td> <td style="padding: 5px;">David N. Miller, LLP</td> </tr> <tr> <td style="padding: 5px;">FY 2004 - 2006</td> <td style="padding: 5px;">McConnell &amp; Jones, LLP</td> </tr> <tr> <td style="padding: 5px;">FY 2007 - 2010</td> <td style="padding: 5px;">David N. Miller, LLP</td> </tr> <tr> <td style="padding: 5px;">FY 2011 - 2012</td> <td style="padding: 5px;">Carlos Taboada &amp; Company, PC (Carlos Taboada previously worked for David N. Miller, LLP and opened his own business 7/11.)</td> </tr> <tr> <td style="padding: 5px;">FY 2013 - 2016</td> <td style="padding: 5px;">Scott, Singleton, Fincher and Company, PC</td> </tr> </table>		FY 1992	Pircher and Co.	FY 1988 - 1993	Kenneth Davis	FY 1999	Vetter & Taboada, PC	FY 2000 - 2003	David N. Miller, LLP	FY 2004 - 2006	McConnell & Jones, LLP	FY 2007 - 2010	David N. Miller, LLP	FY 2011 - 2012	Carlos Taboada & Company, PC (Carlos Taboada previously worked for David N. Miller, LLP and opened his own business 7/11.)	FY 2013 - 2016	Scott, Singleton, Fincher and Company, PC
FY 1992	Pircher and Co.																
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FY 2013 - 2016	Scott, Singleton, Fincher and Company, PC																
The FY 2017 DSHS and DADS Performance Contracts state that the Center shall “engage the same audit firm no more than six (6) consecutive years from the initial date of engagement.”																	
<b>Supporting Documentation:</b>  None																	
<b>Recommended Action:</b>  <b>Direct Staff to Solicit an Audit Engagement Letter from Scott, Singleton, Fincher and Company, PC or Solicit Proposals for FY 2017 Independent Financial Audit.</b>																	

<b>Agenda Item:</b> Board of Trustees Unit Financial Statement as of April 2017  <b>Committee:</b> Business	<b>Board Meeting Date</b>  May 25, 2017
<b>Background Information:</b>  None	
<b>Supporting Documentation:</b>  April 2017 Board of Trustees Unit Financial Statements	
<b>Recommended Action:</b>  <b>For Information Only</b>	

**Unit Financial Statement**  
FY 2017

	<b>April 2017 Actuals</b>	<b>April 2017 Budgeted</b>	<b>Variance</b>	<b>YTD Actual</b>	<b>YTD Budget</b>	<b>Variance</b>	<b>Percent</b>	<b>Budget</b>
<b>Revenues</b>								
80103998 Allocated Revenue	\$ 2,600.00	\$ 2,600.00	\$ -	\$ 20,795.00	\$ 20,795.00	\$ -	100.00%	\$ 31,195.00
<b>Total Revenue</b>	<b>\$ 2,600.00</b>	<b>\$ 2,600.00</b>	<b>\$ -</b>	<b>\$ 20,795.00</b>	<b>\$ 20,795.00</b>	<b>\$ -</b>	<b>100.00%</b>	<b>\$ 31,195.00</b>
<b>Expenses</b>								
80105236 Employee Recognition	\$ 65.00	\$ -	\$ 65.00	\$ 65.00	\$ -	\$ 65.00	0.00%	\$ -
80105275 Food Items	\$ 555.32	\$ (200.00)	\$ 755.32	\$ 1,460.41	\$ 1,200.00	\$ 260.41	121.70%	\$ 2,400.00
80105320 Insurance-Worker Compensation	\$ 1.76	\$ 17.00	\$ (15.24)	\$ 41.30	\$ 132.00	\$ (90.70)	31.29%	\$ 200.00
80105388 Legal Fees	\$ 1,500.00	\$ 1,500.00	\$ -	\$ 12,000.00	\$ 12,000.00	\$ -	100.00%	\$ 18,000.00
80155605 Postage-Express Mail	\$ -	\$ 4.00	\$ (4.00)	\$ -	\$ 34.00	\$ (34.00)	0.00%	\$ 50.00
80105715 Supplies-Office	\$ -	\$ 20.00	\$ (20.00)	\$ 12.00	\$ 165.00	\$ (153.00)	0.00%	\$ 245.00
80105750 Training	\$ -	\$ 300.00	\$ (300.00)	\$ 1,075.00	\$ 2,400.00	\$ (1,325.00)	44.79%	\$ 3,600.00
80105755 Travel - Local	\$ -	\$ (225.00)	\$ 225.00	\$ 199.00	\$ 300.00	\$ (101.00)	66.33%	\$ 900.00
80105757 Travel - Non-local Mileage/Air	\$ 125.42	\$ 150.00	\$ (24.58)	\$ 1,721.42	\$ 1,200.00	\$ 521.42	143.45%	\$ 1,800.00
80105758 Travel - Non-local Hotel	\$ 2,280.42	\$ 250.00	\$ 2,030.42	\$ 2,997.32	\$ 2,000.00	\$ 997.32	149.87%	\$ 3,000.00
80105759 Travel - Meals	\$ -	\$ 83.00	\$ (83.00)	\$ 70.68	\$ 668.00	\$ (597.32)	10.58%	\$ 1,000.00
<b>Total Expenses</b>	<b>\$ 4,527.92</b>	<b>\$ 1,899.00</b>	<b>\$ 2,628.92</b>	<b>\$ 19,642.13</b>	<b>\$ 20,099.00</b>	<b>\$ (456.87)</b>	<b>97.73%</b>	<b>\$ 31,195.00</b>
<b>Total Revenue minus Expenses</b>	<b>\$ (1,927.92)</b>	<b>\$ 701.00</b>	<b>\$ (2,628.92)</b>	<b>\$ 1,152.87</b>	<b>\$ 696.00</b>	<b>\$ 456.87</b>	<b>2.27%</b>	<b>\$ -</b>

# UPCOMING MEETINGS

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## **July 27<sup>th</sup>, 2017 – Board Meeting**

- Approve Minutes from May 25, 2017 Board Meeting
- Longevity Recognition Presentations – May through July 2017
- Community Resources Report
- Consumer Services Reports for May & June 2017
- Program Updates
- FY 2017 Goals & Objectives Progress Report
- 3<sup>rd</sup> Quarter FY 2017 Corporate Compliance & Quality Management Report
- 4<sup>th</sup> Quarter FY 2017 Corporate Compliance Training
- Medicaid 1115 Transformation Waiver Project Status Report
- Appoint Nominating Committee for FY 2018 Board Officers
- Appoint Executive Director Evaluation Committee
- Personnel Reports for May & June 2017
- Texas Council Risk Management Fund Claims Summaries for May & June 2017
- Approve Financial Statements for May & June 2017
- Approve Recommendation for Tri-County Employee Health Insurance & Ancillary Plans
- 3<sup>rd</sup> Quarter FY 2017 Investment Report
- Board of Trustees Unit Financial Statements for May & June 2017
- Cleveland Supported Housing, Inc. Update
- Building Consolidation Update

## **August 24<sup>th</sup>, 2017 – Board Meeting**

- Approve Minutes from July 27, 2017 Board Meeting
- Approve Goals & Objectives for FY 2018
- Community Resources Report
- Consumer Services Report for July 2017
- Program Updates
- Annual Election of FY 2018 Board Officers
- Executive Director's Evaluation, Compensation & Contract for FY 2018
- Nominations for the Texas Council Risk Management Fund's Board of Trustees
- Personnel Report for July 2017
- Texas Council Risk Management Fund Claims Summary for July 2017
- Texas Council Quarterly Board Meeting Verbal Update
- Approve July 2017 Financial Statements
- Approve FY 2017 Year End Budget Revision
- Approve Proposed FY 2018 Operating Budget
- Approve FY 2018 HHSC Enterprise Agency Contract
- Board of Trustees Unit Financial Statement for July 2017
- Building Consolidation Update