

Tri-County Behavioral Healthcare Board of Trustees Meeting

September 27, 2018



Notice is hereby given that a regular meeting of the Board of Trustees of Tri-County Behavioral Healthcare will be held on Thursday, September 27, 2018. The Business Committee will convene at 8:30 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. In compliance with the Americans with Disabilities Act, Tri-County Behavioral Healthcare will provide for reasonable accommodations for persons attending the Board Meeting. To better serve you, a request should be received with 48 hours prior to the meeting. Please contact Tri-County Behavioral Healthcare at 936-521-6119.

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 - July 26, 2018

III. Executive Director's Report - Evan Roberson

- A. Trauma Informed Care Training
- B. First Episode Psychosis Contract
- C. Liberty County 292 Grant Application

IV. Chief Financial Officer's Report - Millie McDuffey

- A. FY 2018 Audit
- B. CFO Consortium
- C. Workers' Compensation Audit
- D. Vehicle Surplus Sale

V. Program Committee

Action Items

- A. Reappoint Intellectual & Developmental Disabilities Planning Network Advisory Committee Members.....Page 11
- B. Reappoint Mental Health Planning Network Advisory Committee Members.....Page 12
- C. Approve FY 2019 Goals and Objectives.....Pages 13-24

Information Items

- D. Community Resources Report.....Pages 25-29
- E. Consumer Services Report for July & August 2018.....Pages 30-32
- F. Program Updates.....Pages 33-37
- G. Annual PNAC Reports.....Pages 38-41
- H. FY 2018 Goals & Objectives Progress Report 4th Quarter.....Pages 42-47
- I. 4th Quarter FY 2018 Corporate Compliance & Quality Management Report.....Pages 48-50
- J. Annual Corporate Compliance Report & 1st Qtr FY 2019 Corporate Compliance Training.....Pages 51-53

VI. Executive Committee

Action Items

A. Annual Election of FY 2019 Board Officers	Page 54
B. Executive Director's Evaluation, Compensation & Contract for FY 2019	Page 55
C. Appoint Texas Council Representative & Alternate for FY 2019	Page 56
D. Reappoint Consumer Foundation Board of Directors	Page 57
E. Approve Board Policy E.20 Revision	Pages 58-60

Information Items

F. Personnel Report for July & August 2018	Pages 61-65
G. Texas Council Risk Management Fund Claims Summary for July & August 2018	Pages 66-68
H. Texas Council Quarterly Board Meeting Verbal Update	Page 69
I. Board of Trustees Reappointments & Oaths of Office	Pages 70-78
J. Board of Trustees Committee Appointments	Page 79
K. Analysis of Board Members Attendance for FY 2018 Regular & Special Called Board Meetings	Pages 80-81

VII. Business Committee

Action Items

A. Approve July 2018 Financial Statements	Pages 82-94
B. Approve FY 2018 Year End Budget Revision	Pages 95-97
C. Approve Proposed FY 2019 Operating Budget	Pages 98-100
D. Ratify Banking Services Contract with JPMorgan Chase Bank, N.A.	Pages 101-102
E. Approve Fund Balance Transfer	Pages 103-104
F. Approve FY 2019 Dues Commitment & Payment Schedule for Texas Council	Pages 105-107
G. Ratify HHSC (DSHS) Mental Health First Aid Contract No. HHS000183000001	Page 108
H. Approve HHSC YES Pre-Engagement Services Contract No. 2017-049547-001B	Page 109
I. Ratify HHSC Treatment Youth (TRY) Substance Abuse Services Contract No. 2016-048317-006, Amendment No. 4	Page 110
J. Ratify HHSC Co-Occurring Mental Health (TCO) Substance Abuse Services Contract No. 2016-048317-005	Page 111
K. Ratify HHSC Treatment Adult Services (TRA) Contract No. 2016-048497-003 Amend No. 4	Page 112
L. Ratify FY 2019 HHSC IDD Performance Contract No. 529-18-0053-00001, Amend No. 1	Page 113
M. Ratify HHSC HCBS-AMH Pre-Engagement Contract No. 529-17-0144-00037A	Page 114
N. Ratify HHSC Adult Mental Health PCN, Contract No. 529-17-0038-00035-Amend No. 4	Page 115
O. Ratify HHSC YES Provider Contract No. 2016-049249-001B	Page 116
P. Ratify HHSC Autism Contract No. HHS000127500001	Page 117
Q. Ratify HHSC PATH Contract No. 2016-048162-001, Amendment No. 3	Page 118
R. Approve FY 2019 Bonds Janitorial Contract	Page 119
S. Ratify FY 2019 Lifetime Homecare Services Contract	Page 120
T. Ratify FY 2019 Contract for Dr. Jerri Sethna	Page 121
U. Approve FY 2019 Aspire Hospital, LLC Contract	Page 122
V. Ratify FY 2019 Avail Solutions, Inc. Contract	Page 123
W. Ratify FY 2019 Cypress Creek Hospital Contract	Page 124
X. Ratify FY 2019 Kingwood Pines Hospital Contract	Page 125
Y. Approve FY 2019 Baptist Hospitals of Southeast Texas Contract	Page 126
Z. Approve FY 2019 Woodland Springs Contract	Page 127
AA. Decide on Next Steps to Resolve Building Issues at 233 Sgt. Ed Holcomb Blvd, South	Page 128

Information Items

BB. Review Preliminary August 2018 Financial Statements.....	Pages 129-141
CC. 4 th Quarter FY 2018 Investment Report.....	Pages 142-146
DD. Board of Trustees Unit Financial Statement for July & August 2018.....	Pages 147-149
EE. HUD 811 Updates - Cleveland, Montgomery and Huntsville.....	Pages 150-152
FF. Foundation Board Update.....	Page 153

VIII. Executive Session in Compliance with Texas Government Code Section 551.071, Consultation with Attorney; Section 551.072, Real Property & Section 551.074, Personnel: Executive Director Evaluation

Posted By:

Ava Green
Executive Assistant

Tri-County Behavioral Healthcare

P.O. Box 3067
Conroe, TX 77305

BOARD OF TRUSTEES MEETING

July 26, 2018

Board Members Present:

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

Board Members Absent:

Richard Duren

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
Kelly Shropshire, Director of IDD Authority Services
Kenneth Barfield, Director of Management Info Systems
Catherine Prestigiovanni, Director of Strategic Development
Ava Green, Executive Assistant
Tabatha Abbott, Cost Accountant
Sara Bradfield, Adult Mental Health Outpatient Services Program Director
Melissa Zemencsik, Child & Youth Mental Health Outpatient Services Program Director
Jennifer Bryant, Legal Counsel

Call to Order: Board Chair, Patti Atkins, called the meeting to order at 10:04 a.m. at 233 Sgt. Ed Holcomb Blvd. S., Conroe, TX.

Public Comment: There was no public comment.

Quorum: There being seven Board Members present, a quorum was established.

Resolution #07-18-01

Motion Made By: Tracy Sorensen

Seconded By: Jacob Paschal, with affirmative votes by Patti Atkins, Gail Page, Sharon Walker, Morris Johnson and Janet Qureshi that it be...

Resolved:

That the Board excuse the absence of Richard Duren.

Resolution #07-18-02

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve the minutes of the May 24, 2018 meeting of the Board of Trustees.

Program Presentation – Essay Contest Winners

Program Presentation – Longevity Recognitions

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 May and June 2018 was reviewed for information purposes only.

The Program Updates Report was reviewed for information purposes only.

The 3rd Quarter FY 2018 Goals & Objectives Progress Report was reviewed for information purposes only.

The 4th Quarter FY 2018 Corporate Compliance Training was reviewed for information purposes only.

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

EXECUTIVE COMMITTEE:

Board Chair, Patti Atkins, nominated Morris Johnson, Janet Qureshi and Jacob Paschal to the Nominating Committee for the FY 2019 Board Officers. Janet Qureshi was chosen as the Chair of this committee.

Board Chair, Patti Atkins, nominated Tracy Sorensen, Gail Page and Sharon Walker to the Executive Director's Evaluation Committee. Gail Page was chosen as the Chair of this committee.

The Personnel Report for May and June 2018 was reviewed for information purposes only.

The Texas Council Risk Management Fund Claims Summary for May and June 2018 was reviewed for information purposes only.

Patti Atkins, Board Chair, suspended the Agenda at 11:03 a.m. for Mike Duncum with WhiteStone Realty to move to Business Committee Action Item IX-K, Discussion of Unresolved Building Issues for 233 Sgt. Ed Holcomb Blvd. S., Conroe, TX.

BUSINESS COMMITTEE:

Resolution #07-18-03

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve the May Financial Statements.

Resolution #07-18-04

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve the June Financial Statements.

Resolution #07-18-05

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve the FY 2018 Auditor Engagement Letter.

Resolution #07-18-06

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve the Recommendation for Tri-County Employee Health Insurance and Ancillary Plans.

Resolution #07-18-07

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve the Texas Council Risk Management Fund Minimum Contribution Plan for Worker's Compensation Coverage.

Resolution #07-18-08

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve HHSC Contract No. 529-17-0038-00035, Amendment No 3.

Resolution #07-18-09

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve HHSC Youth Prevention Selective (YPS) Contract No. 2016-048029-003, Amendment No. 3.

Resolution #07-18-10

Motion Made By: Morris Johnson

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

Resolved:

That the Board ratify HHSC Contract No. HHS000134400010, Mental Health SB 292 (Urban).

Resolution #07-18-11

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve the School Based Mental Health Clinic Interlocal Agreement with Conroe ISD and authorize Executive Director to execute the agreement when finalized.

Resolution #07-18-12

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve the recommendation to declare two vehicles as surplus. A 2006 Ford Freestar, Lic #DDY-1172 and a 2006 Ford E350 15 Passenger Van, Lic #CNV-2120.

Review of unresolved building issues at 233 Sgt. Ed Holcomb Blvd South, Conroe, TX.

Review of Tri-County's 2016 990 Tax Return prepared by Scott, Singleton, Fincher & Co., P.C. for information purposes only.

3rd Quarter FY 2018 Investment Report was reviewed for information purposes only.

The Board of Trustees Unit Financial Statements for May and June 2018 was reviewed for information purposes only.

The HUD 811 Updates for Cleveland, Montgomery and Huntsville was reviewed for information purposes only.

The Tri-County Consumer Foundation Board Update was reviewed for information purposes only.

The regular meeting of the Board of Trustees adjourned at 11:50 a.m. to go into Executive Session in compliance with Texas Government Code Section 551.071, Consultation with Attorney; Section 551.072, Real Property, 233 Sgt. Ed Holcomb Blvd S, Conroe, TX; and Section 551.074, Personnel Matters.

The meeting of the Board of Trustees reconvened at 12:19 to go into regular session.

No action was taken during Executive Session.

The regular meeting of the Board of Trustees adjourned at 12:20.

Adjournment:

Attest:

Patti Atkins
Chair

Date

Gail Page
Secretary

Date

<p>Agenda Item: Reappoint Intellectual and Developmental Disabilities Planning Network Advisory Committee Members</p> <p>Committee: Program</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>According to the bylaws for the Intellectual and Developmental Disabilities Planning Network Advisory Committee (IDDPNAC), one-half of the members are to be reappointed by the Board of Trustees every year, for two-year terms. There is no limit on the number of terms that a member can serve.</p> <p>Each of the following members has an expiring term and has been contacted about their participation in the IDDPNAC. They have agreed to continue serving on the IDDPNAC for an additional two-year term which will expire on August 31, 2020.</p> <ul style="list-style-type: none"> • Loretta Castro - Parent • Lori Lilley – Vocational Rehabilitation Counselor, Texas Workforce Solutions – Vocational Rehabilitation Services, Community • Pam Holak - Parent <p>We currently have eight IDDPNAC members, but we are in need of nine members to be in compliance with the contract and would gladly accept additional members beyond contract requirements. If you know of anyone that may be interested in PNAC membership, please contact Tanya Bryant.</p>	
<p>Supporting Documentation:</p> <p>None</p>	
<p>Recommended Action:</p> <p>Reappoint Intellectual and Developmental Disabilities Planning Network Advisory Committee Members to a Two-Year Term Expiring on August 31, 2020</p>	

<p>Agenda Item: Reappoint Mental Health Planning Network Advisory Committee Members</p> <p>Committee: Program</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>According to the bylaws for the Mental Health Planning Network Advisory Committee (MHPNAC), one-half of the members are to be reappointed by the Board of Trustees every year, for two-year terms. There is no limit on the number of terms that a committee member can serve.</p> <p>Each of the following members has an expiring term and has been contacted about their participation in the MHPNAC. They have agreed to continue serving on the MHPNAC for an additional two-year term which will expire on August 31, 2020.</p> <ul style="list-style-type: none"> • Loretta Castro - Parent • Dan Lafferty – Sheriff’s Deputy – Staff Services/Mental Health, Community • Lori Lilley – Vocational Rehabilitation Counselor, Texas Workforce Solutions – Vocational Rehabilitation Services, Community <p>We currently have five MHPNAC members, but we are in need of nine members to be in compliance with the contract and would gladly accept additional members beyond contract requirements. If you know of anyone that may be interested in PNAC membership, please contact Tanya Bryant.</p>	
<p>Supporting Documentation:</p> <p>None</p>	
<p>Recommended Action:</p> <p>Reappoint Mental Health Planning Network Advisory Committee Members to a Two-Year Term Expiring on August 31, 2020</p>	

<p>Agenda Item: Review and Approve Goals and Objectives for FY 2019</p> <p>Committee: Program</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>The Management Team met on August 10, 2018 for a Strategic Planning meeting. Subsequently, we have created a Strategic Plan for the Center that will be reviewed by the Board today. The goal of this meeting was to envision an ideal FY 2024 and then discuss how the Center could move toward this direction.</p> <p>The Management Team has proposed Goals and Objectives for FY 2019 as we have done in previous years for the Board to review and approve.</p>	
<p>Supporting Documentation:</p> <p>Strategic Plan which includes Goals and Objectives for FY 2019</p>	
<p>Recommended Action:</p> <p>Approve the Goals and Objectives for FY 2019</p>	

Introduction

The Management Team, three Program Directors and the Tri-County Behavioral Healthcare's Leadership class of 2015 met on August 10, 2018 to review and update the five year strategic plan for the Center. The revised plan will go into effect after approval by the Board at the September Board meeting (Fiscal Year 2019). The plan will be reviewed and modified annually by the Management Team with the goal of continued improvement and refinement of the Center mission and direction.

Executive Summary

Serving Liberty, Montgomery and Walker counties, Tri-County Behavioral Healthcare ('Tri-County' or 'Center') again provided services to more people in Fiscal Year (FY) 2018 than at any time in the history of the Center. This growth, along with continued changes at both the state and local level, has highlighted the need for Center structures which need to be developed or further refined. The Management Team of Tri-County is made up of highly dedicated professionals that work tirelessly to improve the center, and because of their work much positive change has occurred at the Center in the last five years. Members, have been, and continue to be, committed to transform Tri-County into a system of care that will effectively and efficiently meet the needs of our community.

Management Team staff have identified long term goals in 6 areas of emphasis and have developed a corresponding list of Objectives for FY 2018.

Center Mission and Vision Statement

The Mission of Tri-County is to enhance the quality of life for those we serve and our communities by ensuring the provision of quality services for individuals with mental illness, substance abuse disorders and intellectual/developmental disabilities.

The Vision of Tri-County is to develop a mental health and developmental disability care system with adequate resources that ensures the provision of effective and efficient services to meet the needs of our community. To achieve this vision, we will partner with the community to: 1) expand the availability of new and existing resources; and, 2) assure the availability of technically and culturally competent staff.

Background

In response to legislation signed by President John F. Kennedy in 1963, Texas established Community Centers in 1965 to move persons from mental health or Intellectual/Developmental Disability institutions. Formed in 1983 by an interlocal agreement between Liberty, Montgomery and Walker counties, Tri-County is one of 39 Community Centers which provide mental health and IDD services to all 254 counties in

the State of Texas. Tri-County is a 'Unit of Government' as established by section 534 of the Texas Health and Safety Code and has also been designated as a non-profit organization by the Internal Revenue Service.

Texas has consistently funded community mental health, substance use disorder and intellectual disability services at some of the lowest per capita rates in the United States. The most recent national data had Texas ranked 49th of 51 (Puerto Rico) in funding for persons with mental illness, 47th of 50 in funding for persons with intellectual disabilities, and 49th of 50 in funding for persons with substance use disorders.

Federal funds and State General Revenue funds often referred to as grant funding, have decreased significantly over the years as services have been transitioned into Managed Care. Currently these funds make up about half of the Center's operating budget. These grant funds are used primarily to cover the cost of care for persons that are medically indigent. Unfortunately, a large percentage of persons seeking treatment are medically indigent and this continues to put pressure on this funding stream.

It is also important to note that while management and staff have developed a system which is seeing more persons than at any time in our history, there continue to be more persons in the community with qualifying diagnoses who are unserved than at any time in our history. In short, although staff have worked hard to remove barriers to care and while staff are stretched to provide this care, the community often sees deficiencies.

Local Planning Feedback

In FY 18, Tri-County participated in our biennial Mental Health Local Planning. As a part of Local Planning, Tri-County sought feedback from stakeholders about services which are needed in our community. These stakeholders indicated need for the following services:

- Transportation services for low income clients (to facilitate treatment compliance);
- Substance abuse inpatient detoxification services (not available in our service area);
- MH Deputy programs (currently only available in Montgomery County);
- Jail Liaisons in all three counties (currently only in Montgomery County);
- Crisis Incident Response Team expansion (Conroe Police Department Pilot pairing an officer with a licensed clinician to respond to mental health calls-currently only available in the jurisdiction of CPD);
- Additional child inpatient hospital options (families want to place family members closer to home);
- Psychosocial rehab clubhouse (staff and peer-led services for adults with mental illness); and,

- Adult transitional housing (for persons coming out of hospitals who need additional stabilization before returning home).

Liberty County Feedback

In FY 18, the Executive Director had a series of meetings with a workgroup convened by the Liberty County Judge, Jay Knight, to address the needs of persons with mental illness in Liberty County. In summary, Liberty County feels that their current and projected population growth indicates the need for additional resources to deal with mental health, especially the intersection of mental health crisis and the criminal justice system. After a series of meetings with a large group of stakeholders which included the judge, two commissioners and several other county stakeholders (including the county indigent care office and the hospital district), it was determined that the most pressing need was for a Mental Health Deputy program in Liberty County. State funds, via the Rural Senate Bill 292 grant process, were solicited for this need, but ultimately the grant was not funded by the Health and Human Services Commission. While Montgomery County continues to grow at a rapid pace, Liberty County is also growing and so are the needs of the county. Liberty County is currently the 47th largest county of the state of Texas' 254 counties.

Demand for Crisis Services

As is the case for all service lines, the demand for crisis services continues to increase. In FY 2018, Tri-County provided more than ten times the number of crisis services than were provided in 2008. In addition to providing more services, the persons seeking services are more complex than they have been at any time in our history with many having co-occurring substance use disorders and an increasing percentage being homeless. In addition to the persons Tri-County serves in crisis, all hospital emergency rooms and all law enforcement entities in our service area are reporting an increase in persons who are experiencing mental health and/or substance abuse crises.

In cooperation with the Montgomery County Public Health District, Tri-County will be opening an East County Crisis Expansion Center so that law enforcement and the county ambulance service can drop off persons in a mental health crisis for screening and return to duty. In addition, Tri-County applied for and was awarded additional funds from the state to provide additional psychiatric hospitalization.

School-Based Mental Health Clinic

Tri-County Behavioral Healthcare (Tri-County) has been interested in establishing school-based clinics for several years because: 1) Tri-County staff believe that kids can be served more efficiently inside the schools, and with these services impact both the child's executive functioning and lessen their time away from classes; 2) it is in line with the Tri-County strategic plan objective to establish stronger collaborative relationships

in the community; and, 3) Tri-County has a passion for education and training which could prevent the devastating impact of mental illness and suicide. Ultimately, Tri-County believes that we can establish a 'win-win' for the school district and the Center by having a mental health skills trainer at each campus most days and a licensed therapist available a couple of days a week at each campus. In addition, both Tri-County and Sam Houston State University (SHSU) staff/students would be utilized to provide educational trainings on campus. SHSU may also be available to provide therapy sessions, under supervision of SHSU professors, to at-risk clients.

At the end of FY 18 pilot school-based mental health clinics were started at Armstrong Elementary and Grangerland Intermediate schools in the Conroe Independent School District. The program is operated at no cost to the school and will be utilized by Tri-County to establish policies and procedures which can be generalized to other schools as requested by school districts.

Population Growth and Demographic Trends

Population Growth in our communities remains strong. From 2010 to 2015, Montgomery County grew 17%, Liberty County grew 5% and Walker County grew 3.6%. Montgomery County remains one of the fifty fastest growing counties in the United States and the fourth fastest growing county in Texas. The persons seen by Tri-County in FY 2018 were, younger, more Hispanic and more likely to be medically indigent than the persons served in FY 2017. Both adult and children's mental outpatient services grew by 16.5% in FY 2018. Intellectual Disability services also continue to grow at a steady pace year over year.

Growth Drivers

While population growth remains the most significant driver in year over year increase in demand for treatment services, there are some trends in the persons seeking treatment which are also driving demand. For Adults who are in a mental health crisis, it is estimated that at least 70% of persons presenting have a co-morbid or primary substance use disorder. The most commonly abused drugs by persons seeking treatment are methamphetamines, alcohol and marijuana. To this point at least, the three counties served have yet to experience the devastating impact of the Opioid crisis. While these persons often present in mental health crisis, the underlying cause is often related to the substances they have abused. It is important to note that there is no detoxification or residential substance abuse programs in these three counties and that the substance abuse treatment array is very limited for Medicaid-funded or low income persons. While the Center continues to treat these folks as co-morbid mental health patients, it is very difficult to address the co-morbid substance abuse without an adequate substance abuse treatment array.

For kids seeking mental health services, the most significant drivers are the adverse childhood experiences that the child has experienced. It can be very difficult to distinguish the behaviors associated with trauma from those commonly associated with Attention Deficit Hyperactivity Disorders and even Autism. While stimulants can help children to focus in school, there is often a need for additional services to really uncover and deal with the causal factors associated with those symptoms. In addition, we are seeing an increase in the number of persons with Intellectual/Developmental Disabilities who are in crisis and often these crises are also driven by trauma.

Childhood trauma is often driven by behaviors associated the substance abuse of their caregivers and substance abuse is often driven by trauma and 'self-medication' of mental illness. These two issues are driving much of the need for care of the persons we serve.

Future Visioning

As a part of our planning process, the Management Team spent considerable time over the last few years 'visioning' the ideal future for the Center. These visions are the ideal goals for the future of the work we do, short of a cure for the disorders; and, as such, these goals represent the long term goals for Center operations.

The following ideals have been endorsed by the Management Team:

Intellectual and Developmental Disability Services:

- Continue to advocate for full funding of all services that are needed by families;
- Creation of system navigators which guide families from contact with the Center;
- Changing terminology so that the community is clear about the terminology 'intellectual and developmental disabilities,' which includes use of stories to communicate about how these disorders effect families;
- Service offerings that have moved from what the state funds to services that truly meet the needs of those that contact us for services;
- Standardized whole person care;
- Proactive services are in place to prevent preventable conditions;
- Automation of processes to make the programs more efficient; and,
- Appropriate preparation for and response to the Centers for Medicare and Medicaid Services' 'Final Rule'.

Behavioral Health Services:

- Patient care is fully patient-centered, trauma informed and recovery based;
- Clinical protocols and evidence-based practices have been implemented which have led to a stable, predictable clinical system;
- Counseling available for everyone that wants or needs it;

- Program staff are trained in and are operating from evidence-based practices which have been clearly proceduralized;
- Fully integrated mental health and substance abuse treatment for those we serve;
- A children's service system has been developed that can expand as needed to meet community demand for services;
- The Center is recognized as a leader in inpatient psychiatric treatment;
- Crisis programs and tools are developed to meet community needs;
- The Center has developed partnerships with universities which maximize the use of interns for mental health treatment; and,
- The Center is a leader in the development of community focus groups that would address system needs for adults and children, outpatient and inpatient.
- Certified Community Behavioral Health Clinic designation achievement.

Development:

- Programs are developed that financial partners want to 'buy into';
- Community Partners ensure that we are always at the table for important conversations about needed services;
- The Centers' Mission and Vision are understood by the community; and,
- Our actions have helped 'normalize' persons with mental illnesses, substance use disorders and or intellectual disabilities.

Support Services:

- Proactive training is in place to ensure staff are better trained and have a better understanding of required tasks;
- Center software systems are updated to meet Human Resources, Fiscal and Clinical needs;
- Technology is implemented which is cutting edge and customer endorsed;
- Consistent validation of Center processes via Accreditation;
- Leadership is developed to continue Component Unit Boards and advisory groups;
- Maximizing grant activities;
- A fund balance exists that supports flexibility and creativity;
- At least 90 days of operations is in reserves at all times; and,
- Revenue has been diversified to ensure Center viability.

Center Structure:

- The Center has professional facilities;
- There is a plan in place for debt retirement;
- Succession Plans have been identified and training is offered for those identified;

- A budget structure is in place which supports a more complex and refined Center operations.

SWOT Analysis

Strengths:

- Tri-County has always had a strong and consistent Board of Trustees that values the mission of the Center. This Board has successfully regenerated many times, including Board leadership, with no disruption to Center services. Board members are connected to the community and are advocates for the persons we serve.
- Our staff is very committed to the consumers and work that we do, including many whose families have been impacted by these disorders.
- The new facilities in Conroe and Liberty are significant improvements for both staff and service provision.
- Tri-County has been and continues to be in a solid fiscal position. As of the end of FY 2018, the Center had over 90 days of operations in the bank.
- Tri-County has a strong fiscal services department with experienced staff. We have been a participant in Managed Care billing since 2004 and have developed processes to ensure that we are paid by external payers. This billing expertise has become more important than ever with many service lines moving into managed care.
- The Center trade organization, the Texas Council of Community Centers, has a strong management team and represents the Centers well.
- Tri-County has improving relationships with our community which has been aided by intentional efforts to complete outreach, Mental Health First Aid training and 1115 Transformation Waiver funding which has allowed us to fill service gaps.
- Tri-County continues to have access to resources (e.g. inpatient hospitals, client respite) that are available in the greater Houston area which are not always available in other parts of the state. In addition to local resources, the Center has developed Crisis Stabilization and Extended Observation units to meet the needs of persons in crisis.
- We have seen significant improvement in our community relationships including local schools.
- Tri-County has placed many senior staff in leadership roles in state-level workgroups and committees. These opportunities allow staff to build relationships with state partners and to have the ability to influence decisions which impact the Center. Roles include: Executive Director Liaison to the

Behavioral Health Consortia; Leadership of the Behavioral Health Committee, the Data Evaluation Workgroup; Risk Management Advisory Committee; President of the Human Resources Consortia; Member of the Contract and Fiscal Imperatives Committee; Local Authority Workgroup; State IDD Redesign Committee; Chief Financial Officers Board; Quality Management Consortia Leadership Team; and the Children's Special Interest Group, among others.

- Tri-County has a history of excellent audit findings including near perfect Fiscal audits in most years, perfect IDD Waiver Provider audits, superior scores on IDD Authority Audits, and outstanding TCOOMMI performance.
- The "Leadership Tri-County" courses are providing opportunities for staff leadership development.
- Tri-County is in a desirable part of the state to live and recruitment of staff is aided by our location.

Weaknesses

- For the last several years, the Center has struggled to find quality applicants. This has become more challenging, especially for entry level positions, as the economy is approaching full employment.
- Turnover in clinical staff, both mental health and intellectual disabilities, has heightened awareness of our need for more developed clinical protocols and more consistent training to lessen the impact of this turnover.
- The length of time to recruit staff has increased, especially in key leadership roles.
- While center staff has historically been able to ensure compliance with extensive state contracts and guidelines, they can struggle with rapid change.
- Health and Human Services turnover is significant and many of the leaders of the department struggle to support Center operations for which they have oversight responsibilities.
- Our IT Infrastructure, especially our software is at the end of life and needs to be replaced.
- State contract requirements are complex and continue to grow in complexity each year.
- Administrative structures have not grown as the Center has grown and most are stretched and struggle to be proactive.

Opportunities

- There is opportunity to build on our School-based Mental Health clinics, including potential partnerships with Sam Houston State University and Lone Star Family Health Clinic (FQHC).
- Stigma related to the services we provide seems to be decreasing.
- There are requests for the Center to meet more needs in the community, including lines of service which are outside of the Center's historical line of business (e.g. services in the jail/detention).
- The Center has the opportunity to be a leader in the discussion of issues related to mental illness or intellectual disabilities in our service area. More and more often, the Center is being invited into groups that are discussing the impact mental illness, suicide, intellectual disabilities, autism and other related issues. These community relationships can be leveraged for further growth.
- Leveraging new facilities to host and lead community collaborations.
- The 86th Legislative Session starts in January of 2019.

Threats

- One significant threat is the pace of change for Community Centers like Tri-County. Staff are struggling to keep up with the demand for current services and the need to change how they deliver services.
- The Center needs to increase salaries and benefits to stay competitive in this employment market, but revenue is largely fixed.
- The Center struggles to help persons get Supplemental Security Income payments and the associated medical insurance.
- 1115 Transformation Waiver programs have added new resources to the Centers and these programs are well utilized. As a rule, these programs have become essential to our operations, but funding of these programs for the next two years comes with significant changes to operations. Without these programs, the agency would have a significant hole in the service array that is currently being offered and the community is not likely to understand a 'withdrawal' of these services.
- Currently, the Center has almost as much Pharmacy Assistance Program (PAP) value in free medications as we get for all Outpatient Mental Health General Revenue from the state of Texas. These PAP values are supporting Adult Outpatient services in a significant way. Threats on the horizon to PAP include changes in the Texas Drug formulary (which would limit incentives for drug manufactures to provide these medications) and the lack of new medications being developed for psychiatric conditions (older medications become generic

and fall off of PAP). Without PAP funds, MH Adult Outpatient services could change drastically.

- Growth in adult mental health services, required with new funding from the State of Texas in recent years, is almost entirely composed of persons who are medically indigent. Medically indigent persons tend to be more complex in presentation, and therefore are more expensive to serve.
- The Information Technology Infrastructure (both Software and Hardware) is, in many cases, beyond the 'end of life'. In addition, IT systems are changing faster than at any time in our history. There is a real threat associated with cyber security. Having up to date software is very important to minimize the risk of cyber-attack.
- The loss of institutional knowledge associated with turn-over remains a concern for the center. Services paid for with state funding are complex and require a level of experience for staff to be effect in providing these services or supports.
- Increased administrative requirements for all services being offered, especially those associated with IDD contracts, make it more difficult to be efficient in service provision. Each additional requirement has additional associated costs.
- As the population for our service area grows, so does the need for our services. While the Center desires to meet this demand for our services, resources to provide these services are limited.

Section 7: Fiscal Year 2019 Goals

The 'Future Visioning' section above represents the ideal 5 year goals for Tri-County as envisioned by the Management Team. Goals areas identified would serve as the overall goals for FY 2019.

Community Connectedness
Clinical Excellence
Staff Development
Administrative Competence
Professional Facilities
Fiscal Responsibility

Fiscal Year 2018 Objectives

Community Connectedness

Objective 1: The Tri-County Consumer Foundation will hold at least two fundraisers in FY 19.

Objective 2: The Executive Director will actively participate in the 86th Legislative Session on behalf of the Center and the persons we serve and will make regular reports to the Board of Trustees.

Clinical Excellence

Objective 1: Staff will work with Sam Houston State University and Lone Star Family Health Clinic to enhance School-based Mental Health Clinics and will develop Memorandums of Understanding with each by March 31, 2019.

Objective 2: Tri-County will develop a workplan and team to guide the Certified Community Behavioral Health Clinic transition by May 31, 2019. Regular reports on progress will be made to the Board of Trustees.

Staff Development

Objective 1: Leadership Tri-County Class Participants will review the current on-boarding process, including face to face and computer based training and recommend changes to the current process to Management Team by March 31, 2019.

Administrative Competence

Objective 1: Staff will select a vendor to update all Tri-County websites by April 30, 2019.

Objective 2: Leadership Tri-County Class Participants will review our current employee benefits structure and will make recommendations regarding enhancements which would be valued by staff and which are budget neutral by April 30, 2019.

Professional Facilities

Objective 1: Staff will develop a facility improvement plan for Cleveland by May 31, 2019.

Closing Summary

Management Team staff have identified long term goals in 5 areas of emphasis and have developed a corresponding list of Objectives for FY 2019. These Goals and Objectives will be submitted for approval by the Board of Trustees at the September 27, 2018 Board meeting.

Agenda Item: Community Resources Report Committee: Program	Board Meeting Date: September 27, 2018
Background Information: None	
Supporting Documentation: Community Resources Report	
Recommended Action: For Information Only	

Community Resources Report

July 27, 2018 – September 27, 2018

Volunteer Hours:

Location	July	August
Conroe	409.5	439.25
Cleveland	0	0
Liberty	13.0	0
Huntsville	16.0	0
Total	438.5	439.25

COMMUNITY ACTIVITIES:

7/27/18	Outpatient Competency Restoration External Stakeholder Rules Workgroup	Conroe
7/31/18	Entergy Networking Community Meeting	Conroe
7/31/18	Conroe Noon Lions Club Directors Board Meeting	Conroe
7/31/18	Planning Meeting - Military Veteran Peer Network Dog Days Engagement Event	Conroe
8/1/18	Conroe Noon Lions Club Luncheon	Conroe
8/1/18	ESC-6 Network Meeting	Conroe
8/1/18	Splendora ISD Service Meeting – Peach Creek Elementary and Splendora Junior High	Splendora
8/2/18	St. Luke's Violence Prevention Steering Committee	The Woodlands
8/2/18	Cleveland Chamber of Commerce Luncheon	Cleveland
8/3/18	YMHFA Montgomery ISD	Montgomery
8/6/18	Conroe ISD Service Meeting – Hailey Elementary	Conroe
8/6/18	Montgomery County Homeless Coalition Board Meeting	Conroe
8/6/18	Veteran Service Organizations Meeting with Feeding Texas	Conroe
8/7/18	YMHFA Hardin ISD	Liberty
8/7/18	New Waverly ISD Service Meeting	New Waverly
8/8/18	Family and Community Coalition of Montgomery County	Conroe
8/8/18	Veteran Services Presentation for the Family and Community Coalition	Conroe
8/8/18	Walker County Chamber of Commerce Small Business Meeting	Huntsville
8/8/18	Liberty County Community Resource Coordination Group	Liberty
8/8/18	Conroe Noon Lions Club Luncheon	Conroe
8/9/18	Montgomery County Coalition Against Human Trafficking Meeting	The Woodlands
8/9/18	Liberty County Health Coalition	Liberty
8/9/18	Meeting with Veteran's Progress and Recovery	Houston
8/13/18	Parent Night at Grangerland Intermediate	Grangerland
8/13/18	KAIR Radio Interview with Harvey Team Lead	Kingwood
8/14/18	YMHFA Conroe ISD Police Department	Conroe
8/15/18	YMHFA New Waverly ISD	New Waverly

8/15/18	Military Culture and Veteran Resource Training for Montgomery County Probation	Conroe
8/15/18	Liberty/Dayton Chamber of Commerce Luncheon	Liberty
8/16/18	Homeless Coalition Meeting	Conroe
8/16/18	Veteran Affairs Advisory Board Meeting	Huntsville
8/17/18	Outpatient Competency Restoration External Stakeholder Rules Workgroup	Conroe
8/18/18	Military Veteran Peer Network Summary Event for Families with Pets – Dog Days	Conroe
8/20/18	Liberty Network Meeting	Liberty
8/21/18	North Houston Area Networking Partnership Meeting	The Woodlands
8/21/18	Montgomery County Community Resource Coordination Group	Conroe
8/22/18	Montgomery County Jail Tour - Veteran Resources with McLennan County Jail Staff	Conroe
8/23/18	Magnolia Chamber of Commerce Luncheon	Magnolia
8/25/18	Salute to Women Veterans Collaborative Event	Liberty
8/27/18	Military Veteran Peer Network Basic Training	Conroe
8/28/18	Mentor Coordination Meeting with Jail Staff for VETS Pod	Conroe
8/28/18	WWII Veteran Birthday Celebration at VFW	Conroe
8/29/18	Violence Prevention Steering Committee	Spring
8/29/18	Conroe ISD Leo's Presentation	Conroe
8/29/18	Conroe Noon Lions Club Luncheon	Conroe
8/30/18	YMHFA – Montgomery County Risk Management	Conroe
8/31/18	Outpatient Competency Restoration External Stakeholder Rules Workgroup	Conroe
9/4/18	Civil Service Meeting	Conroe
9/5/18	VFW Meeting	Conroe
9/5/18	Conroe Noon Lions Club Luncheon	Conroe
9/5/18	Outreach, Screening, Assessment and Referral Meeting (OSAR)	Houston
9/6/18	Huntsville Networking Meeting with Veteran Affairs Advisory Board	Huntsville
9/6/18	Lake Conroe Area Republican Women's Luncheon - Meet Your Legislatures	Montgomery
9/6/18	Cleveland Chamber of Commerce Luncheon	Cleveland
9/7/18	YMHFA - Conroe ISD	Conroe
9/10/18	Montgomery County Homeless Coalition Board Meeting	Conroe
9/11/18	Trauma Presentation - Victims Services Homicide/Violent Crimes Unit MC Sheriff's Office	Conroe
9/11/18	Conroe ISD Mentor Luncheon	Conroe
9/11/18	VFW 9/11 Ceremony	Conroe
9/12/18	The Veteran Experience Seminar with the VA and United Way	Houston
9/12/18	Veterans Treatment Court	Conroe
9/12/18	Liberty County Community Resource Coordination Group	Liberty
9/12/18	New Waverly ISD Student Health Advisory Committee	New Waverly
9/12/18	Conroe Noon Lions Club Luncheon	Conroe

9/13/18	S.O.D.A.S. Steering Committee Meeting	Spring
9/13/18	Walker County Chamber of Commerce Small Business Meeting	Huntsville
9/12/18	Family and Community Coalition of Montgomery County	Grangerland
9/14/18	Homeless Veteran Program Brief with Volunteers of America and US Vets	Conroe
9/14/18	YMHFA – Conroe ISD	Conroe
9/18/18	North Houston Area Networking Partnership Meeting	The Woodlands
9/18/18	Montgomery County Community Resource Coordination Group	Conroe
9/18/18	Conroe ISD Mentor Luncheon	Conroe
9/19/18	VFW Meeting	Conroe
9/19/18	Liberty/Dayton Chamber of Commerce Luncheon	Liberty
9/19/18	Collaborative Meeting with the Liberty County Veteran Service Office	Cleveland
9/20/18	Homeless Coalition Meeting	Conroe
9/21/18	YMHFA – Conroe ISD	Conroe
9/24/18	Military Veteran Peer Network Basic Training	Conroe
9/25/18	Healthy U Event Lone Star College – Adult Treatment Program and Substance Use	The Woodlands
9/25/18	Montgomery County United Way – Interagency Information & Referral Networking Meeting	The Woodlands
9/25/18	Conroe ISD Mentor Luncheon	Conroe
9/26/18	Veterans Treatment Court	Conroe
9/26/18	Human Trafficking Summit	The Woodlands

UPCOMING ACTIVITIES:

9/29/18	YMHFA – Conroe ISD Nurses	Conroe
10/1/18	Montgomery County Homeless Coalition Board Meeting	Conroe
10/2/18	Conroe ISD Mentor Luncheon	Conroe
10/3/18	Conroe Noon Lions Club Luncheon	Conroe
10/4/18	Cleveland Chamber of Commerce Luncheon	Cleveland
10/5/18	Lake Conroe Area Republican Women’s Luncheon	Montgomery
10/6/18	Dispute Resolution Center Board Meeting	Conroe
10/6/18	National Night Out Community Safety Expo	The Woodlands
10/9/18	Healthy U Event Lone Star College – Adult Treatment Program and Substance Use	The Woodlands
10/9/18	Conroe ISD Mentor Luncheon	Conroe
10/10/18	Conroe Noon Lions Club Luncheon	Conroe
10/10/18	Liberty County Community Resource Coordination Group	Liberty
10/10/18	Family and Community Coalition of Montgomery County	Grangerland
10/11/18	Walker County Chamber of Commerce Small Business Meeting	Huntsville
10/15/18	Conroe ISD Jumpstart	Conroe
10/16/18	North Houston Area Networking Partnership Meeting	The Woodlands
10/16/18	Montgomery County Community Resource Coordination Group	Conroe
10/16/18	Conroe ISD Mentor Luncheon	Conroe
10/17/18	Conroe Noon Lions Club Luncheon	Conroe

10/17/18	Multidisciplinary Behavioral Health Team Quarterly Meeting at Huntsville Memorial Hospital	Huntsville
10/17/18	Liberty/Dayton Chamber of Commerce Luncheon	Liberty
10/18/18	Homeless Coalition Meeting	Conroe
10/19/18	Dispute Resolution Center Awards Ceremony with Judge Hamilton	Conroe

Agenda Item: Consumer Services Report for July & August 2018 Committee: Program	Board Meeting Date: September 27, 2018
Background Information: None	
Supporting Documentation: Consumer Services Report for July & August 2018	
Recommended Action: For Information Only	

Consumer Services Report

July 2018

Consumer Services	Montgomery County	Cleveland	Liberty	Walker County	Total
Crisis Services, MH Adults/Children					
Persons Screened, Intakes, Other Crisis Services	552	36	33	32	653
Crisis and Transitional Services (LOC 0, LOC 5)	16	1	0	0	17
Psychiatric Emergency Treatment Center (PETC) Served	83	3	1	4	91
Psychiatric Emergency Treatment Center (PETC) Bed Days	364	10	4	23	401
Contract Hospital Admissions	4	0	1	0	5
Diversion Admits	20	3	3	2	28
Total State Hospital Admissions	0	0	0	0	0
Routine Services, MH Adults/Children					
Adult Service Packages (LOC 1m,1s,2,3,4)	1201	167	127	123	1618
Adult Medication Services	774	95	76	37	982
Child Service Packages (LOC 1-4 and YC)	574	52	18	60	704
Child Medication Services	218	21	7	22	268
TCOOMMI (Adult Only)	127	13	21	6	167
Adult Jail Diversions	5	0	0	0	5
Persons Served by Program, IDD					
Number of New Enrollments for IDD Services	6	0	1	0	7
Service Coordination	645	37	48	70	800
Persons Enrolled in Programs, IDD					
Center Waiver Services (HCS, Supervised Living)	23	4	12	21	60
Substance Abuse Services					
Children and Youth Prevention Services	0	0	0	21	21
Youth Substance Abuse Treatment Services/COPSD	7	0	0	0	7
Adult Substance Abuse Treatment Services/COPSD	25	0	0	1	26
Waiting/Interest Lists as of Month End					
Adult Mental Health Services	115	2	0	0	117
Home and Community Based Services Interest List	1626	104	125	230	2085
July Served by County					
Adult Mental Health Services	1646	179	133	168	2126
Child Mental Health Services	622	59	20	63	764
Intellectual and Developmental Disabilities Services	660	42	55	73	830
Total Served by County	2928	280	208	304	3720
June Served by County					
Adult Mental Health Services	1734	157	138	182	2211
Child Mental Health Services	637	57	24	75	793
Intellectual and Developmental Disabilities Services	668	43	55	75	841
Total Served by County	3039	257	217	332	3845
May Served by County					
Adult Mental Health Services	1868	163	130	205	2366
Child Mental Health Services	921	63	27	83	1094
Intellectual and Developmental Disabilities Services	659	44	55	70	828
Total Served by County	3448	270	212	358	4288

Consumer Services Report

August 2018

Consumer Services	Montgomery County	Cleveland	Liberty	Walker County	Total
Crisis Services, MH Adults/Children					
Persons Screened, Intakes, Other Crisis Services	601	46	38	58	743
Crisis and Transitional Services (LOC 0, LOC 5)	27	1	0	1	29
Psychiatric Emergency Treatment Center (PETC) Served	81	9	1	8	99
Psychiatric Emergency Treatment Center (PETC) Bed Days	305	26	1	18	350
Contract Hospital Admissions	1	0	0	0	1
Diversion Admits	30	2	1	3	36
Total State Hospital Admissions	0	0	0	0	0
Routine Services, MH Adults/Children					
Adult Service Packages (LOC 1m,1s,2,3,4)	1403	151	134	110	1798
Adult Medication Services	1036	118	95	103	1352
Child Service Packages (LOC 1-4 and YC)	558	51	20	75	704
Child Medication Services	287	17	13	28	345
TCOOMMI (Adult Only)	122	14	21	4	161
Adult Jail Diversions	6	0	0	0	6
Persons Served by Program, IDD					
Number of New Enrollments for IDD Services	2	0	1	0	3
Service Coordination	667	33	49	66	815
Persons Enrolled in Programs, IDD					
Center Waiver Services (HCS, Supervised Living)	23	4	12	21	60
Substance Abuse Services					
Children and Youth Prevention Services	0	0	0	0	0
Youth Substance Abuse Treatment Services/COPSD	5	0	0	0	5
Adult Substance Abuse Treatment Services/COPSD	37	0	0	0	37
Waiting/Interest Lists as of Month End					
Adult Mental Health Services	125	4	0	0	129
Home and Community Based Services Interest List	1637	126	147	189	2099
August Served by County					
Adult Mental Health Services	1848	199	137	200	2384
Child Mental Health Services	675	54	29	75	833
Intellectual and Developmental Disabilities Services	683	44	57	71	855
Total Served by County	3206	297	223	346	4072
July Served by County					
Adult Mental Health Services	1646	179	133	168	2126
Child Mental Health Services	622	59	20	63	764
Intellectual and Developmental Disabilities Services	660	42	55	73	830
Total Served by County	2928	280	208	304	3720
June Served by County					
Adult Mental Health Services	1734	157	138	182	2211
Child Mental Health Services	637	57	24	75	793
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Total Served by County	3039	257	217	332	3845

Agenda Item: Program Updates Committee: Program	Board Meeting Date: September 27, 2018
Background Information: None	
Supporting Documentation: Program Updates	
Recommended Action: For Information Only	

Program Updates

July 27, 2018 – September 27, 2018

Crisis Services

1. A series of changes have been underway since the former Director of Crisis Services left the Center in June. The Administrator of Intensive Evaluation Services (Extended Observation Unit) resigned along with PETC Utilization Review manager. Bachelors' level Qualified Mental Health Professionals (QMHPs) transitioned on September 1st to 12 hour shifts (3 days on, 4 days off/4 days on, 3 days off) to allow for more consistent coverage on nights and weekends. Four new Crisis QMHPs started on September 10th. A new manager was hired to replace the PETC UR position and began on September 1st.
2. The Executive Director continues to interview for the Crisis Services Program Director position.
3. It is expected that the Extended Observation Unit, which has been closed since early June will reopen on October 1st.

MH Adult Services

1. The Administrator of Adult Outpatient Services resigned effective September 13, 2018. The Adult Outpatient Program Director is currently interviewing candidates for this position. Several new staff have been hired to fill vacancies, and new positions that were added toward the end of FY 2018. We continue to struggle to hire and retain Bachelor's level QMHP staff in Adult Outpatient Services, and as a result caseloads remain higher than they should be.
2. A new Advance Practice Registered Nurse (APRN), Jennifer Boyd, has been hired by the Center. She will fill a vacant caseload and will allow our new Adult Outpatient Psychiatrist, Dr. Coppedge, to begin serving clients in Conroe effective October 1, 2018. Each of our Conroe prescribers will transfer 20 persons per month from their existing case load to Dr Coppedge with hopes of decreasing caseload size to around 600. We still have 1.6 FTEs of psychiatric time vacant that are currently being covered by ETBHN prescribers.
3. All of the outpatient nursing positions are currently filled, including the newly added Registered Nurse in Liberty County.
4. The Outpatient Competency Restoration program has been invited to participate in a stakeholder workgroup to develop program rules and guidelines for the program that will align with new legislative requirements.
5. There continues to be consistent requests and need for adult counseling services, which remain full. The counseling program did exceed the performance target for FY18.

MH Child Services

1. Our school-based sites at Armstrong Elementary and Grangerland Intermediate are going strong, resulting in an increased number of families participating in services from both schools. We are meeting weekly with administrators at each school to encourage open feedback and successful implementation.
2. C&Y Rehab Specialists have been focusing on back-to-school, which means developing relationships with school faculty, getting client schedules, and problem solving scheduling issues.
3. We are actively recruiting Spanish Speaking C&Y Rehab Specialists as we have many vacancies and continue to have a large need in our community.

Criminal Justice Services

1. The Jail Diversion Clinician provided training on mental health diagnosis and treatment to the Mental Health Initiative Probation Officer.
2. The Jail Services Liaison provided screenings for mental health needs to 33 individuals in July and August and coordinated the treatment of 167 others.

Substance Abuse Services

1. The Adult Substance Abuse Treatment program welcomed an Administrator who will provide managerial oversight and direct care in both Adult and Youth services. We anticipate with this position, the ability to provide more comprehensive treatment, expedited intake, and an increase in community marketing and education on substance use disorders.
2. We are in the process of transitioning the Youth SA Treatment Program under our new Substance Abuse Treatment Administrator by providing information and observation opportunities so she can familiarize herself with our contract requirements and program procedures.
3. Intakes are picking up for Youth Substance Abuse Treatment in time for school to start.
4. With the goal of starting school-based groups as early as possible this year, our Prevention Program has been participating in a large number of service meetings across all three of our counties and has already started group in several schools.
5. Our Prevention Team will be actively involved in our two Conroe ISD school-based services pilot programs as they will be providing groups to students who are not yet clients and assist in identifying students in need of referral for our behavioral health services.
6. Our Prevention Team will also provide presentations and education or wellness activities to both students and guardians in the pilot schools, as well as for other schools and community agencies throughout the year including New Waverly ISD, Cleveland ISD, and Splendora ISD.

IDD Services

1. HHSC is conducting a free statewide training initiative on "Employment First". We are scheduled to host this training on Friday, September 28th at our Conroe location from 9:00 – 4:00 p.m. The goal of the training is to increase job opportunities for people with intellectual and developmental disabilities. This training is for anyone who wants a better understanding of how Employment Services works.
2. IDD Authority staff attended the 3rd Annual IDD Crisis Seminar held in Galveston. This training and information was well received and attended by 180 individuals ranging from law enforcement, MCOT, Crisis Intervention Specialist, and other center staff.
3. IDD Authority had up to five individuals at one time in Crisis Respite this August. Staff will continue to determine ways to expand this service.
4. The HHSC Autism contract was received on August 30, 2019. Authority staff are preparing to provide these services directly and also through a sub contractor.

Support Services

1. Quality Management:

- a. Staff are currently preparing for the HHSC Quality Management On-Site Review scheduled for October 16th – 19th 2018.
- b. Staff reviewed and submitted five client charts going back to January 2017. Two were requested by Amerigroup, and three from Cigna HealthSpring.
- c. Staff are currently conducting a Program Survey of the Rural Adult Outpatient Services.

2. Utilization Management:

- a. The Center's Junior Utilization Committee (JUM) in coordination with the IT Department have been analyzing the Centers Payer Source Mix and other data measures that may help the Center make informed decisions from both clinical and financial perspectives.
- b. The Adult Mental Health waitlist continues to grow and has exceeded 120 individuals.

3. Training:

- a. Eight staff attended a three day Critical Incident Stress Management (CISM) training on August 23-25th.
- b. All staff have now been trained in Basic Trauma Informed Care (TIC) and a team of staff, led by the Director of Management Information Systems, have begun a series of State led meetings and trainings aimed at increasing the Center's overall competency in trauma informed care.
- c. The Clinical Trainer provided Child and Adolescent Needs and Strengths Assessment (CANS)/Adult Needs and Strengths Assessment (ANSA) Superuser training to 40% of the Center's users of this assessment in line with contract requirements, by September 12, 2018.
- d. The training department is currently working on a series of changes to the Centers training site, Relias Learning, that will provide increased ease of use for Center staff.

4. **Veteran Services:**

- a. The Veteran Services Department organized and hosted a Military Veteran Peer Network Engagement Event/Family Fun Night at Incredible Pizza on August 1, 2018. We had forty Veterans and their family members register and attend the event.
- b. The Veteran Services Department, along with several Military Veteran Peer Network Volunteers, conducted training on Trauma Affected Veterans and other Veteran topics for the Montgomery County Sheriff's Office (MCSO) on August 1, 2018. The MCSO was able to provide TCOLE credit to eligible participants as the Veteran Services Liaison is certified as a TCOLE 4067 trainer.

Community Activities

1. We have had five Youth Mental Health First Aid trainings this month, with five more scheduled for next month.
2. Tri-County's Consumer Foundation met on August 16th to discuss our next fundraiser. We have decided on Family Fun Night at the City of Panorama Village on October 27th from 4:00 PM to 6:00 PM.
3. The Foundation has received its first grant in the amount of \$500 from Wal-Mart.
4. The Hurricane Harvey program will be wrapping-up over the next six weeks. The program has been enormously effective and reached over 35,000 lives within our three service counties. There has been talk of a follow-up grant to address some of the ongoing depressive symptoms but we are unsure of the status at this time.

Agenda Item: Planning Network Advisory Committee Annual Reports Committee: Program	Board Meeting Date September 27, 2018
Background Information: According to their bylaws, both the Mental Health and the Intellectual and Developmental Disabilities Planning Network Advisory Committees (PNACs) are required to make a written report to the Board that outlines the Committees' activities for the year and committee attendance. Many of our committee members are serving on both PNACs, and the groups continue to seek members that are primarily concerned with that group's focus. The attached reports on the two committees' activities are provided for your information.	
Supporting Documentation: Mental Health PNAC Annual Report Intellectual and Developmental Disabilities PNAC Annual Report	
Recommended Action: For Information Only	

Mental Health Planning Network Advisory Committee

Annual Report

FY 2018

In FY 2018, the Mental Health Planning Network Advisory Committee (MHPNAC) was provided with the following regular Center Updates:

- MH Performance Measures Status Reports
- Annual Budget and Financial Summary Reports with Explanation of Variance
- Consumer Services Reports
- Community Resources Reports
- Program Updates

Special program presentations are provided to the Committee as needed to increase their knowledge and understanding of Center operations, needs and barriers. This year, the Committee attended presentations on the Quality Management Program Survey Process, including a review of specific surveys conducted throughout the year, the Local Planning Network Development Process, and a review of Annual Training.

The Committee provided ongoing feedback on Center services, activities, and community awareness efforts initiated by Tri-County Behavioral Healthcare (Tri-County). They expressed their support and excitement for upcoming activities of Tri-County's Consumer Foundation, use of the TCBHC mobile clinic, and the many ways that staff are continuously working to build community relationships by ensuring we are participating in related community activities as much as possible.

The Committee actively participated in the local planning process providing feedback through a series of meetings and reviews spanning from January 31, 2018 – April 25, 2018. The Committee assisted with the distribution of surveys to key community stakeholders and provided feedback for the plan, specifically siting transportation, low income housing, and continued community awareness and education efforts as key areas of focus for our next cycle of planning.

On April 18th, Tri-County PNAC member along with Tri-County staff liaison attended the Regional Planning and Network Advisory Committee (RPNAC) Meeting and provided feedback for the FY 2018 Hospitalization Survey and Center Local Plans. As you may recall the RPNAC provides us with feedback from a regional perspective as well as fulfills our contract requirements, if we should have difficulty meeting the membership requirements locally. Recommendations from this study were provided to the Board on May 24, 2018.

In FY 2018, the MHPNAC met six times for regularly scheduled meetings. The overall attendance of this committee was 47% during the last year.

The MHPNAC has five members, one in process and is currently seeking three additional members to be in compliance with contract requirements.

Intellectual and Developmental Disabilities Planning Network Advisory Committee

Annual Report

FY 2018

In FY 2018, the Intellectual and Developmental Disabilities Planning Network Advisory Committee (IDDPNAC) was provided with the following regular Center Updates:

- IDD Performance Measures Status Reports
- Annual Budget and Financial Summary Reports with Explanation of Variance
- Consumer Services Reports
- Community Resources Reports
- Program Updates

Special program presentations are provided to the Committee as needed to increase their knowledge and understanding of Center operations, needs and barriers so that they may provide informed feedback. This year the Committee attended presentations on a proposal for an Autism program, additional marketing for parents and community members on the Interest list and Tri-County Behavioral Healthcare's role for individuals with intellectual and developmental disabilities, and annual training.

The Committee provided feedback to the Center on the cancellation of the Texas Home Living Contract, ideas related to the next cycle of strategic planning, provided feedback from community members on experiences navigating services, and continue to stress the importance of educating the community about the various State Interest lists. The committee was especially complimentary of the strides the Center has made in collaborating with local schools and the advocacy and coordination efforts resulting in Tri-County being added to the City of Conroe bus route.

On April 18th, Tri-County PNAC member along with Tri-County staff liaison attended the Regional Planning and Network Advisory Committee (RPNAC) Meeting. As you may recall the RPNAC provides us with feedback from a regional perspective as well as fulfills our contract requirements, if we should have difficulty meeting the membership requirements locally.

In FY 2018, the IDDPNAC met six times and had an overall attendance of 47%.

The IDDPNAC has eight members and we are currently seeking one additional member to be in compliance with contract requirements.

Agenda Item: FY 2018 Goals and Objectives Progress Report Committee: Program	Board Meeting Date September 27, 2018
Background Information: Attached is the final report of the Board Goals and Objectives for FY 2018.	
Supporting Documentation: FY 2018 Goals and Objectives Progress Report	
Recommended Action: For Information Only	

Year-to-Date Progress Report

September 1, 2017 – August 31, 2018

Goal #1 – Professional Facilities

Objective 1:

Facility improvements to the PETC lobby area will be completed by January 1, 2018.

- Flooring was replaced in the PETC lobby, Extended Observation Unit, administrative office and triage hallways by the above deadline.
- Walls in the triage and lobby areas were also reinforced for durability.

Objective 2:

Staff will develop a facility improvement plan for Cleveland by March 31, 2018.

- Staff is working with a modular building company to price adding temporary space to the Cleveland facility. Construction on site may cause drainage problems for the current building and may not be practical.
- Staff will look into purchasing a facility that can be remodeled in FY 2019 or potentially into building a new facility in Cleveland.
- We currently estimate that the space in Cleveland needs to be two to three times the size of the current 10,740 square foot facility.

Goal #2 – Community Connectedness

Objective 1:

The Tri-County Consumer Foundation will hold at least one fundraising event by March 31, 2018.

- The “Changing Lives Breakfast” was held on March 8, 2018.
- The Foundation Board is planning another event in October.

Objective 2:

Tri-County will launch the ‘I Choose Life’ website with the youth and caregiver commitments that can be made online by December 31, 2018.

- The I Choose Life website is up and functioning at www.IChooseLife.us.
- We have begun promoting this site via social media.

Objective 3:

Tri-County will host, on average, at least one community stakeholder meeting at one of our facilities each month.

- Tri-County has hosted four MC-CARES meetings following Hurricane Harvey at the Sgt. Ed Holcomb location (two in September, one in October and one in January).
- Tri-County has hosted seven Montgomery County Community Resource Coordination Groups (CRCGs) so far this fiscal year (October, December, January, February, March, April and May) and continues to arrange the meetings for the 3rd Tuesday of each month.
- A meeting was held in October at the Sgt. Ed Holcomb building to explore possible grant opportunities designed to divert individuals in a mental health crisis from inappropriate placements such as: emergency centers, jail, etc. A local judge, representatives from adult probation, the mental health court and a lawyer from the Montgomery County District Attorney's Office all participated in the collaborative discussion.
- Tri-County hosted a Veterans Taskforce Meeting on November 21, 2018, which was attended by various veteran service organizations in the community.
- Tri-County hosted a Rural Veterans Needs Assessment on December 6, 2018 which included representatives from the Veteran Services Office and the Texas Veterans Commission.
- Tri-County held several Local Planning meetings open to the public in February, including one Spanish planning meeting, to gather community feedback on the direction of Tri-County Behavioral Healthcare over the next two years.
- Beginning in early FY 18, Tri-County entered into an MOU with the Veterans Affairs Readjustment Counseling Program through the Vet Center to host bi-monthly PTSD support groups for Vietnam Veterans at the Sgt. Ed. Holcomb location.
- The Woodlands Attention Deficit Disorders Association (ADDA) group held their April 23rd meeting at the Sgt. Ed. Holcomb location which was attended by our Director of Child and Youth Services.
- The Veterans Services Department hosted two meetings at the Sgt. Ed. Holcomb location in May. Community Veteran service organizations met on May 21, 2018 to discuss the process for distributing the 20 HUD-VASH vouchers awarded to Montgomery County and the Quarterly Veteran's Taskforce was held on May 22, 2018.
- The Community is responding to the opportunity to have meetings at our facilities. We appear to be building stronger community relationships by sharing this space with them.

Objective 4:

At least two different Management Team members will accompany the Executive Director on visits to the capitol to meet with legislative staff.

- Texas Council days at the capitol were not held in the first quarter and the second quarter conflicted with Evan Roberson's Behavioral Health Consortium meeting. Evan Roberson and Kelly Shropshire attended in April, for the third quarter.

- There have been a series of conflicts with scheduled Austin visits and Consortia or Board meetings. The August trip to the Capital has now been cancelled as well (by Texas Council).

Goal #3 – Clinical Excellence

Objective 1:

Tri-County will screen persons for substance use and/or the use of tobacco at their initial intake and at each doctor visit by February 28, 2018.

- Assessment questions for screening persons for substance use and/or tobacco use were added to the doctor's intake assessment and the doctor's pharmacological management assessment by May 1, 2018.

Objective 2:

Tri-County will develop detailed program manuals for all major adult mental health programs by August 31, 2018.

- Manuals for Levels of Care 1S, 1S Field, LOC 3 and LOC 4 are complete.

Objective 3:

Tri-County will start the Autism Services Program by February 28, 2018.

- HHSC has accepted our application and we are awaiting a contract for services. HHSC contract templates have been revised and this has delayed contract dispersal. It is our understanding that receipt of the contract should be in the fourth quarter.
- The contract arrived on August 30, 2018 and was signed by staff. Efforts are currently underway to implement the program.

Objective 4:

A team of staff will evaluate if there is a viable financial model for a children's inpatient crisis program in our communities, and report on their findings to the Mental Health Planning Network Advisory Committee by May 31, 2018.

- Staff met on January 29, 2018 to brainstorm ideas, advantages, disadvantages and to discuss known factors related to cost for developing a financially viable model for a children's inpatient crisis program in our community. Staff researched the governing codes and accreditation standards and consulted with other Centers that operate children's inpatient crisis programs around the State. Staff is currently investigating the cost of construction for a facility that would meet licensing requirements and should know if there is a viable business model once those costs are fully understood.
- Crisis Stabilization Unit (like the PETC) rules are currently being modified to allow for Children's CSUs. There is a great deal of interest in the community for a local children's hospitalization model.

Goal #4 – Staff Development

Objective 1:

Tri-County will train all Licensed Professional Counselors/Licensed Clinical Social Workers and any LPC/SW interns in Psychological First Aid by May 31, 2018.

- All identified licensed staff were trained in Psychological First Aid by May 31, 2018. A total of thirty four staff have been trained in Psychological First Aid, including the Hurricane Harvey Crisis Counseling Team.

Objective 2:

Tri-County will develop a new annual evaluation process for staff and will complete training on the new process for all supervisors by May 31, 2018.

- New Annual Evaluation and progressive discipline tools were created and implemented on June 1, 2018. All Tri-County supervisors attended training (during the month of May) on this new performance cycle.

Objective 3:

Tri-County will develop a monthly face to face refresher course for new employees at their 6-month anniversary on compliance and documentation guidelines by May 31, 2018.

- Following further analysis on the training needs of new hires as well as a review of optimal timeframe for promoting long-term retention of information, staff have determined that an overview of Corporate Compliance and Documentation shall be provided during onboarding and a more in-depth face to face training on these topics will be provided at the three month mark. Training on both compliance and documentation guidelines have been finalized and staff are in the process of rolling the documentation training out to current supervisors and employees with a plan to begin new hire implementation for both trainings on June 27th.

Objective 4:

Tri-County will train all staff in Trauma Informed Care basic training by August 31, 2018.

- All agency staff were trained in basic Trauma Informed Care by August 31, 2018. A total of 422 staff were trained during the year.

Goal #5 – Administrative Competence

Objective 1:

A team will be developed to analyze Human Resources and Fiscal Services software and will make a recommendation to stay with Anasazi or purchase new software by April 30, 2018.

- A team has been selected to review software options. Several software packages have been reviewed, but staff do not yet have a recommendation for new software. This objective will be carried over into FY 2019.

- Most of the software models are cloud based which is a concern for the Executive Director. In addition to the inability to access to real-time data for workflows, cloud based solutions are more expensive over the life of the product.

Objective 2:

Software which will be used in the development of Center forms will be selected and purchased by March 31, 2018.

- An initial assessment of software was completed. Further research and discussion is needed prior to purchase.

Goal #6 – Fiscal Responsibility

Objective 1:

Tri-County fiscal and clinical staff will interview other center staff and will create a plan for revenue diversification opportunities by May 31, 2018.

- Reviewing the feasibility of becoming a CLASS provider.

Objective 2:

The Chief Financial Officer will develop a workgroup to look at revenue maximization in the first quarter of FY 2018.

- We have made no progress on this objective.

Agenda Item: 4 th Quarter FY 2018 Corporate Compliance and Quality Management Report Committee: Program	Board Meeting Date September 27, 2018
Background Information: The Department of State Health Services' Performance Contract has a requirement that the Quality Management Department provide "routine" reports to the Board of Trustees about "Quality Management Program activities." Although Quality Management Program activities have been included in the program updates, it was determined that it might be appropriate, in light of this contract requirement, to provide more details regarding these activities. Since the Corporate Compliance Program and Quality Management Program activities are similar in nature, the decision was made to incorporate the Quality Management Program activities into the Quarterly Corporate Compliance Report to the Board and to format this item similar to the program updates. The Corporate Compliance and Quality Management Report for the 4 th quarter of FY 2018 are included in this Board packet.	
Supporting Documentation: 4 th Quarter FY 2018 Corporate Compliance and Quality Management Report	
Recommended Action: For Information Only	

Corporate Compliance and Quality Management Report

4th Quarter, FY 2018

Corporate Compliance Activities

A. Key Statistics:

Two investigations and one review were completed in the 4th Quarter.

1. One investigation was finalized and resulted in staff termination. Payback was made in the amount of \$489.00
2. A second investigation was completed and payback was made in the amount of \$14,362.12. The staff resigned during the investigation.

B. Committee Activities:

The Corporate Compliance Committee met on August 15, 2018. The committee reviewed the following:

1. A summary of the 4th Quarter investigations;
2. Legal updates on compliance issues;
3. Trending items; and
4. HIPAA review.

Quality Management Initiatives

A. Key Statistics:

1. Staff reviewed and submitted 15 record requests, totaling 46 charts.

B. Reviews/Audits:

1. Staff reviewed and submitted ten charts to Cigna Healthspring for services they were billed for dating back to October 1, 2016.
2. Staff reviewed and submitted 32 charts to Amerigroup for services dating back as far as January 1, 2017.
3. Staff reviewed and submitted one chart to WellCare Texan Plus for services they were billed for during timeframes June 20, 2018 to July 4, 2018.
4. Staff reviewed and submitted three charts to Aetna for services they were billed dating back to January 1, 2017.

C. Other Quality Management Activities:

1. Staff reviewed 63 surveys from individuals who were hospitalized in our State Hospital Diversion beds via contract facilities. The majority of the feedback was generally positive.
2. Staff reviewed 59 notes that used the Co-Occurring Psychiatric and Substance Use Disorder (COPSD) modifier to ensure that the intervention was used appropriately. This review indicated an improvement in appropriate use of the code.

3. Staff conducted 57 telemedicine surveys all but one resulting in positive feedback, however it appears as though the negative report may have been an error with the rating scales.

Agenda Item: Annual Corporate Compliance Report and 1 st Quarter Corporate Compliance Training Committee: Program	Board Meeting Date September 27, 2018
Background Information: The Corporate Compliance Officer is required by Board Policy to submit quarterly reports on Corporate Compliance activities to the Board of Trustees as well as an Annual Report at the end of each fiscal year. The Annual Corporate Compliance Report for FY 2018 is attached along with the educational information that has been provided to Center staff. The education portion is included in this packet for on-going education of the Tri-County Board of Trustees on Corporate Compliance issues.	
Supporting Documentation: FY 2018 Annual Corporate Compliance Report FY 2019 1 st Quarter Corporate Compliance Training	
Recommended Action: For Information Only	

Corporate Compliance Program FY 2018 Annual Report

General Overview:

The Board Policy on Corporate Compliance requires that the Chief Compliance Officer present an annual report on program activities and investigations from the previous year.

In FY 2018, the Compliance Department provided face-to-face training for all new employees, as well as on-going training to all Tri-County staff and eligible contractors in the form of a quarterly training newsletter. Additionally, in FY 2018, the Compliance Department initiated a new face-to-face Compliance “refresher” training for all new hires at their three month mark, in order to reinforce the importance of corporate ethics and compliance.

As the Board is likely aware, compliance regulations and auditing have remained a high priority at the state and federal level. Staff remain diligent in our pursuit of legal compliance with all regulations.

The Corporate Compliance Committee is currently reviewing and making any needed revisions to the Corporate Compliance Action Plan.

The Committee continues to review legal updates on a consistent basis.

Corporate Compliance Investigation Results:

For FY 2018, there were 11 corporate compliance allegations which were reviewed. Of the 11 afore-mentioned allegations, seven required further investigation by the Compliance Department. Of the seven cases investigated in FY 2018, two were unconfirmed with payback and five were confirmed with payback.

The Compliance Department continues to conduct intermittent reviews in order to identify potential issues so that they may be addressed as quickly as possible.

Total Corporate Compliance Investigations



Inside this issue:

Cultural Competency

Tri-County Relies
Heavily on Compliance



Corporate Compliance Team

Amy Foerster

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Heather Hensley

Administrator of Compliance

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Michelle Walker

Administrator of Compliance

michellew@tcbhc.org

Cultural Competency

Tri-County serves a community diverse in their cultures, customs, beliefs, languages, and actions; and it is essential to effectively communicate and deliver care in a way that is acceptable and understandable to those with different cultures and lifestyles. As healthcare professionals, it is crucial to develop cultural competency to provide safe and efficient care.

- Always explain information clearly and ask the client or representative to repeat instructions in their own words to ensure understanding.
- Confirm at the time of scheduling if interpretation services are needed.
- Be aware, slow down, speak clearly, and use plain language and acceptable terminology.
- Always protect client rights and never share client's personal information.
- Interact in a way that is safe, judgment free, and non-discriminating.

Did you know Tri-County is an agency that relies heavily on Compliance?

Tri-County Behavioral Healthcare wants all employees to be "Compliance Ambassadors" so to speak. We want all staff to hold Tri-County's values and ethics high, in order to provide quality services to our clients and individuals.

Tri-County wants all staff to be diligent in recognizing compliance concerns and reporting them to the Compliance Department.

All employees should be mindful of compliance rules and regulations. If employees have questions regarding compliance, please ask.

REPORT Compliance Concerns

Corporate Hotline: 866-243-9252

- ◆ Reports are kept confidential and may be made anonymously.
- ◆ Without fear of reprisal or penalties.
- ◆ Report to your supervisor, HR, or any Compliance team member if you suspect any non-compliance.



Staff Acknowledgement: _____

Print

Signature

Date

Agenda Item: Annual Election of FY 2019 Board Officers Committee: Executive	Board Meeting Date September 27, 2018
Background Information: The By-laws for the Tri-County Board of Trustees require Board officers to be elected each fiscal year. Janet Qureshi, Chair of the Nominating Committee, will present the slate of officers for election. Members of the Nominating Committee also include Morris Johnson and Jacob Paschal.	
Supporting Documentation: None	
Recommended Action: Elect Officers for FY 2019 Board of Trustees	

<p>Agenda Item: Executive Director's Annual Evaluation, Compensation and Contract for FY 2019</p> <p>Committee: Executive</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>Annually, the Board of Trustees reviews the Executive Director's performance and considers the terms of the contract and annual compensation. Performance evaluation surveys and a FY 2018 Progress Report on goals and objectives were distributed to all Trustees and members of the Management Team. The results of the surveys were compiled by Gail Page, Chair of the Evaluation Committee. Members of the Evaluation Committee also include Tracy Sorensen and Sharon Walker.</p>	
<p>Supporting Documentation:</p> <p>None</p>	
<p>Recommended Action:</p> <p>Review Executive Director's Evaluation, Compensation and Contract Extension and Take Appropriate Action</p>	

Agenda Item: Appoint Texas Council Representative and Alternate for FY 2019	Board Meeting Date
Committee: Executive	September 27, 2018
Background Information:	
<p>The representative attends the Texas Council of Community Centers, Inc. Board of Directors meetings on a quarterly basis then gives a verbal update to the Tri-County Board at their subsequent Board meetings. The alternate will attend the meeting and provide a report if the representative is unable to do so.</p>	
Supporting Documentation:	
None	
Recommended Action:	
Appoint Texas Council Representative and Alternate for FY 2019	

<p>Agenda Item: Reappoint Tri-County's Consumer Foundation Board of Directors</p> <p>Committee: Executive</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>According to the bylaws for Tri-County's Consumer Foundation (TCCF), one-half of the members are to be reappointed by the Board of Trustees every year, for two-year terms. There is no limit on the number of terms that a member can serve.</p> <p>Each of the following members has an expiring term and has been contacted. All have agreed to continue serving on Tri-County's Consumer Foundation Board for an additional two-year term which will expire on August 31, 2020.</p> <ul style="list-style-type: none"> • Lynn Scott - Mayor of Panorama Village • Madeline Brogan – Professor at Lonestar College • Roger Puccio-Johnson - Executive Team and Managing Director at BRG Capital • Kris Karain – Independent Realtor and Director of Team Reed Foundation 	
<p>Supporting Documentation:</p> <p>None</p>	
<p>Recommended Action:</p> <p>Reappoint Lynn Scott, Madeline Brogan, Roger Puccio-Johnson and Kris Karain to Tri-County's Consumer Foundation Board of Directors for an Additional Two-Year Term Expiring on August 31, 2020</p>	

Agenda Item: Approve Board Policy Changes Committee: Executive	Board Meeting Date September 27, 2018
Background Information: As required by Board Policy, the Executive Director has reviewed the entire Policy Manual to determine if anything needed to be revised. There was only one policy that required change and the change below is recommended for approval by the Board. Revisions: E.20-Facilities Maintenance — <i>September 29, 1988</i> —This Policy has been modified to reflect the primary responsibility for facility maintenance from the Chief Compliance Officer to the Chief Financial Officer.	
Supporting Documentation: <u>Revised Board Policy (Markup Version)</u> E.20-Facilities Maintenance	
Recommended Action: Approve Revisions to Board Policies E.20.	

TRI-COUNTY BEHAVIORAL HEALTHCARE

STATEMENT OF POLICY

Patti Atkins, Chair

February 22, 2018

ORIGINAL EFFECTIVE DATE: September 29, 1988

REVISION DATE: February 22, 2018, September 27, 2018

SUBJECT: Facilities Maintenance

Tri-County Behavioral Healthcare shall provide services in facilities that do not present unnecessary danger to client or staff. An active preventive maintenance program shall be conducted. All efforts will be made to comply with governmental requirements regarding health and safety regulations.

- I. The primary responsibility for facility maintenance rests with ~~Chief Compliance Officer~~ the Chief Financial Officer or designee.
- II. The ~~Chief Compliance Officer~~ Chief Financial Officer shall request sufficient funds in the unit budget to provide for cost of routine maintenance and, if appropriate, additional funds for non-routine anticipated maintenance costs.
- III. At least annually, the ~~Chief Compliance Officer~~ Chief Financial Officer or designee shall, as a part of the budgeting process, prepare a report and include the following:
 - A. Overall condition of facilities addressing such issues as interior and exterior of building, walls, roof, air conditioning/heating units, plumbing, flooring, electrical system, and any other relevant issue pertaining to the conditions of the buildings.
 - B. Utilization of facility including hours of operations, number of clients served in an average week, and number of persons working in facility.
 - C. Recommendations regarding maintenance needs of the facility.

- IV. When repairs or other responsibilities are provided for in a lease for the facility, requests for these services to be performed shall be requested by the unit supervisor ~~Chief Compliance Officer~~ Chief Financial Officer or designee.
- V. When repairs, maintenance or other such services are needed in facilities for which Tri-County is responsible, these services shall be coordinated by the ~~Chief Compliance Officer~~ Chief Financial Officer or designee following approved purchasing procedures.

Agenda Item: Personnel Report for July & August 2018 Committee: Executive	Board Meeting Date: September 27, 2018
Background Information: None	
Supporting Documentation: Personnel Report July & August 2018	
Recommended Action: For Information Only	

Personnel Report July 2018

Total Applications received in July = 375

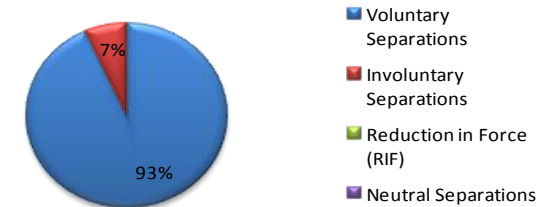
Total New Hires for the month of July = 16

Total New Hires Year to Date = 118

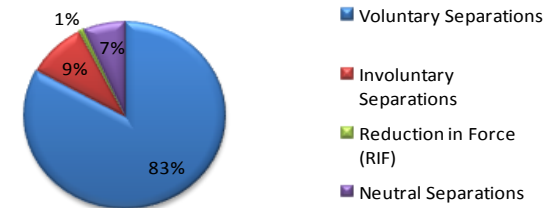
July Turnover - FY18 compared to FY17	FY18	FY17
Number of Active Employees	345	338
Number of Monthly Separations	15	10
Number of Separations YTD	106	89
Year to Date Turnover Rate	31%	26%
July Turnover Rate	4%	3%

Separations by Reason	July Separations	FY18 YTD
Retired	1	5
Involuntarily Terminated	1	10
Neutral Termination	0	6
Dissatisfied	0	4
Lack of Support from Administration	0	2
Micro-managing supervisor	0	1
Lack of growth opportunities/recognition	0	0
Difficulty learning new job	0	0
Co-workers	0	0
Work Related Stress/Environment	0	1
RIF	0	1
Deceased	0	0
Pay	0	2
Health	1	5
Family	2	8
Relocation	2	10
School	1	4
Personal	0	2
Unknown	0	7
New Job	7	38
Total Separations	15	106

July Voluntary, Involuntary, RIF and Neutral Separations



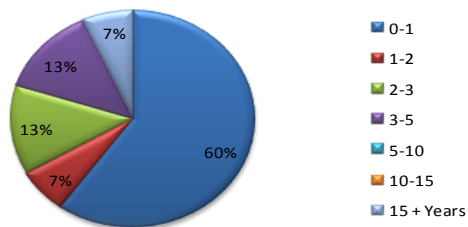
Year to Date Voluntary, Involuntary, RIF and Neutral Separations



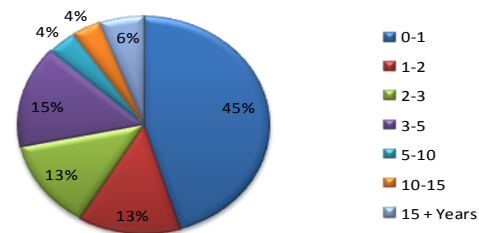
Management Team	# of Employees	Monthly Separations	Year to Date Separations	% July	% YTD
Evan Roberson	21	0	6	0%	29%
Millie McDuffey	30	2	12	7%	40%
Amy Foerster	11	0	1	0%	9%
Tanya Bryant	11	0	1	0%	9%
MH Adult	80	5	25	6%	31%
MH Child & Youth	57	3	19	5%	33%
Catherine Prestigiovanni	8	0	2	0%	25%
PETC	52	4	25	8%	48%
Kelly Shropshire	36	0	9	0%	25%
Kathy Foster	30	1	6	3%	20%
Kenneth Barfield	9	0	0	0%	0%
Total	345	15	106		

Separation by EEO Category	# of Employees	Monthly Separations	Year to Date	% July	% Year to Date
Supervisors & Managers	21	1	4	5%	19%
Medical (MD,DO, LVN, RN, APN, PA, Psychologist)	43	2	15	5%	35%
Professionals (QMHP)	105	5	46	5%	44%
Professionals (QIDP)	31	0	8	0%	26%
Licensed Staff (LCDC, LPC...)	17	0	1	0%	6%
Business Services (Accounting)	14	0	4	0%	29%
Central Administration (HR, IT, Executive Director)	23	0	3	0%	13%
Program Support(Financial Counselors, QA, Training, Med. Records)	45	3	12	7%	27%
Nurse Technicians/Aides	13	3	6	23%	46%
Service/Maintenance	9	0	1	0%	11%
Direct Care (HCS, Respite, Life Skills)	24	1	6	4%	25%
Total	345	15	106		

July Separations by Tenure



Year to Date Separations by Tenure



Personnel Report August 2018

Total Applications received in August = 480

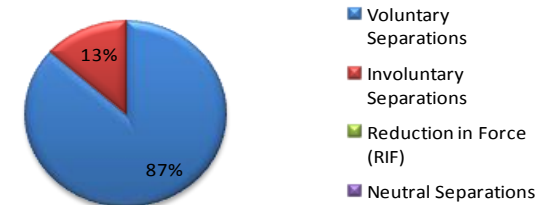
Total New Hires for the month of August = 11

Total New Hires Year to Date = 129

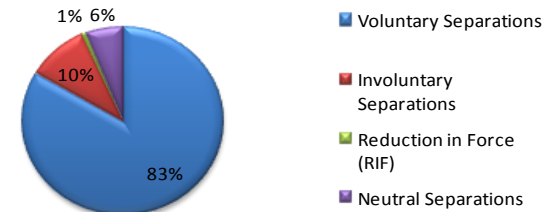
August Turnover - FY18 compared to FY17	FY18	FY17
Number of Active Employees	341	335
Number of Monthly Separations	15	10
Number of Separations YTD	121	99
Year to Date Turnover Rate	35%	30%
August Turnover Rate	4%	3%

Separations by Reason	August Separations	FY18 YTD
Retired	0	5
Involuntarily Terminated	2	12
Neutral Termination	0	6
Dissatisfied	1	5
Lack of Support from Administration	0	2
Micro-managing supervisor	0	1
Lack of growth opportunities/recognition	0	0
Difficulty learning new job	0	0
Co-workers	0	0
Work Related Stress/Environment	0	1
RIF	0	1
Deceased	0	0
Pay	0	2
Health	0	5
Family	0	8
Relocation	3	13
School	2	6
Personal	0	2
Unknown	4	11
New Job	3	41
Total Separations	15	121

August Voluntary, Involuntary, RIF and Neutral Separations



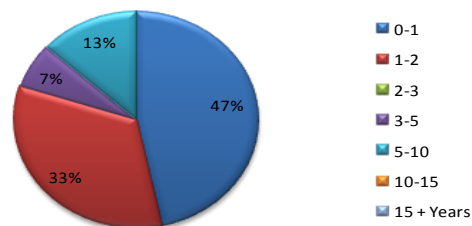
Year to Date Voluntary, Involuntary, RiF and Neutral Separations



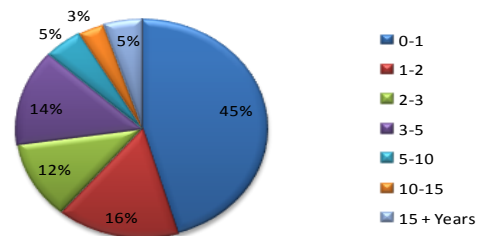
Management Team	# of Employees	Monthly Separations	Year to Date Separations	% August	% YTD
Evan Roberson	21	0	6	0%	29%
Millie McDuffey	30	0	12	0%	40%
Amy Foerster	11	0	1	0%	9%
Tanya Bryant	11	0	1	0%	9%
MH Adult	85	3	28	4%	33%
MH Child & Youth	55	3	22	5%	40%
Catherine Prestigiovanni	7	1	3	14%	43%
PETC	49	5	30	10%	61%
Kelly Shropshire	34	2	11	6%	32%
Kathy Foster	29	1	7	3%	24%
Kenneth Barfield	9	0	0	0%	0%
Total	341	15	121		

Separation by EEO Category	# of Employees	Monthly Separations	Year to Date	% August	% Year to Date
Supervisors & Managers	22	1	5	5%	23%
Medical (MD,DO, LVN, RN, APN, PA, Psychologist)	47	0	15	0%	32%
Professionals (QMHP)	97	11	57	11%	59%
Professionals (QIDP)	29	2	10	7%	34%
Licensed Staff (LCDC, LPC...)	20	0	1	0%	5%
Business Services (Accounting)	14	0	4	0%	29%
Central Administration (HR, IT, Executive Director)	23	0	3	0%	13%
Program Support(Financial Counselors, QA, Training, Med. Records)	45	0	12	0%	27%
Nurse Technicians/Aides	12	0	6	0%	50%
Service/Maintenance	9	0	1	0%	11%
Direct Care (HCS, Respite, Life Skills)	23	1	7	4%	30%
Total	341	15	121		

August Separations by Tenure

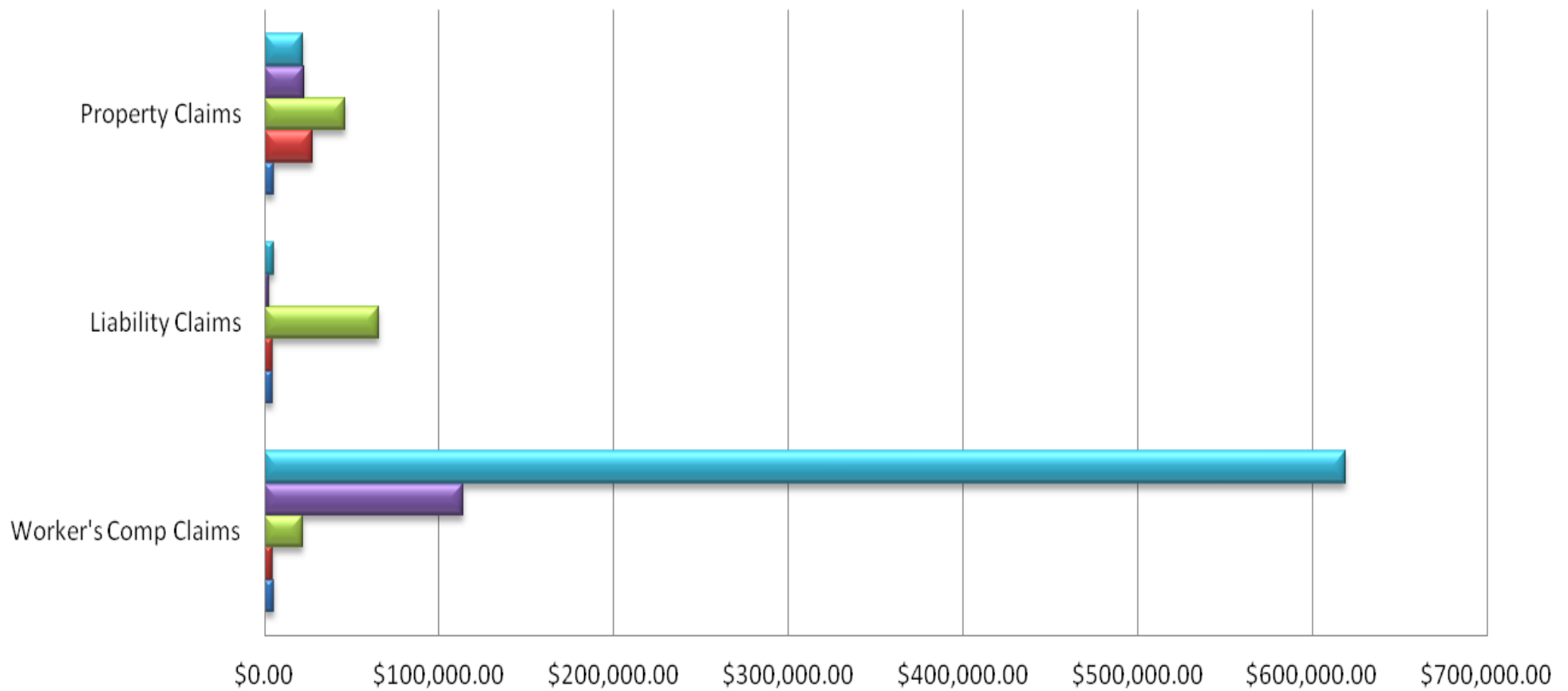


Year to Date Separations by Tenure



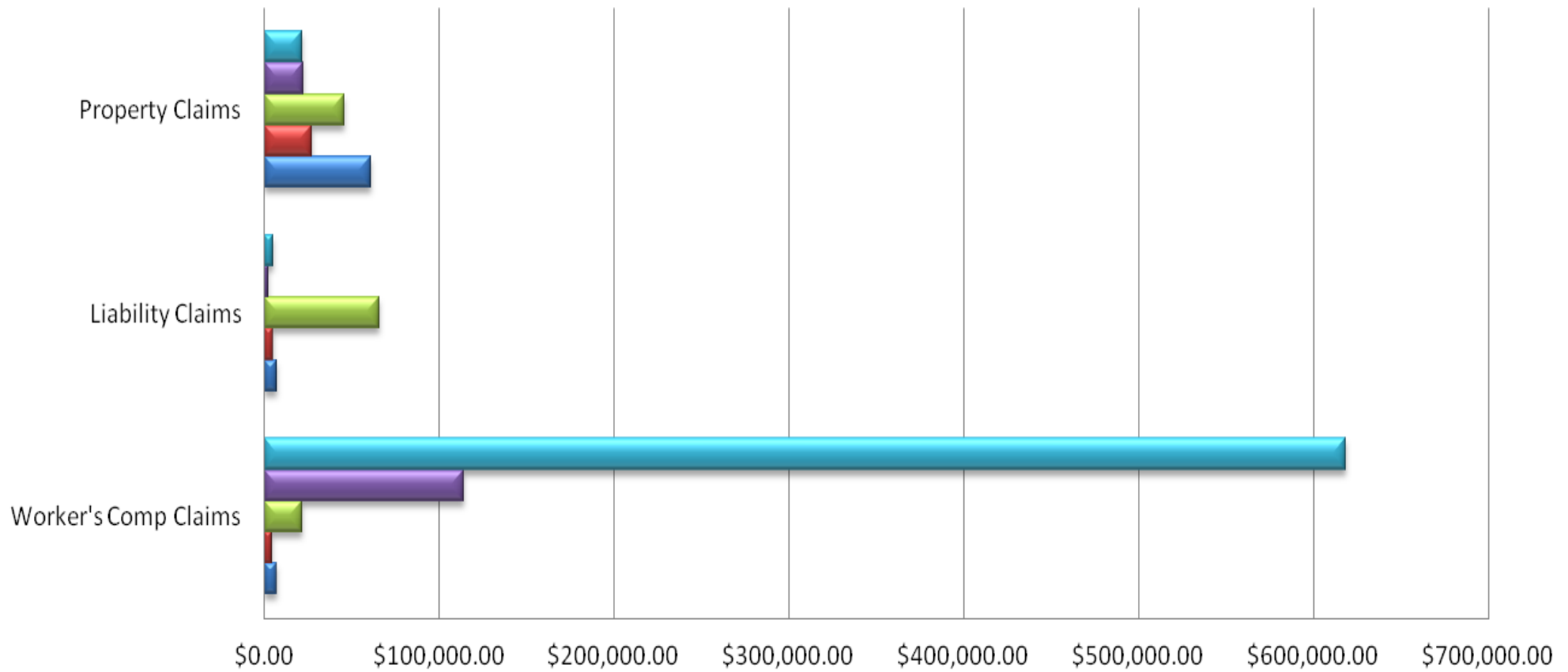
Agenda Item: Texas Council Risk Management Fund Claims Summary as of July & August 2018 Committee: Executive	Board Meeting Date: September 27, 2018
Background Information: None	
Supporting Documentation: Texas Council Risk Management Fund Claims Summary as of July & August 2018	
Recommended Action: For Information Only	

TCRMF Claims Summary July 2018



	Worker's Comp Claims	Liability Claims	Property Claims
2014	\$618,722.00	\$5,295.00	\$21,931.00
2015	\$113,917.00	\$2,556.00	\$22,505.00
2016	\$21,902.00	\$65,795.00	\$46,114.00
2017	\$4,517.00	\$4,893.00	\$27,455.00
2018	\$5,486.00	\$4,596.00	\$5,626.00

TCRMF Claims Summary August 2018



	Worker's Comp Claims	Liability Claims	Property Claims
2014	\$618,722.00	\$5,295.00	\$21,931.00
2015	\$113,917.00	\$2,556.00	\$22,505.00
2016	\$21,902.00	\$65,795.00	\$46,114.00
2017	\$4,517.00	\$4,893.00	\$27,455.00
2018	\$6,955.00	\$7,393.00	\$61,236.00

Agenda Item: Texas Council Quarterly Board Meeting Update Committee: Executive	Board Meeting Date September 27, 2018
Background Information: 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.	
Supporting Documentation: Texas Council Staff Report	
Recommended Action: For Information Only	

<p>Agenda Item: Board of Trustees Reappointments and Oaths of Office</p> <p>Committee: Executive</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>Listed below are the Board members who were reappointed by the Commissioner’s Court of their respective counties for an additional two-year term expiring August 31, 2020.</p> <p>Reappointments:</p> <ul style="list-style-type: none"> • Patti Atkins, Liberty County • Richard Duren, Montgomery County • Jacob Paschal, Walker County • Janet Qureshi, Montgomery County <p>Oaths of Office will be recited at the Board meeting.</p>	
<p>Supporting Documentation:</p> <p>Oath of Office Recitation</p> <p>Montgomery County Trustees – Copy of Minutes from Montgomery County Commissioner’s Court Meeting</p> <p>Liberty County Trustees – Copy of Minutes from Liberty County Commissioner’s Court Meeting</p> <p>Walker County Trustees – Copy of Letter from Walker County Judge Danny Pierce</p>	
<p>Recommended Action:</p> <p>Recite Oaths of Office</p>	

NOTICE OF MEETING OF THE
COMMISSIONERS' COURT OF LIBERTY COUNTY, TEXAS

Notice is hereby given that a Regular meeting of the above named Commissioners' Court will be held on the 10th day of July, 2018, at 9:00 A.M., at the Liberty County Courthouse, 2nd Floor Courtroom, 1923 Sam Houston, Liberty, Texas, at which time the following subjects will be discussed, to-wit:

See attached.

Dated this the 5th day of July, 2018.

Commissioners' Court of Liberty County, Texas

By: 

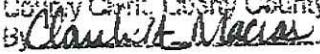
I, the undersigned, County Clerk, do hereby certify that the above Notice of Meeting of the above named Commissioners' Court, is a true and correct copy of said Notice, and that I posted a true and correct copy of said Notice on the bulletin board at the Courthouse door of Liberty County, Texas, at a place readily accessible to the general public at all times on the 5th day of July, 2018, and said Notice remained so posted continuously for at least 72 hours preceding the scheduled time of said Meeting.

Dated the 5th day July, 2018.

County Clerk, Liberty County, Texas

By: 

Received on the 5 Day of July, 2018 at 1:35
o'clock P.M.
Posted on the 5 Day of July, 2018 at 1:40
o'clock P.M.

Paula Williams
County Clerk, Liberty County, Texas
By:  Deputy

ORIGINAL

REGULAR MEETING
COMMISSIONERS COURT
LIBERTY COUNTY, TEXAS

JULY 10, 2018

9:00 A.M.

On Tuesday, July 10, 2018, at 9:00 a.m., a Regular Meeting of Commissioners Court was called to order with the following members present:

Jay Knight	County Judge
Bruce Karbowski	Commissioner Precinct #1
Greg Arthur	Commissioner Precinct #2
James Reaves	Commissioner Precinct #3
Leon Wilson	Commissioner Precinct #4
Paulette Williams	County Clerk

And the agenda was taken up, to-wit:

1. **CALL TO ORDER**
2. **PLEDGE TO U.S. FLAG AND TEXAS FLAG**
3. **INVOCATION** - led by Guy Williams from First Methodist Dayton
4. **CONSENT AGENDA**
 1. **APPROVAL OF MINUTES FOR COMMISSIONERS COURT ON JUNE 26, 2018 AND SPECIAL MEETING ON JULY 03, 2018**
 2. **WARRANTS PAYABLE**
 3. **APPROVE PAYROLL FOR 7/12/2018**
 4. **BUDGET AMENDMENT REQUESTS**
 - LCSO - (CORRECT 6/12/18 BUDGET AMENDMENT - AUDITOR)**
 - R&B #3 - UNANTICIPATED INCOME - CAPITAL LEASE - 2 MACK TRUCKS**
 - R&B #3 - RECORD DONATION OF LAND FROM ANGEL BROTHERS ENT**
 - CONSTABLE PCT#2 - CREATE POSITION FOR H-D ISD RESOURCE**
 - OFFICER 70/30 SPLIT**
 - R&B#2 - LINE TRANSFER FROM ROAD MATERIAL TO CULVERTS**
 - LCSO - LINE ITEM TRANSFER FROM UNIFORMS TO RADIO MAINT.**
 - LCSO - LINE ITEM TRANSFER OTHER INCOME TO AUTO REPAIR**
 5. **PAYROLL CHANGE NOTICES**
 - KEVIN BARNES - COUNTY ATTORNEY - NEW HIRE**
 - TABITHA DYSON - DA'S OFFICE - SALARY CHANGE \$36,750 TO \$37,131.50**
 - NINA JOHNSON - DISTRICT CLERK - PAY OFF COMP TIME 14.13 HRS**

10. DISCUSSION AND TAKE ACTION REGARDING INTERLOCAL AGREEMENT BETWEEN LIBERTY COUNTY AND WATER CONTROL IMPROVEMENT DISTRICT # 1 - COMM WILSON PCT 4

Motion was made by Leon Wilson, seconded by James Reaves, to approve Interlocal agreement between Liberty County and Water Control Improvement District #1. A copy is attached and marked **Exhibit "D"**. Motion passed with all commissioners present voting aye.

11. DISCUSSION AND TAKE ACTION REGARDING PROPOSED GRAND PRIX PIPELINE PERMIT, ROAD USE AGREEMENT AND SURETY BOND - DAVID DOUGLAS

Motion was made by Bruce Karbowski, seconded by James Reaves, to approve Grand Prix Pipeline Permit, Road Use Agreement and Surety Bond. A copy is attached and marked **Exhibit "E"**. Motion passed with all commissioners present voting aye.

12. DISCUSSION AND TAKE ACTION REGARDING GOVPAYNET CREDIT CARD SERVICE FOR PERMIT DEPARTMENT (THIS ITEM WAS TABLED LAST COURT FOR FURTHER RESEARCH) - DAVID DOUGLAS

Motion was made by Leon Wilson, seconded by James Reaves, to approve GovPayNet Credit Card Services for Permit Department. Motion passed with all commissioners present voting aye.

13. DISCUSSION AND TAKE ACTION REGARDING THE RE-APPOINTMENT OF PATTI ATKINS TO THE TRI-COUNTY BEHAVIORAL HEALTHCARE BOARD OF TRUSTEES - CO JUDGE

Motion was made by Greg Arthur, seconded by Bruce Karbowski, to approve the re-appointment of Patti Atkins to the Tri-County Behavioral Healthcare Board of Trustees. Motion passed with all commissioners present voting aye.

14. DISCUSSION AND TAKE ACTION REGARDING APPROVAL TO DECLARE OLD DESK FROM COLLECTIONS AS SALVAGE - PURCHASING AGENT

Motion was made by James Reaves, seconded by Bruce Karbowski, to declare desk from Collections as salvage. Motion passed with all commissioners present voting aye.

15. DISCUSSION AND TAKE ACTION REGARDING ACCEPT AND AWARD BID #18-13 USED VEHICLE FOR CONSTABLE PRECINCT 6 - PURCHASING AGENT

Motion was made by James Reaves, seconded by Bruce Karbowski, to accept and award bid #18-13 for used vehicle for constable pct 6. A copy is attached and marked as **Exhibit "F"**. Motion passed with all commissioners present voting aye.

#2 84
AUG 14 2018

COMMISSIONERS COURT DOCKET
July 24, 2018
REGULAR SESSION

THE STATE OF TEXAS

COUNTY OF MONTGOMERY

BE IT REMEMBERED that on this the 24th day of July, 2018, the Honorable Commissioners Court of Montgomery County, Texas, was duly convened in a Regular Session in the Commissioners Courtroom of the Alan B. Sadler Commissioners Court Building, 501 North Thompson, Conroe, Texas, with the following members of the Court present:

County Judge	Craig Doyal
Commissioner, Precinct 1	Mike Meador
Commissioner, Precinct 2	Charlie Riley
Commissioner, Precinct 3	James Noack
Also County Clerk's Office	Amber Twiddy

ABSENT:

Commissioner, Precinct 4	Jim Clark
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INVOCATION GIVEN BY Tim Holifield

THE PLEDGE OF ALLEGIANCE TO THE FLAG OF THE UNITED STATES OF AMERICA
RECITED.

THE PLEDGE OF ALLEGIANCE TO THE TEXAS STATE FLAG RECITED.

1. COMMISSIONERS COURT AGENDA APPROVED.

Motion by Commissioner Meador, seconded by Commissioner Riley, to approve Commissioners Court Agenda for discussion and necessary action. Motion carried.

2. PROCLAMATION APPROVED – NATIONAL HEALTH CENTER WEEK

Motion by Commissioner Meador, seconded by Commissioner Riley to recognize August 12-18, 2018 as National Health Center Week in Montgomery County. Motion carried.

AGENDA ITEM 7B – MONTGOMERY COUNTY EMPLOYEES COMMITTEE

STEPHANIE KEETON, WITH PURCHASING, WAS PRESENTED WITH EMPLOYEE OF THE MONTH FOR JULY, 2018.

3. MINUTES APPROVED – COUNTY CLERK

Motion by Commissioner Riley, seconded by Commissioner Meador, to approve the Minutes from Regular Session of Commissioners Court dated July 10, 2018. Motion carried.

AGENDA ITEM 9F2c WAS MOVED TO THE OPEN AGENDA. SEE MOTION 18 FOR COURT ACTION.

AGENDA ITEM 902 AND 903 WERE DEFERRED.

Bill O'Sullivan addressed the court concerning the appointment of Rob Eissler, stronger ethics policy, and stated that benefits have put major areas into bankruptcy.

4. RESOLUTION AND ORDER APPROVED – CONSENT AGENDA – AGENDA ITEMS 9A-S

11. REQUEST APPROVED to rescind Order to Abate Nuisance for 17513 Woods Drive, New Caney, Texas 77357. Rescinding original order to abate to notify additional owners of property.
12. REQUEST APPROVED to rescind Order to Abate Nuisance for 11791 White Cedar St., Willis, Texas 77378. Rescinding original order to abate to notify additional owners of property.
13. ORDER APPROVED to abate a public nuisance on the following property that is abandoned, deemed unsafe, or unlivable: 16310 Shalamar, Magnolia Texas 77353. The estimated total cost is \$3,600.00 and will be funded by CDBG.
14. VARIANCE REQUEST APPROVED to install an aerobic on site system in the 100 year flood plain located at 13828 Walker Road Conroe, TX 77302.
15. VARIANCE REQUEST APPROVED to install an aerobic on site system in the 100 year flood plain located at 18385 Nightingale Conroe, TX 77302.
16. VARIANCE REQUEST APPROVED to install an aerobic on site system in the 100 year flood plain located at 15402 Rusty Oak Trail Conroe, TX 77302.
17. VARIANCE REQUEST APPROVED to install an aerobic on site system in the 100 year flood plain located at 217 Sundew Court Magnolia, TX 77355.

COUNTY JUDGE – AGENDA ITEMS 9J1-2

- J1. REVISED RULES OF PROCEDURE FOR COMMISSIONERS COURT RECORDED as adopted June 26, 2018.
- J2. RE-APPOINTMENT APPROVED of Richard Duren and Janet Qureshi to the Tri-County Behavioral Healthcare Board of Trustees for a two-year term ending August 31, 2020.

SHERIFF – AGENDA ITEM 9K1

- K1. UPDATED APPLICATION ACCEPTED to the Law Enforcement Support Office (LESO) for the Montgomery County Sheriff's Office and County Judge is authorized to sign as the authorized representative for Montgomery County.

COUNTY ATTORNEY – REAL PROPERTY - AGENDA ITEMS 9L1-4

L1. PRECINCT 1

- a. ORDER APPROVED authorizing Notice of Public Hearing for Revision of Plat on August 28, 2018 for partial revision to lots/plats being described as Reserve "A", Hilltop Village Subdivision to be known as Kids World Learning Center.

L2. PRECINCT 2

- a. PUBLIC HEARING DATE SET for August 28, 2018 for abandonment of all or a portion of Old Hardin Store Road beginning at its intersection with Hardin Store Road and terminating at its intersection with railroad right of way.

L3. PRECINCT 3

- a. ORDER APPROVED acknowledging receipt of check in the amount of \$20.00 from Walter E. Vars for lease of real property described as 1.330 acres known as Lot 7 Skylight Timbers. Check has been forwarded to the Auditor for further processing.



**MINUTES for Walker County Commissioners Court
REGULAR SESSION
Monday, July 23, 2018, 9:00 a.m.**



CALL TO ORDER

Be it remembered, Commissioners Court of Walker County was called to order by County Judge, Danny Pierce at 9:03 a.m., in Commissioners Courtroom, 1st Floor, 1100 University Avenue, Huntsville Texas.

County Judge	Danny Pierce	Present
Precinct 1, Commissioner	Danny Kuykendall	Present
Precinct 2, Commissioner	Ronnie White	Present
Precinct 3, Commissioner	Bill Daugette	Present
Precinct 4, Commissioner	Jimmy D. Henry	Present

County Judge, Danny Pierce stated a quorum was present. County Clerk, Kari French certified the notice of the meeting was given in accordance with Section 551.001 of the Texas Government Code.

GENERAL ITEMS

Prayer was led by Pastor James Ray Necker.
Pledge of Allegiance and Texas Pledge were performed.

CONSENT AGENDA

1. Approve minutes from Commissioners Court Regular Session on July 9, 2018.
2. Approve minutes from Commissioners Court Special Session on July 16, 2018.
3. Receive Financial Information as of July 17, 2018 for the fiscal year ended September 30, 2018.
4. Receive Financial Information as of the month ended May 31, 2018 for the fiscal year ending September 30, 2018.

Commissioner Daugette asked to pull item 1. On the Budget section, the Historical Commission changed their request from \$4,000 to \$10,000. The minutes only reflect the \$4,000. County Clerk, Kari French stated that the information provided was from the supplemental requests and would update the minutes accordingly.

MOTION: Made by Commissioner Daugette to APPROVE consent agenda with correction.
SECOND: Made by Commissioner Kuykendall.
VOTE: Motion carried unanimously.

DEPARTMENT REPORTS

5. Receive Treasurer Investment Report for June 2018.
6. Receive County Clerk Financial Report for May 2018.
7. Receive County Clerk Financial Report for June 2018.
8. Receive Planning and Development report for June 2018.

ACTION: Motion carried unanimously.

Commissioners Court

21. Discuss and take action on the retention agreement for legal representation in the pharmaceutical industry lawsuit.
Judge Pierce presented information. Mr. Park was present and spoke about time records and asked to allow the Judge to sign a new contract to be presented to the Comptroller.

MOTION: Made by Commissioner White to APPROVE the retention agreement for legal representation in the pharmaceutical industry lawsuit.
SECOND: Made by Commissioner Henry.
VOTE: Motion carried unanimously.

22. Discuss and take action on Resolution 2018-70 regarding the pharmaceutical industry.
Judge Pierce presented information.

MOTION: Made by Commissioner Kuykendall to APPROVE Resolution 2018-70.
SECOND: Made by Commissioner Henry.
VOTE: Motion carried unanimously.

16. Discuss and take action on Amending Plat (P # 2018-022) of Lot(s) 6, 7, 38 and 39, Block 3, Section 5 of Riverside Lakeland Subdivision, J. Rutch Survey, A-482 - Hill Top Dr./Ridge Top Dr.
Andy Isbell presented information.

MOTION: Made by Commissioner Daugette to APPROVE amending P# 2018-022.
SECOND: Made by Commissioner White.
VOTE: Motion carried unanimously.

17. Discuss and take action on request for variance to Section 5.3 of the Walker County Subdivision Regulations regarding lot depth from Bobby Kowis for 3 Jack's Ranch Subdv., Daniel J. Toler Survey, A-546 Gregory Lane / Jones Road - Pct. 4.
Andy Isbell presented information.

MOTION: Made by Commissioner Henry to APPROVE variance to Section 5.3 of the Walker County Subdivision Regulations regarding lot depth.
SECOND: Made by Commissioner Kuykendall.
VOTE: Motion carried unanimously.

18. Discuss and take action on P # 2018-019, 3 Jack's Ranch Subdivision, Daniel J. Toler Survey, A-546 Gregory Lane / Jones Road - Pct. 4.
Andy Isbell presented information.

MOTION: Made by Commissioner Henry to APPROVE P# 2018-019, pending all signatures to be on the final plat.
SECOND: Made by Commissioner White.
VOTE: Motion carried unanimously.

19. Discuss and take action on Grand Prix Pipeline, LLC request for variance to allow a non-contiguous multi property development permit for the Grand Prix Pipeline project.
Andy Isbell presented information.

MOTION: Made by Commissioner Daugette to APPROVE the Grand Prix Pipeline, LLC request for variance to allow a non-contiguous multi property development permit for the Grand Prix Pipeline project conditional with the initial permit fee as established and the same permit fee each time presented regardless of lot numbers.
SECOND: Made by Commissioner Kuykendall.
VOTE: Motion carried unanimously.

Commissioners Court

20. Discuss ETJ Interlocal Agreement between Walker County and the City of Huntsville.
Commissioner White presented information. There was discussion among the Court about the current contract truly being null and void. There is nothing wrong with the current contract, it is not being enforced. There is a draft version under legal review at this time.

ACTION: There was discussion among the Court.

23. Discuss and take action on appointing Jacob Paschal to the Tri-County Behavioral Healthcare Board of Trustees.
Judge Pierce presented information.

MOTION: Made by Commissioner Henry to APPROVE appointing Jacob Paschal to the Tri-County Behavioral Healthcare Board of Trustees
SECOND: Made by Commissioner Daugette.
VOTE: Motion carried unanimously.

24. Discuss and take action on Proclamation 2018-69, Samuel Walker Houston High School.
Judge Pierce presented information.

MOTION: Made by Commissioner White to APPROVE Proclamation 2018-69.
SECOND: Made by Commissioner Daugette.
VOTE: Motion carried unanimously.

*Court Recess - County Judge, Danny Pierce, took a recess at 10:17 a.m.
Court Reconvene - County Judge, Danny Pierce, reconvened at 10:32 a.m.*

OATH OF OFFICE

I, _____,
do solemnly swear,
that I will faithfully execute
the duties of the office of Trustee
of Tri-County Behavioral Healthcare,
and will, to the best of my ability
preserve, protect, and defend the Constitution
and laws of the United States and of this State;
and I furthermore solemnly swear
that I have not directly nor indirectly,
paid, offered, or promised to pay,
contributed, nor promised to contribute
any money, or valuable thing,
or promised any public office or employment,
as a reward for the giving or withholding a vote
to secure my appointment,
and further affirm that I,
nor any company, association, or corporation
of which I am an officer or principal
will act as supplier of services or goods,
nor bid or negotiate to supply
such goods or services, for this Center,
so help me God.

Agenda Item: Board of Trustees Committee Appointments Committee: Executive	Board Meeting Date September 27, 2018
Background Information: Patti Atkins, Chair of the Board, will appoint committee members and their respective chairs at the Board meeting.	
Supporting Documentation: None	
Recommended Action: For Information Only	

Agenda Item: Board of Trustees Attendance Analysis for FY 2018 Regular and Special Called Board Meetings	Board Meeting Date September 27, 2018
Committee: Executive	
Background Information:	
None	
Supporting Documentation:	
Board of Trustees Attendance Analysis for FY 2018	
Recommended Action:	
For Information Only	

Board of Trustees Attendance Analysis | FY 2018

Board Member	Regular Meetings	Attendance Percentage for Regular Meetings	Special Called Meetings	Attendance Percentage for Special Called Meetings	Total Attendance
Patti Atkins	9/9	100%	-	-	100%
Tracy Sorensen	6/9	67%	-	-	67%
Sharon Walker	9/9	100%	-	-	100%
Richard Duren	8/9	89%	-	-	89%
Morris Johnson	8/9	89%	-	-	89%
Gail Page	7/9	78%	-	-	78%
Jacob Paschal	5/9	56%	-	-	56%
Janet Qureshi	5/9	56%	-	-	56%
(Vacant)					

Summary of Attendance

Total Regular Meetings Held:

2016

9

2017

9

2018

9

Average Attendance:

87%

79%

79%

Total Special Called Meetings Held:

0

0

0

Average Attendance:

N/A

N/A

N/A

Total Number of Meetings Held:

9

9

9

Average Attendance:

87%

79%

79%

Average Number of Members Present:

7.44

6.45

6.33

NOTE: ALL ABSENCES LISTED ABOVE WERE EXCUSED.

Agenda Item: Approve July 2018 Financial Statements Committee: Business	Board Meeting Date September 27, 2018
Background Information: None	
Supporting Documentation: July 2018 Financial Statements	
Recommended Action: Approve July 2018 Financial Statements	

July 2018 Financial Summary

Revenues for July 2018 were \$2,564,619 and operating expenses were \$2,418,442; resulting in a gain in operations of \$146,177. Capital Expenditures and Extraordinary Expenses for July were \$105,029; resulting in a gain of \$41,148. Total revenues were 102.30% of the monthly budgeted revenues and total expenses were 100.70% of the monthly budgeted expenses.

Year to date revenues are \$27,040,359 and operating expenses are \$25,672,166; leaving excess operating revenues of \$1,368,193. YTD Capital Expenditures and Extraordinary Expenses are \$1,077,353; resulting in a gain YTD of \$290,840. Total revenues are 100.14% of the YTD budgeted revenues and total expenses are 98.82% of the YTD budgeted expenses

REVENUES

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

Revenue Source	YTD Revenue	YTD Budget	% of Budget	\$ Variance
HHSC – HB 13 SA Admin	0.00	44,400	0	44,400

HHSC – HB 13 SA Admin – We have not yet received the contract from HHSC for HB 13 Substance Abuse Administration. As a result, we have not recognized any of these funds at this time.

EXPENSES

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

Expense Source	YTD Expenses	YTD Budget	% of Budget	\$ Variance
Contract Hospital - Child	186,275	156,002	119.41%	30,273

Contract Hospital – Child – This line item represents the dollars spent on contract hospital admissions for children. Hospital admissions are continuing to increase in all of our service populations. We have been closely monitoring all contract hospital admissions to ensure that our spending is in line with our available funding.

TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended July 31, 2018

	TOTALS COMBINED FUNDS July 2018	TOTALS COMBINED FUNDS June 2018	Increase (Decrease)
ASSETS			
CURRENT ASSETS			
Imprest Cash Funds	3,160	3,710	(550)
Cash on Deposit-General Fund	9,458,981	10,380,260	(921,279)
Cash on Deposit-Debt Fund			-
Accounts Receivable	2,066,852	1,931,557	135,295
Inventory	4,362	4,412	(50)
TOTAL CURRENT ASSETS	11,533,354	12,319,938	(786,584)
FIXED ASSETS	20,760,463	20,760,463	-
OTHER ASSETS	133,576	62,732	70,844
TOTAL ASSETS	\$ 32,427,393	\$ 33,143,134	\$ (715,739)
LIABILITIES, DEFERRED REVENUE, FUND BALANCES			
CURRENT LIABILITIES	1,390,411	1,334,067	56,343
NOTES PAYABLE	642,552	642,552	-
DEFERRED REVENUE	931,486	1,750,885	(819,399)
LONG-TERM LIABILITIES FOR			
Line of Credit - Tradition Bank	-	-	-
Note Payable Prosperity Bank	-	-	-
First Financial loan tied to CD	733,333	756,250	(22,917)
First Financial Construction Loan	12,173,534	12,211,677	(38,142)
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR			
General Fund	290,840	249,692	41,148
FUND EQUITY			
RESTRICTED			
Net Assets Reserved for Debt Service	(12,906,868)	(12,967,926)	61,059
Reserved for Debt Retirement	-	-	-
COMMITTED			
Net Assets-Property and Equipment	20,760,463	20,760,463	-
Reserved for Vehicles & Equipment Replacement	678,112	678,112	-
Reserved for Facility Improvement & Acquisitions	-	-	-
Reserved for Board Initiatives	1,500,000	1,500,000	-
Reserved for 1115 Waiver Programs	516,833	516,833	-
ASSIGNED			
Reserved for Workers' Compensation	274,409	274,409	-
Reserved for Current Year Budgeted Reserve	67,833	61,666	6,167
Reserved for Insurance Deductibles	100,000	100,000	-
Reserved for Accrued Paid Time Off	(642,552)	(642,552)	-
UNASSIGNED			
Unrestricted and Undesignated	5,917,008	5,917,008	-
TOTAL LIABILITIES/FUND BALANCE	\$ 32,427,393	\$ 33,143,134	\$ (715,741)

**TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended July 31, 2018**

	General Operating Funds	Memorandum Only Final August 2017
ASSETS		
CURRENT ASSETS		
Imprest Cash Funds	3,160	3,854
Cash on Deposit-General Fund	9,458,981	5,383,227
Cash on Deposit-Debt Fund	-	-
Accounts Receivable	2,066,852	4,136,003
Inventory	4,362	4,986
TOTAL CURRENT ASSETS	11,533,354	9,528,070
FIXED ASSETS	20,760,463	20,760,463
OTHER ASSETS	133,576	205,342
	\$ 32,427,393	\$ 30,493,875
LIABILITIES, DEFERRED REVENUE, FUND BALANCES		
CURRENT LIABILITIES	1,390,411	1,169,877
NOTES PAYABLE	642,552	642,552
DEFERRED REVENUE	931,486	(422,827)
LONG-TERM LIABILITIES FOR		
Line of Credit - Tradition Bank	-	-
Note Payable Prosperity Bank	-	-
First Financial loan tied to CD	733,333	985,417
First Financial Construction Loan	12,173,534	12,399,793
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR		
General Fund	290,840	3,492,382
FUND EQUITY		
RESTRICTED		
Net Assets Reserved for Debt service-Restricted	(12,906,868)	(13,385,209)
Reserved for Debt Retirement	-	-
COMMITTED		
Net Assets-Property and Equipment-Committed	20,760,463	20,760,463
Reserved for Vehicles & Equipment Replacement	678,112	678,112
Reserved for Facility Improvement & Acquisitions	-	-
Reserved for Board Initiatives	1,500,000	1,500,000
Reserved for 1115 Waiver Programs	516,833	516,833
ASSIGNED		
Reserved for Workers' Compensation-Assigned	274,409	274,409
Reserved for Current Year Budgeted Reserve -Assigned	67,833	-
Reserved for Insurance Deductibles-Assigned	100,000	100,000
Reserved for Accrued Paid Time Off	(642,552)	(642,552)
UNASSIGNED		
Unrestricted and Undesignated	5,917,008	2,424,625
TOTAL LIABILITIES/FUND BALANCE	\$ 32,427,393	\$ 30,493,875

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
For the Month Ended July 2018
and Year To Date as of July 2018

INCOME:	MONTH OF July 2018	YTD July 2018
Local Revenue Sources	99,115	1,122,945
Earned Income	952,612	11,103,748
General Revenue-Contract	1,512,892	14,813,667
TOTAL INCOME	\$ 2,564,619	\$ 27,040,359
EXPENSES:		
Salaries	1,369,509	15,540,274
Employee Benefits	267,453	3,064,462
Medication Expense	57,251	617,195
Travel-Board/Staff	36,355	406,968
Building Rent/Maintenance	3,503	232,598
Consultants/Contracts	467,393	3,638,617
Other Operating Expenses	216,978	2,172,052
TOTAL EXPENSES	\$ 2,418,442	\$ 25,672,166
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 146,177	\$ 1,368,193
CAPITAL EXPENDITURES		
Capital Outlay-FF&E, Automobiles, Building	11,033	226,112
Capital Outlay-Debt Service	93,996	851,241
TOTAL CAPITAL EXPENDITURES	\$ 105,029	\$ 1,077,353
GRAND TOTAL EXPENDITURES	\$ 2,523,471	\$ 26,749,520
Excess (Deficiency) of Revenues and Expenses	\$ 41,148	\$ 290,840

Debt Service and Fixed Asset Fund:

Debt Service	93,996	851,241
Excess(Deficiency) of revenues over Expenses	93,996	851,241

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
Year to Date as of July 2018

	YTD July 2018	APPROVED BUDGET	Increase (Decrease)
INCOME:			
Local Revenue Sources	1,122,945	1,043,634	79,311
Earned Income	11,103,748	11,126,193	(22,445)
General Revenue-Contract	14,813,667	14,832,806	(19,139)
TOTAL INCOME	\$ 27,040,359	\$ 27,002,633	\$ 37,726
EXPENSES:			
Salaries	15,540,274	15,697,349	(157,075)
Employee Benefits	3,064,462	3,061,374	3,088
Medication Expense	617,195	612,026	5,169
Travel-Board/Staff	406,968	413,412	(6,444)
Building Rent/Maintenance	232,598	246,304	(13,706)
Consultants/Contracts	3,638,617	3,677,035	(38,418)
Other Operating Expenses	2,172,052	2,233,357	(61,305)
TOTAL EXPENSES	\$ 25,672,166	\$ 25,940,857	\$ (268,691)
 Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	 \$ 1,368,193	 \$ 1,061,776	 \$ 306,417
 CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	226,112	284,560	(58,448)
Capital Outlay-Debt Service	851,241	842,292	8,949
TOTAL CAPITAL EXPENDITURES	\$ 1,077,353	\$ 1,126,852	\$ (49,499)
 GRAND TOTAL EXPENDITURES	 \$ 26,749,520	 \$ 27,067,709	 \$ (318,189)
 Excess (Deficiency) of Revenues and Expenses	 \$ 290,840	 \$ (65,076)	 \$ 355,916

Debt Service and Fixed Asset Fund:

Debt Service	851,241	842,292	8,949
Excess(Deficiency) of revenues over Expenses	851,241	842,292	8,949

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
For the Month Ended July 2018

INCOME:	MONTH OF July 2018	APPROVED BUDGET	Increase (Decrease)
Local Revenue Sources	99,115	80,355	18,760
Earned Income	952,612	920,856	31,756
General Revenue-Contract	1,512,892	1,505,844	7,048
TOTAL INCOME	\$ 2,564,619	\$ 2,507,055	\$ 57,564
EXPENSES:			
Salaries	1,369,509	1,420,442	(50,933)
Employee Benefits	267,453	263,219	4,234
Medication Expense	57,251	32,141	25,110
Travel-Board/Staff	36,355	39,016	(2,661)
Building Rent/Maintenance	3,503	8,012	(4,509)
Consultants/Contracts	467,393	455,349	12,044
Other Operating Expenses	216,978	235,114	(18,136)
TOTAL EXPENSES	\$ 2,418,442	\$ 2,453,293	\$ (34,851)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 146,177	\$ 53,762	\$ 92,415
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	11,033	(41,375)	52,408
Capital Outlay-Debt Service	93,996	94,070	(74)
TOTAL CAPITAL EXPENDITURES	\$ 105,029	\$ 52,695	\$ 52,334
GRAND TOTAL EXPENDITURES	\$ 2,523,471	\$ 2,505,988	\$ 17,483
Excess (Deficiency) of Revenues and Expenses	\$ 41,148	\$ 1,067	\$ 40,081

Debt Service and Fixed Asset Fund:

Debt Service	93,996	94,070	(74)
Excess(Deficiency) of revenues over Expenses	93,996	94,070	(74)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With July 2017 Comparative Data
Year to Date as of July 2018

INCOME:	YTD July 2018	YTD July 2017	Increase (Decrease)
Local Revenue Sources	1,122,945	3,861,447	(2,738,502)
Earned Income	11,103,748	13,391,341	(2,287,593)
General Revenue-Contract	14,813,667	13,961,119	852,548
TOTAL INCOME	\$ 27,040,359	\$ 31,213,907	\$ (4,173,548)
EXPENSES:			
Salaries	15,540,274	15,108,549	431,725
Employee Benefits	3,064,462	2,906,041	158,421
Medication Expense	617,195	612,512	4,683
Travel-Board/Staff	406,968	424,604	(17,636)
Building Rent/Maintenance	232,598	404,935	(172,337)
Consultants/Contracts	3,638,617	5,751,671	(2,113,054)
Other Operating Expenses	2,172,052	2,415,281	(243,229)
TOTAL EXPENSES	\$ 25,672,166	\$ 27,623,593	\$ (1,951,427)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 1,368,193	\$ 3,590,314	\$ (2,222,121)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	226,112	950,014	(723,902)
Capital Outlay-Debt Service	851,241	749,589	101,652
TOTAL CAPITAL EXPENDITURES	\$ 1,077,353	\$ 1,699,603	\$ (622,250)
GRAND TOTAL EXPENDITURES	\$ 26,749,520	\$ 29,323,196	\$ (2,573,676)
Excess (Deficiency) of Revenues and Expenses	\$ 290,840	\$ 1,890,711	\$ (1,599,871)

Debt Service and Fixed Asset Fund:

Debt Service	851,241	749,589	101,652
Excess(Deficiency) of revenues over Expenses	851,241	749,589	101,652

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With July 2017 Comparative Data
For the Month Ended July 2018

INCOME:	MONTH OF July 2018	MONTH OF July 2017	Increase (Decrease)
Local Revenue Sources	99,115	83,751	15,364
Earned Income	952,612	1,229,393	(276,781)
General Revenue-Contract	1,512,892	1,224,091	288,801
TOTAL INCOME	\$ 2,564,619	\$ 2,537,235	\$ 27,384

Salaries	1,369,509	1,337,239	32,270
Employee Benefits	267,453	175,315	92,138
Medication Expense	57,251	39,290	17,961
Travel-Board/Staff	36,355	39,220	(2,865)
Building Rent/Maintenance	3,503	66,087	(62,584)
Consultants/Contracts	467,393	603,342	(135,949)
Other Operating Expenses	216,978	177,982	38,996
TOTAL EXPENSES	\$ 2,418,442	\$ 2,438,475	\$ (20,033)

Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 146,177	\$ 98,760	\$ 47,417
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CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	11,033	35,958	(24,925)
Capital Outlay-Debt Service	93,996	88,667	5,329
TOTAL CAPITAL EXPENDITURES	\$ 105,029	\$ 124,625	\$ (19,596)

GRAND TOTAL EXPENDITURES	\$ 2,523,471	\$ 2,563,100	\$ (39,629)
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Excess (Deficiency) of Revenues and Expenses	\$ 41,148	\$ (25,865)	\$ 67,013
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Debt Service and Fixed Asset Fund:

Debt Service	93,996	88,667	5,329
			-
Excess(Deficiency) of revenues over Expenses	93,996	88,667	5,329

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With June 2018 Comparative Data
For the Month Ended July 2018

INCOME:	MONTH OF July 2018	MONTH OF June 2018	Increase (Decrease)
Local Revenue Sources	99,115	119,488	(20,373)
Earned Income	952,612	985,630	(33,018)
General Revenue-Contract	1,512,892	1,447,820	65,071
TOTAL INCOME	\$ 2,564,619	\$ 2,552,938	\$ 11,680
EXPENSES:			
Salaries	1,369,509	1,502,258	(132,749)
Employee Benefits	267,453	284,568	(17,115)
Medication Expense	57,251	48,314	8,936
Travel-Board/Staff	36,355	43,785	(7,430)
Building Rent/Maintenance	3,503	5,241	(1,738)
Consultants/Contracts	467,393	360,056	107,337
Other Operating Expenses	216,978	199,572	17,406
TOTAL EXPENSES	\$ 2,418,442	\$ 2,443,794	\$ (25,353)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 146,177	\$ 109,144	\$ 37,033
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	11,033	6,594	4,440
Capital Outlay-Debt Service	93,996	94,092	(96)
TOTAL CAPITAL EXPENDITURES	\$ 105,029	\$ 100,686	\$ 4,344
GRAND TOTAL EXPENDITURES	\$ 2,523,471	\$ 2,544,480	\$ (21,009)
Excess (Deficiency) of Revenues and Expenses	\$ 41,148	\$ 8,458	\$ 32,690

Debt Service and Fixed Asset Fund:

Debt Service	93,996	94,092	(96)
Excess(Deficiency) of revenues over Expenses	93,996	94,092	(96)

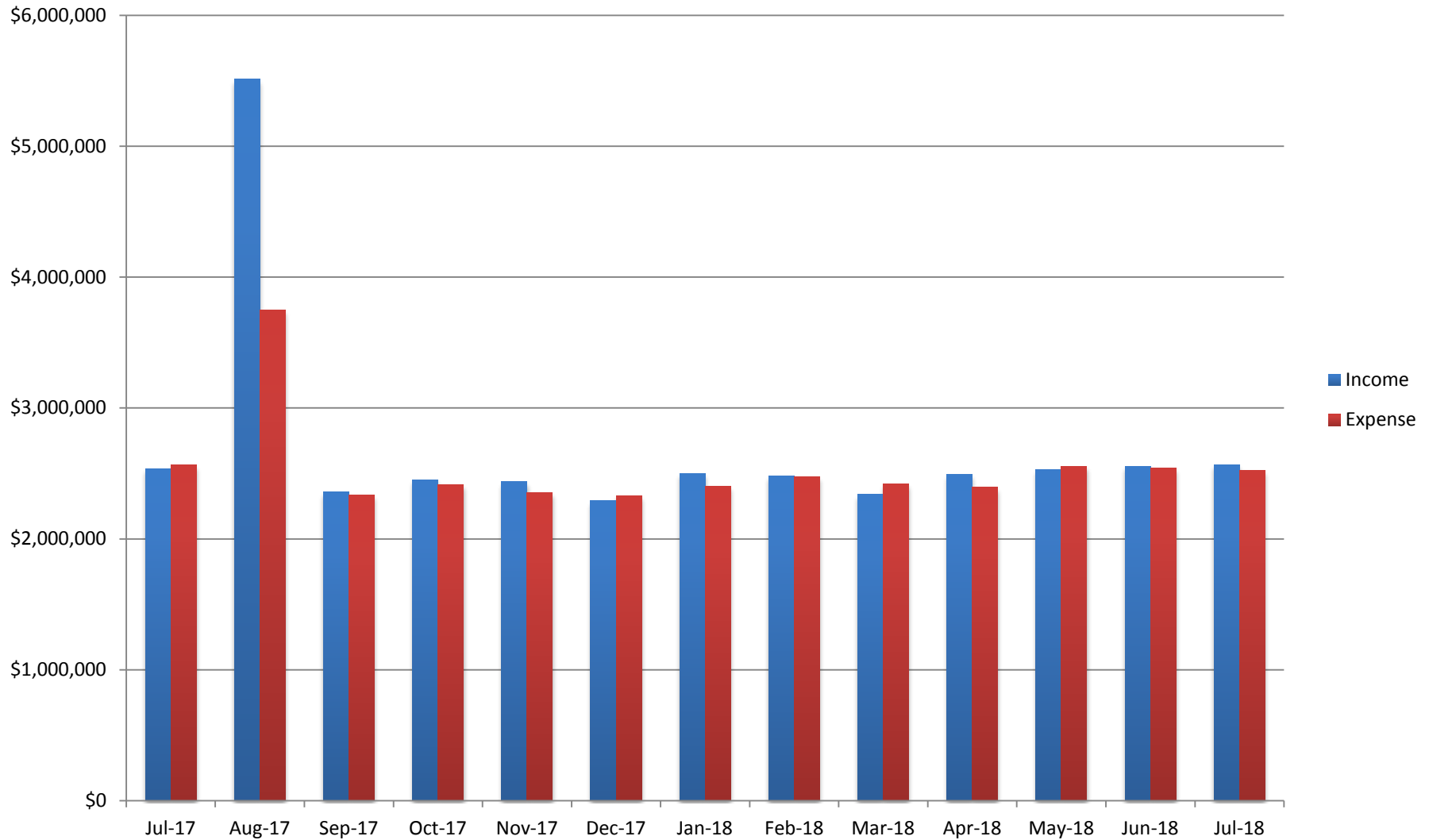
TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary by Service Type
Compared to Budget
Year To Date as of July 2018

	YTD Mental Health July 2018	YTD IDD July 2018	YTD Other Services July 2018	YTD Agency Total July 2018	YTD Approved Budget July 2018	Increase (Decrease)
INCOME:						
Local Revenue Sources	1,855,204	30,321	(762,580)	1,122,945	1,043,634	79,311
Earned Income	3,963,510	3,440,799	3,699,439	11,103,748	11,126,193	(22,445)
General Revenue-Contract	12,264,363	1,727,339	821,964	14,813,667	14,832,806	(19,139)
TOTAL INCOME	\$ 18,083,077	\$ 5,198,459	\$ 3,758,823	\$ 27,040,360	\$ 27,002,633	\$ 37,727
EXPENSES:						
Salaries	10,363,639	2,728,504	2,448,130	15,540,274	15,697,349	(157,075)
Employee Benefits	2,011,181	587,526	465,755	3,064,462	3,061,374	3,088
Medication Expense	511,483	-	105,712	617,195	612,026	5,169
Travel-Board/Staff	222,434	117,369	67,166	406,968	413,412	(6,444)
Building Rent/Maintenance	175,794	31,520	25,284	232,598	246,304	(13,706)
Consultants/Contracts	2,438,969	960,805	238,845	3,638,617	3,677,035	(38,418)
Other Operating Expenses	1,363,174	504,856	304,022	2,172,052	2,233,357	(61,305)
TOTAL EXPENSES	\$ 17,086,674	\$ 4,930,580	\$ 3,654,914	\$ 25,672,166	\$ 25,940,857	\$ (268,691)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 996,403	\$ 267,879	\$ 103,909	\$ 1,368,194	\$ 1,061,776	\$ 306,418
CAPITAL EXPENDITURES						
Capital Outlay-FF&E, Automobiles	152,309	52,212	21,591	226,112	284,560	(58,448)
Capital Outlay-Debt Service	567,486	160,929	122,827	851,241	842,292	8,949
TOTAL CAPITAL EXPENDITURES	\$ 719,795	\$ 213,141	\$ 144,418	\$ 1,077,353	\$ 1,126,852	\$ (49,499)
GRAND TOTAL EXPENDITURES	\$ 17,806,469	\$ 5,143,721	\$ 3,799,332	\$ 26,749,519	\$ 27,067,709	\$ (318,190)
Excess (Deficiency) of Revenues and Expenses	\$ 276,608	\$ 54,738	\$ (40,509)	\$ 290,840	\$ (65,076)	\$ 355,917
Debt Service and Fixed Asset Fund:						
Debt Service	567,486	160,929	122,827	851,241	842,292	(274,806)
		-	-	-	-	-
Excess(Deficiency) of revenues over Expenses	567,486	160,929	122,827	851,241	842,292	(274,806)

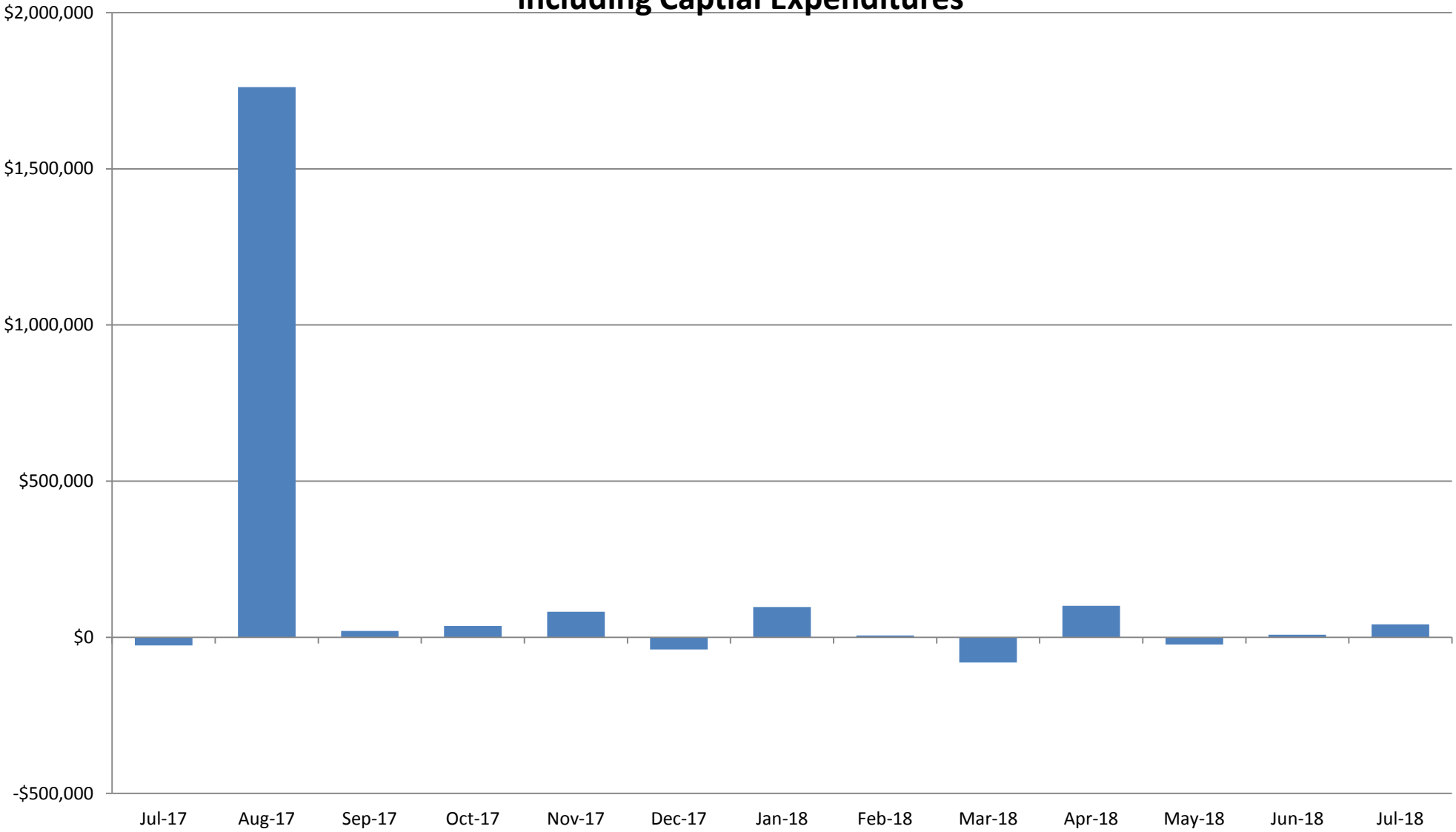
TRI-COUNTY BEHAVIORAL HEALTHCARE

Income and Expense

including Capital Expenditures



TRI-COUNTY BEHAVIORAL HEALTHCARE
Income after Expense
including Captial Expenditures



Agenda Item: Approve FY 2018 Year End Budget Revision Committee: Business	Board Meeting Date September 27, 2018
Background Information: None	
Supporting Documentation: Summary FY 2018 Year End Budget Revision	
Recommended Action: Approve FY 2018 Year End Budget Revision	

**Tri-County Behavioral Healthcare
Proposed FY 2018 Year End Budget Compared to
Current FY 2018 Approved Budget**

Explanation of line items that have material changes from Proposed FY 2018 Year End Budget Revision compared to the Current FY 2018 Approved Budget.

REVENUES:

Local Revenue – This line item shows an overall decrease mainly due to the late start-up of the East Montgomery Cty Crisis center. This line has the local match from MC Public Health which has their fiscal year end on September 30th. As a result, some of these funds will be received in FY 2019.

Earned Income – This line item shows an overall decrease also due to the late start-up of the East Montgomery Cty Crisis center. This line has the HHSC portion of the funding. This line also shows decreases in cost reimbursement programs such as PATH, OCR and SA Prevention. There are also a couple areas that revenue has increased. MH Case Management, HCS, and Rehab were slightly higher than the mid-year budget revision.

General Revenue – This line item reflects a decrease mainly based on the Substance Abuse contracts and not being able to bill for the DSHS services. We also had unspent funds in the Veteran and Supportive Housing lines.

EXPENSES:

Salaries – This line shows a slight decrease based on actual wages through the end of August.

Employee Benefits – This line shows a slight decrease based on the fringe for vacant positions through the year. We also have forfeited retirement funds from staff that terminated prior to becoming 100% vested.

Travel – Board/Staff – This line shows a slight decrease based on actual travel through the end of August.

Medication Expense – This line ended lower than anticipated after the first 6 month revision was completed.

Building Rent/Maintenance – This line item also shows a slight decrease based on estimates through the mid-year budget revision projections.

Consultants/Contracts – This line item has a combination of accounts that came in higher and lower but overall had a decrease. Contracts that came in higher were the Child Hospital contract line and HCS Foster Care contracts. The contracts that came in lower were for Respite Care and Non-Clinical contracts.

Other Operating Expenses – This line has a decrease based on the delay of the East Mtg. County Crisis Center opening. We also have been able to negotiate better rates on some supplies like hazardous waste products and labs. We should also see a reduction on some spending due to building consolidation.

Capital Outlay-FF&E, Automobiles – This line item shows a slight increase due to building renovations on the East Mtg. County Crisis center and start up costs on year end expenses.

Capital Outlay - Debt Service – This line item shows a slight increase based on actual debt service payments on our current outstanding loans.

**TRI-COUNTY BEHAVIORAL HEALTHCARE
PROPOSED FY 2018 YEAR END BUDGET COMPARED TO
CURRENT FY 2018 APPROVED BUDGET**

	PROPOSED FY 2018 YEAR END BUDGET	CURRENT FY 2018 APPROVED BUDGET	Increase (Decrease)
INCOME:			
Local Revenue Sources	\$ 1,220,964	\$ 1,325,902	\$ (104,938)
Earned Income	\$ 12,497,534	\$ 12,727,073	\$ (229,539)
General Revenue	\$ 15,829,081	\$ 16,030,772	\$ (201,691)
TOTAL INCOME	\$ 29,547,579	\$ 30,083,747	\$ (536,168)
EXPENSES:			
Salaries	\$ 17,021,842	\$ 17,156,829	\$ (134,987)
Employee Benefits	\$ 3,251,076	\$ 3,267,859	\$ (16,783)
Travel-Board/Staff	\$ 452,928	\$ 454,928	\$ (2,000)
Medication Expense	\$ 665,167	\$ 705,167	\$ (40,000)
Building Rent/Maintenance	\$ 248,287	\$ 269,287	\$ (21,000)
Consultants/Contracts	\$ 3,941,726	\$ 4,181,876	\$ (240,150)
Other Operating Expenses	\$ 2,343,570	\$ 2,541,212	\$ (197,642)
TOTAL EXPENSES	\$ 27,924,596	\$ 28,577,158	\$ (652,562)
Excess (Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 1,622,983	\$ 1,506,589	\$ 116,394
CAPITAL EXPENDITURES			
Capital Outlay - FF&E, Automobiles	\$ 475,419	\$ 605,227	\$ (129,808)
Capital Outlay - Debt Services	\$ 946,362	\$ 901,362	\$ 45,000
TOTAL CAPITAL EXPENDITURES	\$ 1,421,781	\$ 1,506,589	\$ (84,808)
GRAND TOTAL EXPENDITURES	\$ 29,346,377	\$ 30,083,747	\$ (737,370)
Excess (Deficiency) of Revenues and Expenses	\$ 201,202	\$ -	\$ 201,202

Agenda Item: Approve Proposed FY 2019 Operating Budget Committee: Business	Board Meeting Date September 27, 2018
Background Information: None	
Supporting Documentation: Copy of Proposed FY 2019 Operating Budget with Narrative of Increases or Decreases of More than \$10,000	
Recommended Action: Approve Proposed FY 2019 Operating Budget	

**Tri-County Behavioral Healthcare
Proposed FY 2019 Beginning Budget Compared to
APPROVED FY 2018 Year End Budget**

Explanation of line items that have material changes from Proposed FY 2019 Beginning Budget compared to the Approved FY 2018 Year End Budget.

REVENUES:

Local Revenue – This line item shows an overall increase. The majority of this increase is caused by the Montgomery County Public Health match for HHSC SB 292 funds that will be used to operate the East Montgomery County Crisis Center.

Earned Income – This line item shows an overall increase. The HHSC SB 292 funds as well as projections for Rehab revenue are to increase with the addition of a treatment team in the Conroe clinic. This line also reflects a decrease of funds when the Hurricane Harvey program closes and changes in the funding for the 1115 Waiver program.

General Revenue – This line item shows a slight increase over the FY 2018 year end budget. This is mainly due to lapses in FY 2018 in the Veterans and Supportive Housing programs.

EXPENSES:

Salaries – This line item shows an increase to the salary lines due to additional positions being added for the new programs and the large number of vacant positions during FY 2018.

Employee Benefits – This line item shows an increase for the fringe associated with the above referenced beginning salary budget amount.

Travel – Board/Staff – This line shows a slight decrease based on the expected closing of the Hurricane Harvey program which had a significant amount of travel during FY 2018.

Medication Expense – This line shows a slight increase based on FY 2018 medication expense trends.

Building Rent/Maintenance – This line item shows a slight decrease based one-time expenses that occurred in FY 2018.

Consultants/Contracts – This line item shows an increase based on FY 2018 hospital admissions for children trending up over the past couple of years. This line also includes an expense increase in the use of peace officers at the new East Montgomery County Crisis Center.

Other Operating Expenses – This line item has an overall increase based on operational needs projected for the fiscal year. Increases can be seen in various lines such as Building Insurance. We also show increases in expenses to operate the additional HCS home that was started mid-year in FY 2018 and the cost to provide services at the 2nd Street location in Conroe.

Capital Outlay-FF&E, Automobiles – This item reflects the projected computer and technology purchases planned for FY 2019.

Capital Outlay - Debt Service – This item reflects an increase based on first full year of debt service payments for the Conroe facility.

**TRI-COUNTY BEHAVIORAL HEALTHCARE
PROPOSED FY 2019 BEGINNING BUDGET COMPARED TO
APPROVED 2018 YEAR END BUDGET**

	PROPOSED FY 2019 BEGINNING BUDGET	APPROVED FY 2018 YEAR END BUDGET	Increase (Decrease)
INCOME:			
Local Revenue Sources	\$ 1,572,622	\$ 1,220,964	\$ 351,658
Earned Income	\$ 13,122,502	\$ 12,497,534	\$ 624,968
General Revenue	\$ 15,870,474	\$ 15,829,081	\$ 41,393
TOTAL INCOME	\$ 30,565,598	\$ 29,547,579	\$ 1,018,019
EXPENSES:			
Salaries	\$ 17,664,093	\$ 17,021,842	\$ 642,251
Employee Benefits	\$ 3,547,425	\$ 3,251,076	\$ 296,349
Travel-Board/Staff	\$ 438,150	\$ 452,928	\$ (14,778)
Medication Expense	\$ 678,512	\$ 665,167	\$ 13,345
Building Rent/Maintenance	\$ 224,968	\$ 248,287	\$ (23,319)
Consultants/Contracts	\$ 4,099,716	\$ 3,941,726	\$ 157,990
Other Operating Expenses	\$ 2,541,138	\$ 2,343,570	\$ 197,568
TOTAL EXPENSES	\$ 29,194,002	\$ 27,924,596	\$ 1,269,406
Excess (Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 1,371,596	\$ 1,622,983	\$ (251,387)
CAPITAL EXPENDITURES			
Capital Outlay - FF&E, Automobiles	\$ 251,000	\$ 475,419	\$ (224,419)
Capital Outlay - Debt Services	\$ 1,120,596	\$ 946,362	\$ 174,234
TOTAL CAPITAL EXPENDITURES	\$ 1,371,596	\$ 1,421,781	\$ (50,185)
GRAND TOTAL EXPENDITURES	\$ 30,565,598	\$ 29,346,377	\$ 1,219,221
Excess (Deficiency) of Revenues and Expenses	\$ -	\$ 201,202	\$ (201,202)

<p>Agenda Item: Ratify Banking Services Contract with JPMorgan Chase Bank, N.A.</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>Tri-County Behavioral Healthcare has a Depository Contract with JPMorgan Chase Bank, N.A. from September 1, 2005 to August 31, 2018.</p> <p>Staff recommends that the Board ratify the extension of the contract with JPMorgan Chase Bank, N.A. for an additional 2 years to expire on August 31, 2020.</p>	
<p>Supporting Documentation:</p> <p>Letter to Extend Agreement with JPMorgan Chase Bank, N.A.</p>	
<p>Recommended Action:</p> <p>Ratify Banking Services Contract Extension with JPMorgan Chase Bank, N.A.</p>	



August 30, 2018

Nanette Gil
Portfolio Banker
JPMorgan Chase Bank, N.A.
221 W. 6th Street, 2nd Floor
Austin, TX 78701

RE: Depository Contract

Dear Ms. Gil:

Pursuant to the depository contract between Tri-County Behavioral Healthcare beginning September 1, 2005 and ending August 31, 2008 and the five additional two year extensions through August 31, 2018 for said contract, please be advised that Tri-County Behavioral Healthcare hereby wishes to extend the contract for an additional 2 year period ending August 31, 2020. All other contracts remain.

Please return a signed copy of this letter as representation of your agreement to extend.

Sincerely,

Evan Roberson
Executive Director

Printed Name
JPMorgan Chase Bank N.A.

Title

Signature
JPMorgan Chase Bank N.A.

Date

Agenda Item: Approve Fund Balance Transfer Committee: Business	Board Meeting Date: September 27, 2018
Background Information: <p>As a part of the audit preparation work, we are reviewing and reconciling all of our balance sheet accounts. During this process, we have evaluated our Board Policy on Retention of Fund Balance, Policy – E.24.5 and determined it is time to adjust fund balances.</p> <p>Staff is recommending the fund balance transfer from Unrestricted and Undesignated to the following Committed categories:</p> <ul style="list-style-type: none"> • With the construction of the Sgt. Ed Holcomb facility we had depleted the funds that were designated as committed for Facility Improvement and Acquisitions. We are recommending we move \$2,500,000 to this area for future facility improvement and acquisitions. • With the changes in the payment structure for the 1115 Waiver program, we are recommending that we move an additional \$500,000 to this area to be able to cover any delays in cash flow. <p>In total, staff is recommending a transfer of \$3,000,000 from Unrestricted and Undesignated to Committed Fund Equity accounts as stated above.</p>	
Supporting Documentation: Balance sheet – Fund Equity Section – Showing current as of 7/31/18 and Proposed changes.	
Recommended Action: Approve Fund Balance Transfer	


FUND EQUITY	Approved Fund Equity July 2018	Proposed Fund Equity
RESTRICTED		
Net Assets Reserved for Debt Service	(12,906,868)	(12,906,868)
Reserved for Debt Retirement	-	-
COMMITTED		
Net Assets-Property and Equipment	20,760,463	20,760,463
Reserved for Vehicles & Equipment Replacement	678,112	678,112
Reserved for Facility Improvement & Acquisitions	-	2,500,000
Reserved for Board Initiatives	1,500,000	1,500,000
Reserved for 1115 Waiver Programs	516,833	1,016,833
ASSIGNED		
Reserved for Workers' Compensation	274,409	274,409
Reserved for Current Year Budgeted Reserve	67,833	67,833
Reserved for Insurance Deductibles	100,000	100,000
Reserved for Accrued Paid Time Off	(642,552)	(642,552)
UNASSIGNED		
Unrestricted and Undesignated	5,917,008	2,917,008
TOTAL FUND BALANCE	\$ 16,265,238	\$ 16,265,238

Agenda Item: Approve FY 2019 Dues Commitment and Payment Schedule for the Texas Council	Board Meeting Date
Committee: Business	September 27, 2018
Background Information:	
The Texas Council Operating Budget for FY 2019 was approved at the Texas Council Board meeting on August 25, 2018.	
Total dues for FY 2019 were decreased by \$1,065 from \$38,345 to \$37,280. The Center pays this fee in quarterly installments. With the Credit for Texas Council Risk Management Fund Members, this will result in a \$248.75 savings per quarter compared to FY 2018.	
Supporting Documentation:	
Cover Memorandum from Danette Castle, CEO	
FY 2019 Dues Commitment and Payment Schedule	
Recommended Action:	
Approve FY 2019 Dues Commitment and Payment Schedule for the Texas Council	



MEMO
September 6, 2018

TO: Evan Roberson
Executive Director, Tri-County Behavioral Healthcare

FROM: Danette Castle 
Chief Executive Officer

SUBJECT: FY 2019 Commitment of Dues for
Texas Council of Community Centers

Please find attached the FY 2019 (September 1, 2018 – August 31, 2019) Commitment of Dues Payment Form. This form establishes the basis for payment of your dues. Please note on the form that you can choose a payment schedule that meets your needs.

The dues assessment reflects the budget as approved at the August 25, 2018 meeting of the Texas Council Board of Directors. To assist with local discussions with your Board of Trustees, we include the following information:

- Budget Overview
- FY 2019 Budget (with side-by-side comparison to FY 2018)
- FY 2019 Dues Comparison to FY 2018 Dues
- FY 2019 Commitment of Dues Payment Form

If you have any questions, please contact Mike Horne at mhorne@txcouncil.com or call the Texas Council office at 512.794.9268.

Enclosure

cc: Sharon Walker, Texas Council Board Delegate

FY 2019 Commitment of Dues Payment for Texas Council of Community Centers

CENTER: Tri-County Behavioral Health

The dues for FY 2019 have been calculated as follows:

Total Dues ... \$37,280.00

**LESS: Credit for Texas Council Risk
Management Fund Members...(\$2,273.00)**

Net Dues ... \$35,007.00

The dues payment may be paid in one payment or in monthly or quarterly installments. Please identify the dues payment methodology you plan to use:

	<u>Monthly</u>	<u>Quarterly</u>	<u>Lump Sum</u>
September 2018	_____	_____	\$ _____
October	_____		
November	_____		
December	_____	_____	
January 2019	_____		
February	_____		
March	_____	_____	
April	_____		
May	_____		
June	_____	_____	
July	_____		
August	_____		
TOTALS	\$ _____	\$ _____	\$ _____

Invoice for each payment required? _____ Yes _____ No

We appreciate your prompt and timely payment!

APPROVED:

Chairperson, Board of Trustees

Executive Director

Date: _____

<p>Agenda Item: Ratify HHSC (DSHS) Mental Health First Aid Contract No. HHS000183000001</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>Tri-County Behavioral Healthcare has contracted with the Health and Human Services Commission for the Mental Health First Aid (MHFA) program for many years. The MHFA program provides training to public school district employees, public school resource officers, and other organizations working with youth; as a preventative measure to assist in early identification of children at risk of social-emotional disorders. All trainings are taught by certified Youth Mental Health First Aid instructors.</p> <p>Tri-County has seven certified Mental Health First Aid instructors. Per HHSC's requirement - each trainer must provide a minimum of 3 trainings per year to school districts and other organizations and individuals linked to youth; within Tri-County's service area.</p> <p>The FY 2019 contract amount is \$12,000. We are required to certify one additional staff as an YMHFA trainer for FY 2019.</p> <p>For FY 2019 there are new requirements for financial and program reports.</p> <p>Staff received permission from the Board Chair to sign and return these contracts to HHSC prior to Board approval to prevent a delay in contract funding.</p>	
<p>Supporting Documentation:</p> <p>Contract Available for Review at the Board Meeting</p>	
<p>Recommended Action:</p> <p>Ratify HHSC (DSHS) Mental Health First Aid Contract no. HHS000183000001</p>	

<p>Agenda Item: Approve Health and Human Services Commission Contract No. 2017-049547-001B, YES Pre-Engagement Services</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>Youth Empowerment Services (YES) waiver provides comprehensive home and community-based mental health services to youth between the ages of three and 18, who have serious emotional disturbances. The goal of the YES waiver program is to reduce the number of children who are placed in an institution.</p> <p>Health and Human Services Commission issued the YES Pre-Engagement Services (YESPE) contract which reimburses Centers for enrollment services of children and youth that do not have Medicaid.</p> <p>There are no changes to the YESPE contract for FY 2019.</p> <p>Staff received permission from the Board Chair to sign and return these contracts to HHSC prior to Board approval to prevent a delay in contract funding.</p>	
<p>Supporting Documentation:</p> <p>Contract will be available for review at the Board meeting.</p>	
<p>Recommended Action:</p> <p>Approve Health and Human Services Commission Contract No. 2017-049547-001B, YES Pre-Engagement Services</p>	

<p>Agenda Item: Ratify HHSC Treatment Youth (TRY) Substance Abuse Services Contract #2016-048317-006, Amendment No.4</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>The HHSC Treatment Services-Youth (TRY) contract provides funds for Youth Substance Use Treatment. The contract is a renewal of the program for FY 2019 in the amount of \$28,218.</p> <p>Staff received permission from the Board Chair to sign and return these contracts to HHSC prior to Board approval to prevent a delay in contract funding.</p>	
<p>Supporting Documentation:</p> <p>Contract Available for Review at the Board Meeting</p>	
<p>Recommended Action:</p> <p>Ratify HHSC Treatment Youth (TRY) Substance Abuse Services Contract #2016-048317-006, Amendment No.4</p>	

<p>Agenda Item: Ratify HHSC Co-Occurring Mental Health (TCO) Substance Abuse Services Contract #2016-048317-005</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>The HHSC Co-Occurring Psychiatric and Substance Use Disorder (TCO) contract provides funds for Adult Substance Use Treatment. The contract is a renewal of the program for FY 2019 in the amount of \$23,840.</p> <p>Staff received permission from the Board Chair to sign and return these contracts to HHSC prior to Board approval to prevent a delay in contract funding.</p>	
<p>Supporting Documentation:</p> <p>Contract Available for Review at the Board Meeting</p>	
<p>Recommended Action:</p> <p>Ratify HHSC Co-Occurring Mental Health (TCO) Substance Abuse Services Contract #2016-048317-005</p>	

<p>Agenda Item: Ratify HHSC (DSHS) Treatment Adult Services (TRA) Contract #2016-048497-003, Amendment No. 4</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>The HHSC Treatment Services-Adult (TRA) contract provides funds for Adult Substance Use Treatment. The contract is a renewal of the program for FY 2019 in the amount of \$76,836.</p> <p>Staff received permission from the Board Chair to sign and return these contracts to HHSC prior to Board approval to prevent a delay in contract funding.</p>	
<p>Supporting Documentation:</p> <p>Contract Available for Review at the Board Meeting</p>	
<p>Recommended Action:</p> <p>Ratify HHSC (DSHS) Treatment Adult Services (TRA) Contract #2016-048497-003, Amendment No. 4</p>	

<p>Agenda Item: Ratify the FY 2019 HHSC IDD Performance Contract No. 529-18-0053-00001, Amendment No. 1</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</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 following revisions were made to the FY 18 base contract:</p> <ul style="list-style-type: none"> • Decrease in Permanency Planning funds in the amount of \$1,730; • Addition of Money Follows the Persons services from September through December 2018 for Enhanced Community Coordination; • Delete the PASRR Service Coordination Caseload annual report due September 12th; and, • Addition of required reports. <p>The total value of the contract for FY 2019 is \$2,266,583.</p> <p>Staff received permission from the Board Chair to sign and return these contracts to HHSC prior to Board approval to prevent a delay in contract funding.</p>	
<p>Supporting Documentation:</p> <p>Contract Available for Review at the Board Meeting</p>	
<p>Recommended Action:</p> <p>Ratify the FY 2019 HHSC IDD Performance Contract No. 529-18-0053-00001, Amendment No. 1</p>	

<p>Agenda Item: Ratify Health and Human Services Commission HCBS-AMH Pre-Engagement Contract No. 529-17-0144-00037A</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>Home and Community Based Services-Adult Mental Health (HCBS-AMH) is a state-wide program that provides home and community-based services to adults with serious mental illness. The HCBS-AMH program provides an array of services, appropriate to each individual's needs, to enable him or her to live and experience successful tenure in their chosen community. Services are designed to support long term recovery from mental illness.</p> <p>This contract pays up to \$6,118 for Pre-Engagement (intake and enrollment) services for persons that may be qualified for the program. To qualify for the program, consumers must be 18 or older and meet one of the following criteria:</p> <ul style="list-style-type: none"> • Reside three or more years in an inpatient psychiatric hospital; • Have two or more psychiatric crises, four or more arrests and have active Medicaid; or • Have two or more psychiatric crises, 15 or more total ED visits and have active Medicaid. <p>There is one available provider for HCBS-AMH in the Houston area (Cinco Ranch Behavioral Health in Katy, Texas) and Tri-County may be called upon to enroll someone into the program.</p> <p>Staff received permission from the Board Chair to sign and return these contracts to HHSC prior to Board approval to prevent a delay in contract funding.</p>	
<p>Supporting Documentation:</p> <p>Contract will be available for review at the Board meeting.</p>	
<p>Recommended Action:</p> <p>Ratify Health and Human Services Commission HCBS-AMH Pre-Engagement Contract No. 529-17-0144-00037A</p>	

<p>Agenda Item: Ratify Health and Human Services Commission Adult Mental Health PCN, Contract No. 529-17-0038-00035, Amendment No. 4</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>The Health and Human Services Performance Contract Notebook (PCN) is the contract for all mental health outpatient services and also includes the following programs:</p> <ul style="list-style-type: none"> • Outpatient Competency Restoration; • Psychiatric Emergency Service Centers (CSU); • Private Psychiatric Bedday funding; • Mental Health Supported Housing; and, • Veterans Services. <p>The contract did not have any changes in funding, terms or conditions.</p> <p>Staff received permission from the Board Chair to sign and return these contracts to HHSC prior to Board approval to prevent a delay in contract funding.</p>	
<p>Supporting Documentation:</p> <p>Contract will be available for review at the Board meeting.</p>	
<p>Recommended Action:</p> <p>Ratify Health and Human Services Commission Adult Mental Health PCN, Contract No. 529-17-0038-00035, Amendment No. 4</p>	

<p>Agenda Item: Ratify the Health and Human Services Commission Contract No. 2016-049249-001B, YES Provider</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>The Youth Empowerment Services waiver is a 1915(c) Medicaid program that helps children and youth with serious mental, emotional and behavioral difficulties. The YES waiver provides intensive services delivered within a strengths-based team planning process called wraparound. Wraparound builds on family and community support and utilizes YES services to help build your family's natural support network and connection with your community. YES services are family-centered, coordinated and effective at preventing out-of-home placement and promoting lifelong independence and self-defined success.</p> <p>This contract revision is technically a reduction in value of the contract by \$668,000 because Centers are now paid using a fee-for-service methodology and now bill either Medicaid or Medicaid Managed Care for service provision. There is no change to operations with this contract revision.</p> <p>Staff received permission from the Board Chair to sign and return these contracts to HHSC prior to Board approval to prevent a delay in contract funding.</p>	
<p>Supporting Documentation:</p> <p>Contract will be available for review at the Board meeting.</p>	
<p>Recommended Action:</p> <p>Ratify the Health and Human Services Commission Contract No. 2016-049249-001B, YES Provider</p>	

<p>Agenda Item: Ratify Health and Human Services Commission Contract No. HHS000127500001, Autism Services</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>The Center applied for this Autism Services contract with the Health and Human Services Commission over a year ago and has been waiting for it for arrive for the last six months. The contract arrived on August 30, 2018.</p> <p>The contract will allow the Center to provide Board Certified Behavior Analyst therapy for kids with autism and also to contract for these services in the community. Tri-County's program will be located on the second floor of the Sgt. Ed Holcomb building.</p> <p>Staff are still working through billing and reporting requirements for the contract, but all of the requirements seem feasible.</p> <p>By signing the contract before the end of FY 2018, the Center was able to reserve the funding for 2018 and 2019 for a total of \$609,882. HHSC does not expect that we will use all of this funding in FY 2019, but we do have budget authority beyond the FY 19 amount of \$304,941 if needed. The FY 2019 budget will be revisited mid-2019.</p> <p>We are required to serve 26 persons in FY 2019.</p> <p>Staff are looking forward to the opportunity to serve kids with autism and are excited about the potential impact on our community.</p> <p>Staff received permission from the Board Chair to sign and return these contracts to HHSC prior to Board approval to prevent a delay in contract funding.</p>	
<p>Supporting Documentation:</p> <p>Contract will be available for review at the Board meeting.</p>	
<p>Recommended Action:</p> <p>Ratify Health and Human Services Commission Contract No. HHS000127500001, Autism Services</p>	

Agenda Item: Ratify Health and Human Service Commission Contract No. 2016-048162.001, Amendment No. 3, PATH Committee: Business	Board Meeting Date September 27, 2018
Background Information: The 2016 Projects for Assistance in Transition from Homelessness (PATH) contract is being extended into FY 2019 as Amendment No. 3. The PATH program is our outreach program to homeless populations that live on the street. We have two staff that work with these individuals and try to identify persons who have severe and persistent mental illness and to engage them in treatment. There are no significant changes to terms and no changes to the value of the contract. Staff received permission from the Board Chair to sign and return these contracts to HHSC prior to Board approval to prevent a delay in contract funding.	
Supporting Documentation: Amendment will be available for review at the Board meeting.	
Recommended Action: Ratify Health and Human Service Commission Contract No. 2016-048162.001, Amendment No. 3, PATH	

<p>Agenda Item: Approve FY 2019 Bonds Janitorial Contract</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>The Board approved Bonds Janitorial Services to provide professional janitorial services in our Conroe facility for FY 2018. We have been happy with the quality of the service provided and would like to renew the contract for FY 2019.</p> <p>The total contract amount for FY 2019 is \$99,540, the same amount we paid in FY 2018.</p>	
<p>Supporting Documentation:</p> <p>Contract Available for Review at The Board Meeting</p>	
<p>Recommended Action:</p> <p>Approve the FY 2019 Bonds Janitorial Contract</p>	

<p>Agenda Item: Ratify FY 2019 Lifetime Homecare Services Contract</p> <p>Committee: Business</p>	<p>Board Meeting Date:</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>Health and Human Services Commission (HHSC) requires each Center to provide or contract out-of-home crisis respite services for persons with intellectual or developmental disabilities. Crisis respite is a short-term service provided in a 24-hour supervised environment for individuals demonstrating a crisis that cannot be stabilized in a less intensive setting. This service ultimately is to assist someone in maintaining community living in the least restrictive environment possible. Through funds allotted by HHSC, these crisis services are provided.</p> <p>The out-of-home crisis respite is required to be provided in a setting for which the state oversees. Lifetime Homecare Services is a Home and Community-based Services (HCS) provider that is willing to utilize space in their licensed homes for IDD crises.</p> <p>In FY 2018, Lifetime Homecare Services was responsive in working with our individual's in crisis. They offered the opportunity for skills training to providers and families on strategies which they found useful while working with the individual.</p> <p>Lifetime Homecare Services receives \$1,500 per month to ensure space is available in their homes along with trained staff. Once someone is in their crisis respite, they receive \$250 per day.</p> <p>Currently, there have been 13 individuals that have received IDD Crisis Respite. Of the 13, there were seven individuals who received services more than once.</p> <p>The contract with Lifetime Homecare Services is for \$100,000.</p> <p>We have signed this contract, with a 30 day out clause for the Center, so that we could utilize Lifetime Homecare Services in September.</p>	
<p>Supporting Documentation:</p> <p>Contract Available for Review at the Board Meeting</p>	
<p>Recommended Action:</p> <p>Ratify the FY 2019 Lifetime Homecare Services Contract for IDD Crisis Respite Services</p>	

Agenda Item: Ratify FY 2019 Contract for Dr. Jerri Sethna Committee: Business	Board Meeting Date September 27, 2018
Background Information: Tri-County Behavioral Healthcare has utilized Dr. Jerri Sethna, a psychiatrist affiliated with Kingwood Pines Hospital for many years. Dr. Sethna provides inpatient psychiatric care to youth and adult populations. Dr. Sethna is the primary contractor at Kingwood Pines Hospital that works with individuals that are funded through the Department of State Health Services (DSHS) for state hospital diversion. Dr. Sethna's contract maximum allowance for FY 2019 is \$75,000 for physician services. This figure is consistent with his utilization trends observed in FY 2018. Tri-County's standard Community-based Services Agreement was used to draft this contract. We have signed this contract, with a 30 day out clause for the Center, so that we could utilize Kingwood Pines Hospital in September.	
Supporting Documentation: Contract Available for Review at the Board Meeting	
Recommended Action: Ratify FY 2019 Contract for Dr. Jerri Sethna	

Agenda Item: Approve FY 2019 Aspire Hospital, LLC Committee: Business	Board Meeting Date September 27, 2018
Background Information: <p>Tri-County Behavioral Healthcare has contracted with Aspire Hospital, LLC for inpatient psychiatric services when programs at the Psychiatric Emergency Treatment Center (PETC) are at capacity or the individual's psychiatric and medical concerns demonstrate a need for a higher level of care. This includes persons in need of longer-term inpatient treatment than what is permitted at the PETC.</p> <p>Aspire Hospital, LLC is an inpatient psychiatric resource for Tri-County individuals with comorbid mental health and medical diagnoses. It is also a higher level of care option to utilize in excess of the state hospital diversion beds.</p> <p>The Aspire Hospital, LLC contract for FY 2019 inpatient hospital beds is \$100,000. Aspire Hospital, LLC provides inpatient psychiatric care for adult and geriatric populations.</p>	
Supporting Documentation: Contract Available for Review at the Board Meeting	
Recommended Action: Approve the FY 2019 Aspire Hospital, LLC Contract for Inpatient Psychiatric Services	

Agenda Item: Ratify FY 2019 Avail Solutions, Inc. Contract Committee: Business	Board Meeting Date September 27, 2018
Background Information: <p>Avail Solutions, Inc. has performed crisis hotline assessment services for many years for Tri-County Behavioral Healthcare. They are the major contract provider of crisis hotline services for community centers in Texas. They answer the crisis hotline 24 hours per day, seven days per week and have bilingual Spanish speaking staff available at all times. When a face-to-face crisis assessment is required, they contact our Center staff to conduct the assessment.</p> <p>The total contract amount for FY 2019 is \$66,000, the same amount that we paid in FY 2018.</p> <p>We have signed this contract, with a 30 day out clause for the Center, so that we could utilize Avail Solutions, Inc. in September.</p>	
Supporting Documentation: Contract Available for Review at the Board Meeting	
Recommended Action: Ratify FY 2019 Avail Solutions, Inc. Contract for Crisis Hotline Assessment Services	

<p>Agenda Item: Ratify FY 2019 Cypress Creek Inpatient Hospital Contract</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>Tri-County Behavioral Healthcare has primarily utilized Cypress Creek Hospital for inpatient psychiatric services when programs at the Psychiatric Emergency Treatment Center (PETC) are at capacity or the individual's acuity demonstrates a need for a higher level of care. This includes persons in need of longer-term inpatient treatment than what is permitted at the PETC.</p> <p>Similar to prior years, for FY 2019 Tri-County has executed a Statement of Work with the Health and Human Services Commission (HHSC) for five private psychiatric beds intended for state hospital diversion.</p> <p>The Cypress Creek contract for FY 2019 inpatient hospital beds is \$900,000. This figure is consistent with utilization trends observed in FY 2018. Cypress Creek hospital provides inpatient psychiatric care for adult and youth populations.</p> <p>We have signed this contract, with a 30 day out clause for the Center, so that we could utilize Cypress Creek Hospital in September.</p>	
<p>Supporting Documentation:</p> <p>Contract Available for Review at the Board Meeting</p>	
<p>Recommended Action:</p> <p>Ratify the FY 2019 Cypress Creek Hospital Contract for Inpatient Psychiatric Services</p>	

<p>Agenda Item: Ratify FY 2019 Kingwood Pines Inpatient Hospital Contract</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>Tri-County Behavioral Healthcare has utilized Kingwood Pines Hospital for inpatient psychiatric services when programs at the Psychiatric Emergency Treatment Center (PETC) are at capacity or the individual's acuity demonstrates a need for a higher level of care. This includes persons in need of longer-term inpatient treatment than what is permitted at the PETC.</p> <p>Similar to prior years, for FY 2019 Tri-County has executed a Statement of Work (SOW) with the Health and Human Services Commission (HHSC) for five private psychiatric beds intended for state hospital diversion.</p> <p>The Kingwood Pines contract for FY 2019 inpatient hospital beds is \$900,000. This figure is consistent with utilization trends observed in FY 2018. Kingwood Pines Hospital is unique in that it not only serves adults and youth but children under the age of 12. In the last year, hospital level of care need for children in Liberty, Montgomery, and Walker catchment areas has continued to increase.</p> <p>We have signed this contract, with a 30 day out clause for the Center, so that we could utilize Kingwood Pines Hospital in September.</p>	
<p>Supporting Documentation:</p> <p>Contract Available for Review at the Board Meeting</p>	
<p>Recommended Action:</p> <p>Ratify the FY 2019 Kingwood Pines Hospital Contract for Inpatient Psychiatric Services</p>	

<p>Agenda Item: Approve FY 2019 Baptist Hospitals of Southeast Texas Contract</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 27, 2018</p>
<p>Background Information:</p> <p>Baptist Hospital of Southeast Texas is a psychiatric hospital located in Beaumont that requested a contract as a part of our Local Planning Network Development process. They are interested in contracting with Tri-County for medically indigent persons that would be referred by us to them. We consistently have need for more beds than are available in our area.</p> <p>The Baptist Hospitals of Southeast Texas contract for FY 2019 inpatient hospital beds is capped at \$100,000.</p>	
<p>Supporting Documentation:</p> <p>Contract Available for Review at the Board Meeting</p>	
<p>Recommended Action:</p> <p>Approve the FY 2019 Baptist Hospitals of Southeast Texas Contract</p>	

Agenda Item: Approve FY 2019 Woodland Springs Contract Committee: Business	Board Meeting Date September 27, 2018
Background Information: Woodland Springs Hospital is a new psychiatric hospital located on FM 1488 in Conroe. They are interested in contracting with Tri-County for medically indigent persons that would be referred by us to them. We consistently have need for more beds than are available in our area. The Woodlands Springs contract for FY 2019 inpatient hospital beds is capped at \$100,000.	
Supporting Documentation: Contract Available for Review at the Board Meeting	
Recommended Action: Approve the FY 2019 Woodland Springs Contract	

Agenda Item: Decide on Next Steps to Resolve Building Issues at 233 Sgt. Ed Holcomb Blvd., South	Board Meeting Date: September 27, 2018
Committee: Business	
Background Information:	
<p>Several issues at the 233 Sgt. Ed Holcomb Blvd., South location have remained unresolved since before staff moved into the building. In January of 2018, staff provided official notice to Axiom Construction of several outstanding items which still needed to be resolved. This letter was copied to Board Chair Patti Atkins and Jackson Walker attorney Randy Farber.</p>	
<p>None of the items are life and safety issues, but most remain unresolved.</p>	
<p>The Board has requested that Evan Roberson and Mike Duncum provide a status update each month until the issues are resolved.</p>	
<p>Executive Session has been reserved for Board discussion regarding next steps if needed.</p>	
Supporting Documentation:	
<p>None</p>	
Recommended Action:	
Decide on Next Steps to Resolve Outstanding Sgt. Ed Holcomb Facility Issues	

Agenda Item: Review August 2018 Preliminary Financial Statements Committee: Business	Board Meeting Date September 27, 2018
Background Information: None	
Supporting Documentation: August 2018 Preliminary Financial Statements	
Recommended Action: For Information Only	

Preliminary August 2018 Financial Summary

Revenues for August 2018 were \$2,580,068 and operating expenses were \$2,181,625; resulting in a gain in operations of \$398,444. Capital Expenditures and Extraordinary Expenses for August were \$338,851; resulting in a gain of \$59,593. Total revenues were 76.82% of the monthly budgeted revenues and total expenses were 110.60% of the monthly budgeted expenses.

Year to date revenues are \$29,620,427 and operating expenses are \$27,853,791; leaving excess operating revenues of \$1,766,636. YTD Capital Expenditures and Extraordinary Expenses are \$1,416,204; resulting in a gain YTD of \$350,433. Total revenues are 100.25% of the YTD budgeted revenues and total expenses are 99.74% of the YTD budgeted expenses

REVENUES

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

Revenue Source	YTD Revenue	YTD Budget	% of Budget	\$ Variance
No items to report				

EXPENSES

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

Expense Source	YTD Expenses	YTD Budget	% of Budget	\$ Variance
No items to report				

TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended August 31, 2018
Preliminary

	TOTALS COMBINED FUNDS August 2018	TOTALS COMBINED FUNDS July 2018	Increase (Decrease)
ASSETS			
CURRENT ASSETS			
Imprest Cash Funds	3,710	3,160	550
Cash on Deposit-General Fund	7,263,759	9,458,981	(2,195,222)
Cash on Deposit-Debt Fund			-
Accounts Receivable	2,260,091	2,066,852	193,240
Inventory	4,262	4,362	(100)
TOTAL CURRENT ASSETS	9,531,821	11,533,354	(2,001,532)
FIXED ASSETS	20,760,463	20,760,463	-
OTHER ASSETS	129,774	133,576	(3,802)
TOTAL ASSETS	\$ 30,422,059	\$ 32,427,393	\$ (2,005,334)
LIABILITIES, DEFERRED REVENUE, FUND BALANCES			
CURRENT LIABILITIES	1,040,473	1,390,411	(349,938)
NOTES PAYABLE	642,552	642,552	-
DEFERRED REVENUE	(715,670)	931,486	(1,647,156)
LONG-TERM LIABILITIES FOR			
Line of Credit - Tradition Bank	-	-	-
Note Payable Prosperity Bank	-	-	-
First Financial loan tied to CD	710,417	733,333	(22,917)
First Financial Construction Loan	12,136,358	12,173,534	(37,177)
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR			
General Fund	350,433	290,840	59,593
FUND EQUITY			
RESTRICTED			
Net Assets Reserved for Debt Service	(12,846,774)	(12,906,868)	60,093
Reserved for Debt Retirement	-	-	-
COMMITTED			
Net Assets-Property and Equipment	20,760,463	20,760,463	-
Reserved for Vehicles & Equipment Replacement	678,112	678,112	-
Reserved for Facility Improvement & Acquisitions	-	-	-
Reserved for Board Initiatives	1,500,000	1,500,000	-
Reserved for 1115 Waiver Programs	516,833	516,833	-
ASSIGNED			
Reserved for Workers' Compensation	274,409	274,409	-
Reserved for Current Year Budgeted Reserve		67,833	(67,833)
Reserved for Insurance Deductibles	100,000	100,000	-
Reserved for Accrued Paid Time Off	(642,552)	(642,552)	-
UNASSIGNED			
Unrestricted and Undesignated	5,917,008	5,917,008	-
TOTAL LIABILITIES/FUND BALANCE	\$ 30,422,059	\$ 32,427,393	\$ (2,005,334)

TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended August 31, 2018
Preliminary

	General Operating Funds	Memorandum Only Final August 2017
ASSETS		
CURRENT ASSETS		
Imprest Cash Funds	3,710	3,854
Cash on Deposit-General Fund	7,263,759	5,383,227
Cash on Deposit-Debt Fund	-	-
Accounts Receivable	2,260,091	4,136,003
Inventory	4,262	4,986
TOTAL CURRENT ASSETS	9,531,821	9,528,070
FIXED ASSETS	20,760,463	20,760,463
OTHER ASSETS	129,774	205,342
	\$ 30,422,059	\$ 30,493,875
LIABILITIES, DEFERRED REVENUE, FUND BALANCES		
CURRENT LIABILITIES	1,040,473	1,169,877
NOTES PAYABLE	642,552	642,552
DEFERRED REVENUE	(715,670)	(422,827)
LONG-TERM LIABILITIES FOR		
Line of Credit - Tradition Bank	-	-
Note Payable Prosperity Bank	-	-
First Financial loan tied to CD	710,417	985,417
First Financial Construction Loan	12,136,358	12,399,793
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR		
General Fund	350,433	3,492,382
FUND EQUITY		
RESTRICTED		
Net Assets Reserved for Debt service-Restricted	(12,846,774)	(13,385,209)
Reserved for Debt Retirement	-	-
COMMITTED		
Net Assets-Property and Equipment-Committed	20,760,463	20,760,463
Reserved for Vehicles & Equipment Replacement	678,112	678,112
Reserved for Facility Improvement & Acquisitions	-	-
Reserved for Board Initiatives	1,500,000	1,500,000
Reserved for 1115 Waiver Programs	516,833	516,833
ASSIGNED		
Reserved for Workers' Compensation-Assigned	274,409	274,409
Reserved for Current Year Budgeted Reserve -Assigned	-	-
Reserved for Insurance Deductibles-Assigned	100,000	100,000
Reserved for Accrued Paid Time Off	(642,552)	(642,552)
UNASSIGNED		
Unrestricted and Undesignated	5,917,008	2,424,625
TOTAL LIABILITIES/FUND BALANCE	\$ 30,422,059	\$ 30,493,875

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
For the Month Ended August 2018
and Year To Date as of August 2018
Preliminary

INCOME:	MONTH OF August 2018	YTD August 2018
Local Revenue Sources	86,740	1,209,685
Earned Income	1,018,989	12,122,737
General Revenue-Contract	1,474,339	16,288,006
TOTAL INCOME	\$ 2,580,068	\$ 29,620,427
EXPENSES:		
Salaries	1,472,086	17,012,360
Employee Benefits	182,050	3,246,511
Medication Expense	42,436	659,631
Travel-Board/Staff	44,641	451,609
Building Rent/Maintenance	14,997	247,595
Consultants/Contracts	292,258	3,930,875
Other Operating Expenses	133,158	2,305,211
TOTAL EXPENSES	\$ 2,181,625	\$ 27,853,791
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 398,444	\$ 1,766,636
CAPITAL EXPENDITURES		
Capital Outlay-FF&E, Automobiles, Building	244,845	470,957
Capital Outlay-Debt Service	94,006	945,247
TOTAL CAPITAL EXPENDITURES	\$ 338,851	\$ 1,416,204
GRAND TOTAL EXPENDITURES	\$ 2,520,475	\$ 29,269,995
Excess (Deficiency) of Revenues and Expenses	\$ 59,593	\$ 350,433

Debt Service and Fixed Asset Fund:

Debt Service	94,006	945,247
Excess(Deficiency) of revenues over Expenses	94,006	945,247

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
Year to Date as of August 2018
Preliminary

	YTD August 2018	APPROVED BUDGET	Increase (Decrease)
INCOME:			
Local Revenue Sources	1,209,685	1,194,964	14,721
Earned Income	12,122,737	12,121,158	1,579
General Revenue-Contract	16,288,006	16,231,457	56,549
TOTAL INCOME	\$ 29,620,427	\$ 29,547,579	\$ 72,848
EXPENSES:			
Salaries	17,012,360	17,021,842	(9,482)
Employee Benefits	3,246,511	3,251,076	(4,565)
Medication Expense	659,631	665,167	(5,536)
Travel-Board/Staff	451,609	452,928	(1,319)
Building Rent/Maintenance	247,595	248,287	(692)
Consultants/Contracts	3,930,875	3,941,726	(10,851)
Other Operating Expenses	2,305,211	2,343,770	(38,559)
TOTAL EXPENSES	\$ 27,853,791	\$ 27,924,796	\$ (71,005)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 1,766,636	\$ 1,622,783	\$ 143,853
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	470,957	475,419	(4,462)
Capital Outlay-Debt Service	945,247	946,362	(1,115)
TOTAL CAPITAL EXPENDITURES	\$ 1,416,204	\$ 1,421,781	\$ (5,577)
GRAND TOTAL EXPENDITURES	\$ 29,269,995	\$ 29,346,577	\$ (76,582)
Excess (Deficiency) of Revenues and Expenses	\$ 350,433	\$ 201,002	\$ 149,431

Debt Service and Fixed Asset Fund:

Debt Service	945,247	946,362	(1,115)
Excess(Deficiency) of revenues over Expenses	945,247	946,362	(1,115)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
For the Month Ended August 2018
Preliminary

INCOME:	MONTH OF August 2018	APPROVED BUDGET	Increase (Decrease)
Local Revenue Sources	86,740	151,330	(64,590)
Earned Income	1,018,989	994,965	24,024
General Revenue-Contract	1,474,339	2,212,456	(738,117)
TOTAL INCOME	\$ 2,580,068	\$ 3,358,751	\$ (778,683)
EXPENSES:			
Salaries	1,472,086	1,324,493	147,593
Employee Benefits	182,050	189,702	(7,652)
Medication Expense	42,436	53,141	(10,705)
Travel-Board/Staff	44,641	39,516	5,125
Building Rent/Maintenance	14,997	1,983	13,014
Consultants/Contracts	292,258	264,691	27,567
Other Operating Expenses	133,158	110,413	22,745
TOTAL EXPENSES	\$ 2,181,625	\$ 1,983,939	\$ 197,686
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 398,444	\$ 1,374,812	\$ (976,368)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	244,845	190,859	53,986
Capital Outlay-Debt Service	94,006	104,070	(10,064)
TOTAL CAPITAL EXPENDITURES	\$ 338,851	\$ 294,929	\$ 43,922
GRAND TOTAL EXPENDITURES	\$ 2,520,475	\$ 2,278,868	\$ 241,607
Excess (Deficiency) of Revenues and Expenses	\$ 59,593	\$ 1,079,883	\$ (1,020,290)

Debt Service and Fixed Asset Fund:

Debt Service	94,006	104,070	(10,064)
Excess(Deficiency) of revenues over Expenses	94,006	104,070	(10,064)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With August 2017 Comparative Data
Year to Date as of August 2018
Preliminary

INCOME:	YTD August 2018	YTD August 2017	Increase (Decrease)
Local Revenue Sources	1,209,685	6,973,505	(5,763,820)
Earned Income	12,122,737	14,648,683	(2,525,946)
General Revenue-Contract	16,288,006	15,102,665	1,185,341
TOTAL INCOME	\$ 29,620,427	\$ 36,724,853	\$ (7,104,426)
EXPENSES:			
Salaries	17,012,360	16,714,872	297,488
Employee Benefits	3,246,511	3,170,546	75,965
Medication Expense	659,631	663,566	(3,935)
Travel-Board/Staff	451,609	459,921	(8,312)
Building Rent/Maintenance	247,595	427,661	(180,066)
Consultants/Contracts	3,930,875	6,511,181	(2,580,306)
Other Operating Expenses	2,305,211	2,633,362	(328,151)
TOTAL EXPENSES	\$ 27,853,791	\$ 30,581,109	\$ (2,727,318)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 1,766,636	\$ 6,143,744	\$ (4,377,108)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	470,957	1,013,478	(542,521)
Capital Outlay-Debt Service	945,247	1,477,487	(532,240)
TOTAL CAPITAL EXPENDITURES	\$ 1,416,204	\$ 2,490,965	\$ (1,074,761)
GRAND TOTAL EXPENDITURES	\$ 29,269,995	\$ 33,072,074	\$ (3,802,079)
Excess (Deficiency) of Revenues and Expenses	\$ 350,433	\$ 3,652,779	\$ (3,302,346)

Debt Service and Fixed Asset Fund:

Debt Service	945,247	1,477,487	(532,240)
Excess(Deficiency) of revenues over Expenses	945,247	1,477,487	(532,240)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With August 2017 Comparative Data
For the Month Ended August 2018
Preliminary

INCOME:	MONTH OF August 2018	MONTH OF August 2017	Increase (Decrease)
Local Revenue Sources	86,740	3,112,057	(3,025,317)
Earned Income	1,018,989	1,257,342	(238,353)
General Revenue-Contract	1,474,339	1,141,546	332,793
TOTAL INCOME	\$ 2,580,068	\$ 5,510,945	\$ (2,930,877)
Salaries	1,472,086	1,606,324	(134,238)
Employee Benefits	182,050	264,505	(82,455)
Medication Expense	42,436	51,053	(8,617)
Travel-Board/Staff	44,641	35,317	9,324
Building Rent/Maintenance	14,997	22,726	(7,729)
Consultants/Contracts	292,258	759,510	(467,252)
Other Operating Expenses	133,158	218,081	(84,923)
TOTAL EXPENSES	\$ 2,181,625	\$ 2,957,516	\$ (775,891)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 398,444	\$ 2,553,429	\$ (2,154,985)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	244,845	63,464	181,381
Capital Outlay-Debt Service	94,006	727,898	(633,892)
TOTAL CAPITAL EXPENDITURES	\$ 338,851	\$ 791,362	\$ (452,511)
GRAND TOTAL EXPENDITURES	\$ 2,520,475	\$ 3,748,878	\$ (1,228,403)
Excess (Deficiency) of Revenues and Expenses	\$ 59,593	\$ 1,762,067	\$ (1,702,474)

Debt Service and Fixed Asset Fund:

Debt Service	94,006	727,898	(633,892)
			-
Excess(Deficiency) of revenues over Expenses	94,006	727,898	(633,892)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With July 2018 Comparative Data
For the Month Ended August 2018
Preliminary

INCOME:	MONTH OF August 2018	MONTH OF July 2018	Increase (Decrease)
Local Revenue Sources	86,740	99,115	(12,375)
Earned Income	1,018,989	952,612	66,378
General Revenue-Contract	1,474,339	1,512,892	(38,553)
TOTAL INCOME	\$ 2,580,068	\$ 2,564,619	\$ 15,450
EXPENSES:			
Salaries	1,472,086	1,369,509	102,577
Employee Benefits	182,050	267,453	(85,403)
Medication Expense	42,436	57,251	(14,815)
Travel-Board/Staff	44,641	36,355	8,285
Building Rent/Maintenance	14,997	3,503	11,493
Consultants/Contracts	292,258	467,393	(175,136)
Other Operating Expenses	133,158	216,978	(83,819)
TOTAL EXPENSES	\$ 2,181,625	\$ 2,418,442	\$ (236,817)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 398,444	\$ 146,177	\$ 252,267
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	244,845	11,033	233,811
Capital Outlay-Debt Service	94,006	93,996	10
TOTAL CAPITAL EXPENDITURES	\$ 338,851	\$ 105,029	\$ 233,821
GRAND TOTAL EXPENDITURES	\$ 2,520,475	\$ 2,523,471	\$ (2,996)
Excess (Deficiency) of Revenues and Expenses	\$ 59,593	\$ 41,148	\$ 18,446

Debt Service and Fixed Asset Fund:

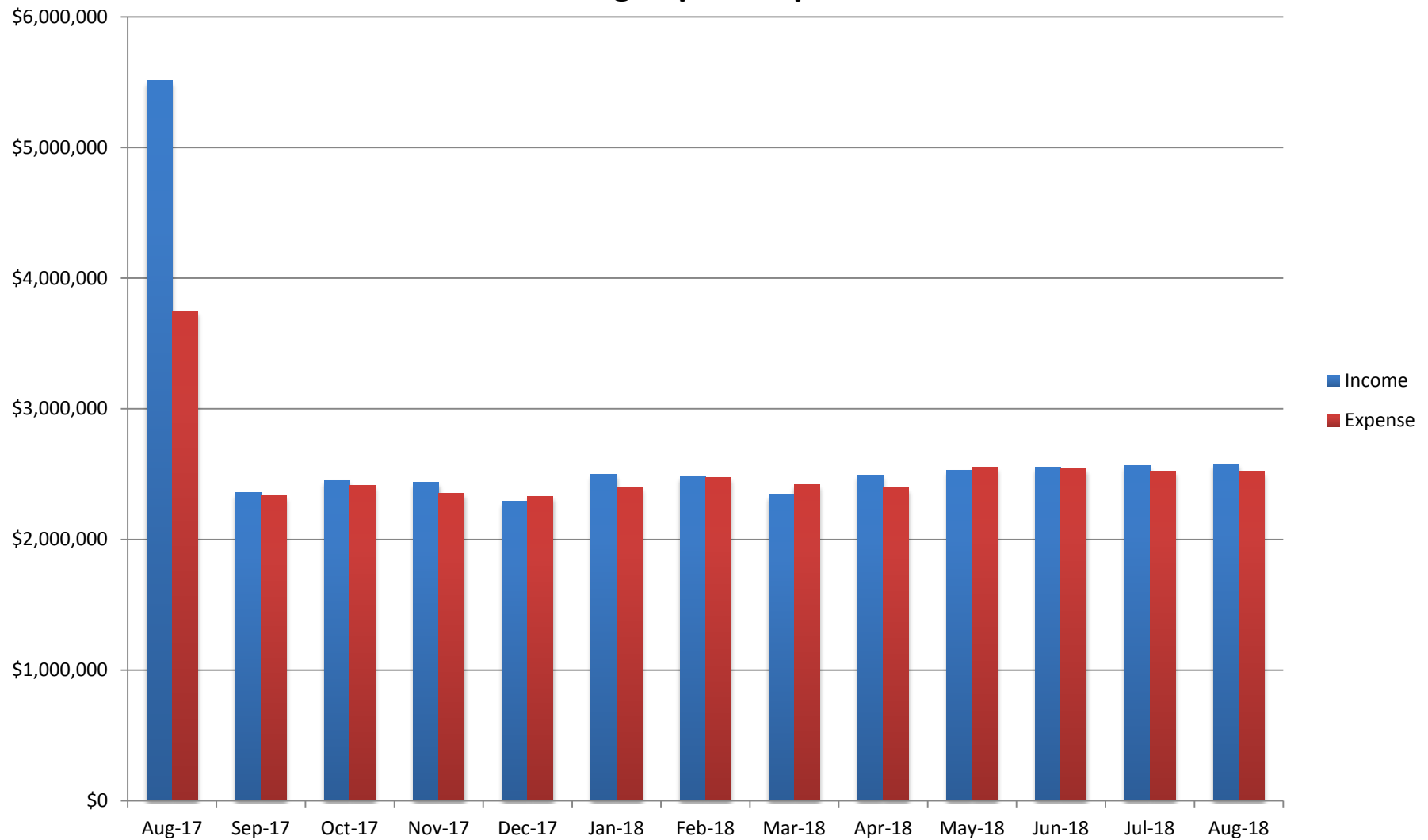
Debt Service	94,006	93,996	10
Excess(Deficiency) of revenues over Expenses	94,006	93,996	10

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary by Service Type
Compared to Budget
Year To Date as of August 2018
Preliminary

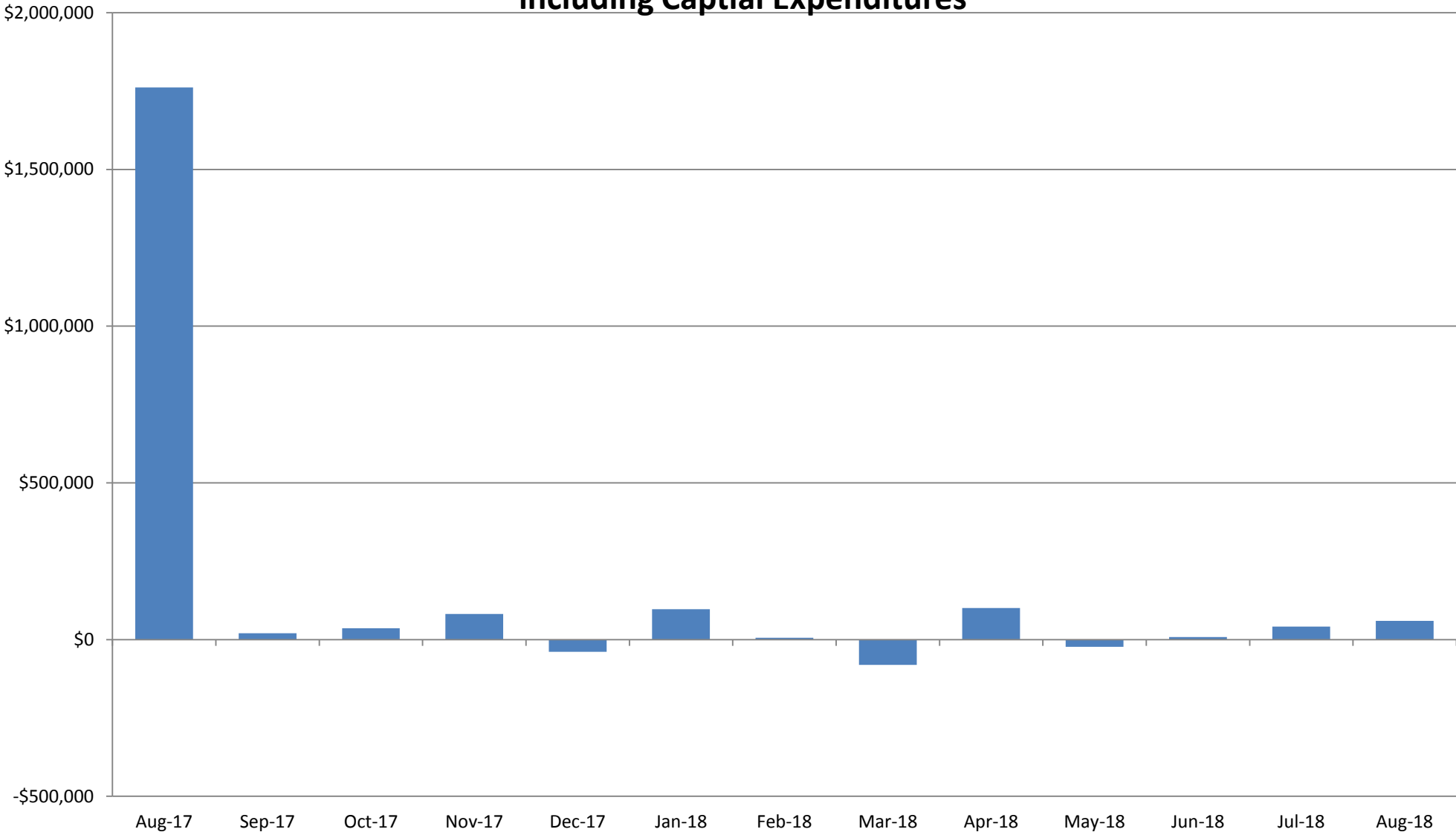
	YTD Mental Health August 2018	YTD IDD August 2018	YTD Other Services August 2018	YTD Agency Total August 2018	YTD Approved Budget August 2018	Increase (Decrease)
INCOME:						
Local Revenue Sources	2,011,761	16,965	(819,041)	1,209,685	1,194,964	14,721
Earned Income	4,362,703	3,757,030	4,003,004	12,122,737	12,121,158	1,579
General Revenue-Contract	13,402,347	1,971,659	913,999	16,288,006	16,231,457	56,549
TOTAL INCOME	\$ 19,776,811	\$ 5,745,654	\$ 4,097,962	\$ 29,620,428	\$ 29,547,579	\$ 72,849
EXPENSES:						
Salaries	11,340,132	2,988,127	2,684,100	17,012,360	17,021,842	(9,482)
Employee Benefits	2,127,611	622,544	496,357	3,246,511	3,251,076	(4,565)
Medication Expense	544,003		115,627	659,631	665,167	(5,536)
Travel-Board/Staff	243,759	132,557	75,293	451,609	452,928	(1,319)
Building Rent/Maintenance	185,920	34,394	27,280	247,595	248,287	(692)
Consultants/Contracts	2,623,837	1,053,149	253,891	3,930,875	3,941,726	(10,851)
Other Operating Expenses	1,414,277	548,191	342,743	2,305,211	2,343,770	(38,559)
TOTAL EXPENSES	\$ 18,479,539	\$ 5,378,962	\$ 3,995,291	\$ 27,853,792	\$ 27,924,796	\$ (71,004)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 1,297,272	\$ 366,692	\$ 102,671	\$ 1,766,636	\$ 1,622,783	\$ 143,853
CAPITAL EXPENDITURES						
Capital Outlay-FF&E, Automobiles	325,348	93,793	51,815	470,956	475,419	(4,463)
Capital Outlay-Debt Service	629,995	178,655	136,597	945,247	946,362	(1,115)
TOTAL CAPITAL EXPENDITURES	\$ 955,343	\$ 272,448	\$ 188,412	\$ 1,416,203	\$ 1,421,781	\$ (5,578)
GRAND TOTAL EXPENDITURES	\$ 19,434,882	\$ 5,651,410	\$ 4,183,703	\$ 29,269,995	\$ 29,346,577	\$ (76,582)
Excess (Deficiency) of Revenues and Expenses	\$ 341,929	\$ 94,244	\$ (85,741)	\$ 350,433	\$ 201,002	\$ 149,431
Debt Service and Fixed Asset Fund:						
Debt Service	629,995	178,655	136,597	945,247	946,362	(316,367)
		-	-	-	-	-
Excess(Deficiency) of revenues over Expenses	629,995	178,655	136,597	945,247	946,362	(316,367)

TRI-COUNTY BEHAVIORAL HEALTHCARE

Preliminary Income and Expense including Capital Expenditures



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



Agenda Item: 4 th Quarter FY 2018 Quarterly Investment Report Committee: Business	Board Meeting Date September 27, 2018
Background Information: This report is provided to the Board of Trustees of Tri-County Behavioral Healthcare in accordance with Board Policy on fiscal management and in compliance with Chapter 2256: Subchapter A of the Public Funds Investment Act.	
Supporting Documentation: Quarterly TexPool Investment Report Quarterly Interest Report	
Recommended Action: For Information Only	

QUARTERLY INVESTMENT REPORT TEXPOOL FUNDS

For the Period Ending August 31, 2018

GENERAL INFORMATION

This report is provided to the Board of Trustees of Tri-County Behavioral Healthcare in accordance with Board Policy on fiscal management and in compliance with Chapter 2256; Subchapter A of the Public Funds Investment Act.

Center funds for the period have been partially invested in the Texas Local Government Investment Pool (TexPool), organized in conformity with the Interlocal Cooperation Act, Chapter 791 of the Texas Government Code, and the Public Funds Investment Act, Chapter 2256 of the Texas Government Code. The Comptroller of Public Accounts is the sole officer, director, and shareholder of the Texas Treasury Safekeeping Trust Company which is authorized to operate TexPool. Pursuant to the TexPool Participation Agreement, administrative and investment services to TexPool are provided by Federated Investors, Inc. ("Federated"). The Comptroller maintains oversight of the services provided. In addition, the TexPool Advisory Board, composed equally of participants in TexPool and other persons who do not have a business relationship with TexPool, advise on investment policy and approves fee increases.

TexPool investment policy restricts investment of the portfolio to the following types of investments:

- Obligations of the United States Government or its agencies and instrumentalities with a maximum final maturity of 397 days for fixed rate securities and 24 months for variable rate notes;

- Fully collateralized repurchase agreements and reverse repurchase agreements with defined termination dates may not exceed 90 days unless the repurchase agreements have a provision that enables TexPool to liquidate the position at par with no more than seven days notice to the counterparty. The maximum maturity on repurchase agreements may not exceed 181 days. These agreements may be placed only with primary government securities dealers or a financial institution doing business in the State of Texas.

- No-load money market mutual funds are registered and regulated by the Securities and Exchange Commission and rated AAA or equivalent by at least one nationally recognized rating service. The money market mutual fund must maintain a dollar weighted average stated maturity of 90 days or less and include in its investment objectives the maintenance of a stable net asset value of \$1.00.

TexPool is governed by the following specific portfolio diversification limitations;

- 100% of the portfolio may be invested in obligations of the United States.

- 100% of the portfolio may be invested in direct repurchase agreements for liquidity purposes.

- Reverse repurchase agreements will be used primarily to enhance portfolio return within a limitation of up to one-third (1/3) of total portfolio assets.

- No more than 15% of the portfolio may be invested in approved money market mutual funds.

The weighted average maturity of TexPool cannot exceed 60 days calculated using the reset date for variable rate notes and 90 days calculated using the final maturity date for variable rate notes.

The maximum maturity for any individual security in the portfolio is limited to 397 days for fixed rate securities and 24 months for variable rate notes.

TexPool seeks to maintain a net asset value of \$1.00 and is designed to be used for investment of funds which may be needed at any time.

STATISTICAL INFORMATION

Market Value for the Period

Portfolio Summary	June	July	August
Uninvested Balance	502,384.54	(113,693.26)	20,052.85
Accrual of Interest Income	10,187,786.00	8,857,669.10	9,417,647.76
Interest and Management Fees Payable	(27,562,047.26)	(28,972,587.70)	(29,076,141.21)
Payable for Investments Purchased	(78,500,000.00)	(1,070,548,472.20)	(138,772,500.00)
Accrued Expense & Taxes	(44,418.20)	(20,767.55)	(20,509.82)
Repurchase Agreements	5,671,101,000.00	5,995,031,000.00	4,725,254,000.00
Mutual Fund Investments	776,022,103.88	1,296,022,103.88	867,113,103.88
Government Securities	10,789,978,701.20	10,491,655,384.68	10,034,230,905.43
U.S. Treasury Bills	727,197,501.77	1,153,922,910.86	1,521,559,232.40
U.S. Treasury Notes	249,708,672.00	249,851,778.00	0.00
TOTAL	18,198,577,398.33	18,175,684,277.81	17,069,737,477.69

Book Value for the Period

Type of Asset	Beginning Balance	Ending Balance
Uninvested Balance	(500,056.66)	20,052.85
Accrual of Interest Income	8,331,711.98	9,417,647.76
Interest and Management Fees Payable	(27,779,178.60)	(29,076,141.21)
Payable for Investments Purchased	(100,000,000.00)	(138,772,500.00)
Accrued Expenses & Taxes	(23,326.83)	(20,509.82)
Repurchase Agreements	6,497,011,000.00	4,725,254,000.00
Mutual Fund Investments	776,022,103.88	867,113,103.88
Government Securities	10,936,890,820.07	10,034,170,063.25
U.S. Treasury Bills	725,927,688.84	1,521,357,394.17
U.S. Treasury Notes	249,792,503.75	0.00
TOTAL	\$19,065,860,478.43	\$17,069,457,092.99

Portfolio by Maturity as of August 31, 2018

1 to 7 days	8 to 90 day	91 to 180 days	181 + days
41.0%	51.4%	7.5%	0.1%

Portfolio by Type of Investments as of August 31, 2018

Agencies	Repurchase Agreements	Treasuries	Money Market Funds
58.3%	27.4%	9.3%	5.0%

SUMMARY INFORMATION

On a simple daily basis, the monthly average yield was 1.81% for June, 1.89% for July and 1.92% for August.

As of the end of the reporting period, market value of collateral supporting the Repurchase Agreements was at least 102% of the Book Value.

The weighted average maturity of the fund as of August 31, 2018 was 28 days.

The net asset value as of August 31, 2018 was 1.00002.

The total amount of interest distributed to participants during the period was \$85,604,365.86.

This quarter, TexPool rates did not exceed the 90 Day T-Bill rates toward the end of the reporting period.

TexPool has a current money market fund rating of AAAm by Standard and Poor's.

During the reporting period, the total number of participants has increased to 2,499.

Funds assets are safe kept at the State Street Bank in the name of TexPool in a custodial account.

During the reporting period, the investment portfolio was in full compliance with Tri-County Behavioral Healthcare's Investment Policy and with the Public Funds Investment Act.

Submitted by:

Sheryl Baldwin
Manager of Accounting / Investment Officer

Date

Millie McDuffey
Chief Financial Officer / Investment Officer

Date

Evan Roberson
Executive Director / Investment Officer

Date

TRI-COUNTY BEHAVIORAL HEALTHCARE
QUARTERLY INTEREST EARNED REPORT
FISCAL YEAR 2018
As Of August 31, 2018

BANK NAME	INTEREST EARNED				
	1st QTR.	2nd QTR.	3rd QTR.	4th QTR.	YTD TOTAL
Alliance Bank - Central Texas CD	\$ 475.91	\$ 475.21	\$ 463.21	\$ 468.47	\$ 1,882.80
First Financial Bank CD	\$ 3,438.88	\$ 3,401.09	\$ 3,476.67	\$ 3,476.67	\$ 13,793.32
First Liberty National Bank	\$ 0.89	\$ 1.13	\$ 1.22	\$ 2.75	\$ 5.99
JP Morgan Chase (HBS)	\$ 4,123.96	\$ 5,057.21	\$ 7,614.20	\$ 8,314.70	\$ 25,110.07
Prosperity Bank	\$ 63.84	\$ 63.18	\$ 87.10	\$ 515.20	\$ 729.32
Prosperity Bank CD (formerly Tradition)	\$ 3,865.55	\$ 3,877.63	\$ 3,805.19	\$ 2,586.96	\$ 14,135.33
TexPool Participants	\$ 158.12	\$ 193.03	\$ 254.49	\$ 294.07	\$ 899.71
Total Earned	\$ 12,127.15	\$ 13,068.48	\$ 15,702.08	\$ 15,658.82	\$ 56,556.54

Agenda Item: Board of Trustees Unit Financial Statement as of July & August 2018 Committee: Business	Board Meeting Date September 27, 2018
Background Information: None	
Supporting Documentation: July & August 2018 Board of Trustees Unit Financial Statement	
Recommended Action: For Information Only	

Unit Financial Statement

FY 2018

	July 2018 Actuals	July 2018 Budgeted	Variance	YTD Actual	YTD Budget	Variance	Percent	Budget
Revenues								
Allocated Revenue	\$ 2,554.00	\$ 2,554.00	\$ -	\$ 28,091.00	\$ 28,091.00	\$ -	100.00%	\$ 30,645.00
Total Revenue	\$ 2,554.00	\$ 2,554.00	\$ -	\$ 28,091.00	\$ 28,091.00	\$ -	100.00%	\$ 30,645.00
Expenses								
Food Items	\$ -	\$ 167.00	\$ (167.00)	\$ -	\$ 1,833.00	\$ (1,833.00)	0.00%	\$ 2,000.00
Insurance-Worker Compensation	\$ 7.91	\$ 17.00	\$ (9.09)	\$ 91.40	\$ 183.00	\$ (91.60)	49.95%	\$ 200.00
Legal Fees	\$ 1,500.00	\$ 1,500.00	\$ -	\$ 16,500.00	\$ 16,500.00	\$ -	100.00%	\$ 18,000.00
Supplies-Office	\$ -	\$ 20.00	\$ (20.00)	\$ 12.00	\$ 225.00	\$ (213.00)	0.00%	\$ 245.00
Training	\$ -	\$ -	\$ -	\$ 650.00	\$ 3,600.00	\$ (2,950.00)	18.06%	\$ 3,600.00
Travel - Local	\$ -	\$ 50.00	\$ (50.00)	\$ -	\$ 550.00	\$ (550.00)	0.00%	\$ 600.00
Travel - Non-local Mileage/Air	\$ -	\$ 150.00	\$ (150.00)	\$ 1,077.00	\$ 1,650.00	\$ (573.00)	65.27%	\$ 1,800.00
Travel - Non-local Hotel	\$ -	\$ 250.00	\$ (250.00)	\$ 2,485.41	\$ 2,750.00	\$ (264.59)	90.38%	\$ 3,000.00
Travel - Meals	\$ -	\$ 100.00	\$ (100.00)	\$ 1,060.32	\$ 1,100.00	\$ (39.68)	96.39%	\$ 1,200.00
Total Expenses	\$ 1,507.91	\$ 2,254.00	\$ (746.09)	\$ 21,876.13	\$ 28,391.00	\$ (6,514.87)	77.05%	\$ 30,645.00
Total Revenue minus Expenses	\$ 1,046.09	\$ 300.00	\$ 746.09	\$ 6,214.87	\$ (300.00)	\$ 6,514.87	22.95%	\$ -

Unit Financial Statement

FY 2018

	August 2018 Actuals	August 2018 Budgeted	Variance	YTD Actual	YTD Budget	Variance	Percent	Budget
Revenues								
Allocated Revenue	\$ 2,554.00	\$ 2,554.00	\$ -	\$ 30,645.00	\$ 30,645.00	\$ -	100.00%	\$ 30,645.00
Total Revenue	\$ 2,554.00	\$ 2,554.00	\$ -	\$ 30,645.00	\$ 30,645.00	\$ -	100.00%	\$ 30,645.00
Expenses								
Food Items	\$ -	\$ 167.00	\$ (167.00)	\$ -	\$ 2,000.00	\$ (2,000.00)	0.00%	\$ 2,000.00
Insurance-Worker Compensation	\$ 2.64	\$ 17.00	\$ (14.36)	\$ 94.04	\$ 200.00	\$ (105.96)	47.02%	\$ 200.00
Legal Fees	\$ 1,500.00	\$ 1,500.00	\$ -	\$ 18,000.00	\$ 18,000.00	\$ -	100.00%	\$ 18,000.00
Supplies-Office	\$ -	\$ 20.00	\$ (20.00)	\$ 12.00	\$ 245.00	\$ (233.00)	0.00%	\$ 245.00
Training	\$ -	\$ -	\$ -	\$ 650.00	\$ 3,600.00	\$ (2,950.00)	18.06%	\$ 3,600.00
Travel - Local	\$ -	\$ 50.00	\$ (50.00)	\$ -	\$ 600.00	\$ (600.00)	0.00%	\$ 600.00
Travel - Non-local Mileage/Air	\$ -	\$ 150.00	\$ (150.00)	\$ 1,077.00	\$ 1,800.00	\$ (723.00)	59.83%	\$ 1,800.00
Travel - Non-local Hotel	\$ -	\$ 250.00	\$ (250.00)	\$ 2,485.41	\$ 3,000.00	\$ (514.59)	82.85%	\$ 3,000.00
Travel - Meals	\$ -	\$ 100.00	\$ (100.00)	\$ 1,060.32	\$ 1,200.00	\$ (139.68)	88.36%	\$ 1,200.00
Total Expenses	\$ 1,502.64	\$ 2,254.00	\$ (751.36)	\$ 23,378.77	\$ 30,645.00	\$ (7,266.23)	76.29%	\$ 30,645.00
Total Revenue minus Expenses	\$ 1,051.36	\$ 300.00	\$ 751.36	\$ 7,266.23	\$ -	\$ 7,266.23	23.71%	\$ -

Agenda Item: HUD 811 Update Committee: Business	Board Meeting Date September 27, 2018
Background Information: As you are aware our HUD 811 housing projects are funded with the expectation that they remain viable for the next 40 years. Once this time period is met, HUD considers the program obligation met (i.e. loan paid in full). Each of the Housing Boards is appointed by the Board of Trustees and each organization is a component unit of Tri-County Behavioral Healthcare. As a Liaison to these projects, Tri-County has established a quarterly reporting mechanism to keep the Board of Trustees updated on the status of these projects.	
Supporting Documentation: Fourth Quarter FY 2018 HUD 811 Report	
Recommended Action: For Information Only	

4th Quarter FY 2018 HUD 811 Report

The Cleveland Supported Housing, Inc. Board (CSHI) held their last meeting on August 21, 2018, where they reviewed project updates, financial status and selected the auditor for Fiscal Year 2018. The property is at 100% capacity with five approved applications on the waiting list and several pending.

We are excited to report that in coordination with Cook Construction, the flooring has been replaced and the drain in the managers unit has been repaired. There were a few minor damages (i.e. a broken light fixture) during the process which are being covered by TCC multifamily. The new floors look outstanding and we are hopeful that they will last.

Staff made a visit to the property on June 11, 2018 to walk the property and visit with property management about remaining maintenance issues and resident status. Residents are reported to be doing well at this time and participation in community activities remains strong. There have continued to be several issues reported by property management, including: a few pieces of brick and siding have fallen off of the building, the back fence to the dumpster recently fell over, the fire sprinklers are popping out of place in the ceilings and it has been discovered that the insulation has been falling from the eaves. Staff are currently working with McDougal Property Management, Cook Construction, and the Cleveland Supported Housing Board to identify which issues should be covered under warranty and which will need to be repaired at the expense of the property.

As of July 31, 2018, the Payable to Tri-County is \$36,707.00.

The current CSHI bylaws state that the minimum number of directors may not be less than three at any given time and we are currently at four. Although not required, we continue to be open to the prospect of additional Board members for the CSHI Board.

The Montgomery Supported Housing, Inc. Board (MSHI) held their last meeting on September 18, 2018, where they reviewed project updates, financial status and selected the auditor for Fiscal Year 2018. The property is at 100% capacity with six approved applications and two additional prospects on the waiting list.

At the last meeting the Board discussed the City of Montgomery Rezoning proposal that was taking place near Independence Place and discussed how this might affect our property. Shortly following the meeting we received confirmation that the rezoning would, in fact, not affect our property but that the City ordinances required them to

notify all properties within a specific perimeter of the property being rezoned. On Thursday August 2nd, The Courier reported that the City had denied the rezoning which would halt plans to begin construction on a senior living facility to the northwest of IPA.

As of July 31, 2018, the payable to Tri-County is \$31,943.86 and the property operated with a net loss of (\$1,125.37) for the year which was \$692.63 worse than budgeted. Staff reviewed amounts over budget and did not see anything out of the ordinary. A few of these items such as audit expense will even out throughout the year.

The Independence Communities, Inc. Board (ICI) held their last meeting on September 18, 2018, where they reviewed project updates, financial status and selected the auditor for Fiscal Year 2018.

The property remains well maintained and residents continue to benefit from the close proximity of the apartments to Tri-County Behavioral Healthcare. As the Board is aware, not all residents receive services at TCBHC but those that do continue to have improved access from this partnership. The Property Manager has done an outstanding job maintaining this project which opened in 2005 and has established positive relationships with both residents and staff. We are pleased to have solid leadership and management of this property as they head into their 14th year.

McDougal Property Management submitted a budget based rent increase to HUD on June 30, 2018 and expects to receive a response some time in mid October.

As of the July 31, 2018 financials, the property has a net operating income of \$6,834.81. Following required payments to the RFR, there was a net profit for the year of \$2,809.81.

Agenda Item: Tri-County's Consumer Foundation Update Committee: Business	Board Meeting Date September 27, 2018
Background Information: <p>The Tri-County Consumer Foundation Board of Directors held a face to face meeting on July 19, 2018 in the Board Room at 233 Sgt. Ed Holcomb Blvd. S., where the committee approved the documents necessary to begin distributing funds. In addition, the committee discussed the next fundraiser to be held sometime in October. A fun run, bike race, a golf ball drop and a trick or treat event were all discussed as viable options for the event. The committee requested additional information on each idea and agreed to reconvene in 4 weeks to make a final decision on the October fundraising event.</p> <p>On August 16th, 2018 the TCCF Board of Directors met to make a final decision on the October fundraising event. The committee decided to have a Family Fun Night that includes a golf ball drop, a bounce house, various games, a trick or treat bike ride around Panorama, followed by food and drink at the clubhouse. The event will be held at Panorama Village on October 27, 2018 from 4:00 p.m. – 6:00 p.m.</p> <p>The Board will meet at its next quarterly meeting on October 11th, 2018 to finalize any last minute details of our "Family Fun Night" Fundraiser.</p>	
Supporting Documentation: None	
Recommended Action: For Information Only	

UPCOMING MEETINGS

October 25, 2018 – Board Meeting

- Longevity Presentations
- Approve Minutes from September 27, 2018 Board Meeting
- Community Resources Report
- Consumer Services Report for September 2018
- Program Updates
- Medicaid 1115 Transformation Waiver Project Status Report
- Cast Election Ballot for TCRMF Board of Trustees
- Consider Dates of Scheduled Board Meetings for Next Year
- Approve Financial Statements for September 2018
- Personnel Report for September 2018
- Texas Council Risk Management Fund Claims Summary for September 2018
- 401(a) Retirement Plan Account Review
- Board of Trustees Unit Financial Statement for September 2018
- Unresolved Building Issues at 233 Sgt. Ed Holcomb Blvd, Conroe, TX - Update

November 29, 2018 – Board Meeting

- Life Skills Christmas Carolers Presentation
- Consumer Christmas Card Contest Winners Presentation
- Community Resources Report
- Consumer Services Report October 2018
- Program Updates
- Personnel Report October 2018
- Texas Council Risk Management Fund Claims Summary for October 2018
- Texas Council Quarterly Board Meeting Update
- Approve Financial Statements for October 2018
- Board of Trustees Unit Financial Statement October 2018
- Unresolved Building Issues at 233 Sgt. Ed Holcomb Blvd, Conroe, TX - Update

Tri-County Acronyms - Updated 6/26/18	
1115	Medicaid 1115 Transformation Waiver
ACT	Assertive Community Treatment
APS	Adult Protective Services
ADRC	Aging and Disability Resource Center
ANSA	Adult Needs and Strengths Assessment
AOP	Adult Outpatient
APRN	Advanced Practice Registered Nurse
ARDS	Assignment Registration and Dismissal Services
BJA	Bureau of Justice Administration
BMI	Body Mass Index
C&Y	Child & Youth Services
CAM	Cost Accounting Method
CANS	Child and Adolescent Needs and Strengths
CARE	Client Assignment Registration & Enrollment
CBT	Computer Based Training & Cognitive Based Therapy
CC	Corporate Compliance
CFP	Certified Family Partner
CFRT	Child Fidelity Review Team
CHIP	Children's Health Insurance Program
CIRT	Crisis Intervention Response Team
COPSD	Co-Occurring Psychiatric and Substance Abuse Disorders
CPS	Child Protective Service
CRCG	Community Resource Coordination Group
CSHI	Cleveland Supported Housing, Inc.
DADS	Department of Aging and Disability Service
DFPS	Department of Family and Protective Services
DOB	Date of Birth
DRPS	Department of Protective and Regulatory Services
DSHS	Department of State Health Services
Dx	Diagnosis
ETBHN	East Texas Behavioral Healthcare Network
FLSA	Fair Labor Standards Act
FY	Fiscal Year
HCBS-AMH	Home and Community based Services - Adult Mental Health
HCS	Home and Community based Services
HHSC	Health & Human Services Commission
HIPAA	Health Insurance Portability & Accountability Act
HR	Human Resources
ICAP	Inventory for Client and Agency Planning
ICF-IID	Intermediate Care Facility - for Individuals w/Intellectual Disabilities
ICI	Independence Communities, Inc.
IDD PNAC	Intellectual and Developmental Disabilities Planning Network Advisory Committee
IHP	Individual Habilitative Plan
IMR	Illness Management and Recovery
IPE	Initial Psychiatric Evaluation
IPP	Individual Program Plan
ITP	Individual Transition Planning (schools)
JUM	Junior Utilization Management Committee
LAR	Legally Authorized Representative
LCDC	Licensed Chemical Dependency Counselor
LCSW	Licensed Clinical Social Worker
LIDDA	Local Intellectual & Developmental Disabilities Authority
LMC	Leadership Montgomery County
LOC	Level of Care (MH)
LOC-TAY	Level of Care - Transition Age Youth
LON	Level Of Need (IDD)
LOSS	Local Outreach for Suicide Survivors

LMSW	Licensed Masters Social Worker
LMFT	Licensed Marriage and Family Therapist
LPHA	Licensed Practitioner of the Healing Arts
LPC	Licensed Professional Counselor
LSFHC	Lone Star Family Health Center
LTD	Long Term Disability
LVN	Licensed Vocational Nurse
MAC	Medicaid Administrative Claiming
MCHC	Montgomery County Homeless Coalition
MCHD	Montgomery County Hospital District
MCOT	Mobile Crisis Outreach Team
MD	Medical Director/Doctor
MHFA	Mental Health First Aid
MIS	Management Information Services
MOU	Memorandum of Understanding
MSHI	Montgomery Supported Housing, Inc.
MTP	Master Treatment Plan
MVPN	Military Veteran Peer Network
NAMI	National Alliance for the Mentally Ill
NEO	New Employee Orientation
NGM	New Generation Medication
NGRI	Not guilty for Reason of Insanity
PA	Physician's Assistant
PAP	Patient Assistance Program
PASRR	Pre-Admission Screening and Resident Review
PATH	Projects for Assistance in Transition from Homelessness (PATH)
PETC	Psychiatric Emergency Treatment Center
PFA	Psychological First Aid
PNAC	Planning Network Advisory Committee
PRN	Practice Registered Nurse
PRS	Psychosocial Rehab Specialist
PQI	Partnership for Quality Improvement
QIDP	Qualified Intellectual Disabilities Professional
QM	Quality Management
QMHP	Qualified Mental Health Professional
RN	Registered Nurse
RPNAC	Regional Planning & Network Advisory Committee
SAMA	Satori Alternatives to Managing Aggression
SAMHSA	Substance Abuse and Mental Health Services Administration
SH	Supported Housing
SUD	Substance Use Disorder
TAC	Texas Administrative Code
TCBHC	Tri-County Behavioral Healthcare
TCCF	Tri-County Consumer Foundation
TCOOMMI	Texas Correction Office on Offenders with Medical & Mental Impairments
TCO	Treatment Co-Occurring Mental Health and Substance Abuse Services
TCRMF	Texas Council Risk Management Fund
TIC	Trauma Informed Care
TRA	Treatment Adult Services (Substance Abuse)
TRR	Texas Resilience and Recovery
TxHML	Texas Home Living
TRY	Treatment Youth Services (Substance Abuse)
UM	Utilization Management
UW	United Way
YES	Youth Empowerment Services
YMHFA	Youth Mental Health First Aid
YPS	Youth Prevention Services