

**Tri-County
Behavioral Healthcare
Board of Trustees
Meeting**

September 28, 2023



Notice is hereby given that a regular meeting of the Board of Trustees of Tri-County Behavioral Healthcare will be held on Thursday, September 28, 2023. The Business Committee will convene at 9:30 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 - August 31, 2023

III. Program Presentation - Code of Conduct Review

IV. Executive Director’s Report - Evan Roberson

- A. OIG Process Updates
- B. Cleveland Facility Updates and Groundbreaking
- C. Child and Youth Crisis Collaborative Team

V. Chief Financial Officer’s Report - Millie McDuffey

- A. FY 2023 Audit
- B. HHSC Mental Health Fiscal Compliance Desk Review
- C. CFO Consortium Update
- D. Days of Operation Ratio

VI. Program Committee

Action Items

- A. Reappoint Intellectual & Developmental Disabilities Planning Network Advisory Committee Members..... 13
- B. Reappoint Mental Health Planning Network Advisory Committee Members..... 14
- C. Approve FY 2024 Goals and Objectives..... 15-19

Information Items

- D. Community Resources Report..... 20-23
- E. Consumer Services Report for August 2023..... 24-26
- F. Program Updates..... 27-32
- G. Annual PNAC Reports..... 33-36
- H. FY 2023 Goals & Objectives Progress Report 4th Quarter..... 37-42
- I. 4th Quarter FY 2023 Corporate Compliance & Quality Management Report..... 43-45
- J. Annual Corporate Compliance Report & 1st Qtr. FY 2024 Corporate Compliance Training..... 46-48

VII. Executive Committee

Action Items

- A. Appoint Texas Council Representative & Alternate for FY 2024..... 49
- B. Cast Election Ballot for Texas Council Risk Management Fund Board of Trustees..... 50-61

Information Items

- C. Personnel Report for August 2023..... 62-64
- D. Texas Council Risk Management Fund Claims Summary for August 2023..... 65-66
- E. Board of Trustees Reappointments & Oaths of Office..... 67-78
- F. Board of Trustees Committee Appointments..... 79
- G. Analysis of Board Members Attendance for FY 2023 Regular & Special Called Board Meetings..... 80-81

VIII. Business Committee

Action Items

- A. Ratify HHSC Mental Health Coordinated Specialty Care Grant Program Contract No. HHS001329300021, First Episode Psychosis..... 82
- B. Approve FY 2024 Dues Commitment & Payment Schedule for Texas Council..... 83-85
- C. Reappoint Consumer Foundation Board of Directors..... 86
- D. Approve Bond Financing for 402 Liberty St, Cleveland, Texas..... 87-88
- E. Approve Purchase of a Used Generator for 402 Liberty St, Cleveland, Texas..... 89-90

Information Items

- F. Review Preliminary August 2023 Financial Statements..... 91-105
- G. 4th Quarter FY 2023 Investment Report..... 106-110
- H. Board of Trustees Unit Financial Statement for August 2023..... 111-112
- I. Consumer Foundation Board Meeting Update..... 113

IX. Executive Session in Compliance with Texas Government Code Section 551.071, Consultation with Attorney; and Section 551.072, Real Property - 402 Liberty St, Cleveland, TX.

Posted By:

Ava Green
Executive Assistant

BOARD OF TRUSTEES MEETING

August 31, 2023

Board Members Present:

Patti Atkins
Gail Page
Jacob Paschal
Morris Johnson
Sharon Walker
Richard Duren
Carl Williamson
Tim Cannon

Board Members Absent:

Tracy Sorensen

Tri-County Staff Present:

Evan Roberson, Executive Director
Millie McDuffey, Chief Financial Officer
Sara Bradfield, Chief Operating Officer
Tanya Bryant, Director of Quality Management and Support
Kathy Foster, Director of IDD Provider Services
Yolanda Gude, Director of IDD Authority Services
Stephanie Ward, Director of Adult Behavioral Health
Andrea Scott, Chief Nursing Officer
Ashley Bare, HR Manager
Darius Tuminas, Controller
Tabatha Abbott, Manager of Accounting
Ava Green, Executive Assistant

Legal Counsel Present: Jennifer Bryant, Jackson Walker LLP

Sheriff Representatives Present: None present

Guests: Mike Duncum, WhiteStone Realty Consulting

Call to Order: Board Chair, Patti Atkins, called the meeting to order at 10:05 a.m.

Public Comment: There was no public comment.

Quorum: There being eight (8) Board Members present, a quorum was established.

Resolution #08-31-01

Motion Made By: Sharon Walker

Seconded By: Gail Page, with affirmative votes by Jacob Paschal, Carl Williamson, Tim Cannon, Morris Johnson and Richard Duren that it be...

Resolved:

That the Board approve the absence of Tracy Sorensen.

The regular meeting of the Board of Trustees adjourned at 10:06 a.m. to go into Executive Session in compliance with Texas Government Code Section 551.071, Consultation with Attorney; and Section 551.074, Executive Director Evaluation.

The Executive Session of the Board of Trustees adjourned at 10:32 a.m. to go into the regular meeting.

Resolution #08-31-02

Motion Made By: Tim Cannon

Seconded By: Jacob Paschal, with affirmative votes by Sharon Walker, Richard Duren, Morris Johnson, Gail Page and Carl Williamson that it be...

Resolved:

That the Board of Trustees approve an increase of the Executive Director's salary and compensation by 5% of the total salary and benefit package and extend the contract for another year.

Resolution #08-31-03

Motion Made By: Gail Page

Seconded By: Sharon Walker, with affirmative votes by Jacob Paschal, Carl Williamson, Morris Johnson, Richard Duren and Tim Cannon that it be...

Resolved:

That the Board approve the minutes of the July 27, 2023 meeting of the Board of Trustees.

Executive Director's Report:

The Executive Director's report is on file.

- IDD Summit
- OIG Audit Updates
- SmartCare Update
- Grant Applications
- SAMHSA No Cost Extension Status
- Huntsville C&Y Clinic Remodel Updates

Chief Financial Officer’s Report:

The Chief Financial Officer’s report is on file.

- FY 2023 Audit Update
- CFO Consortium
- Workers’ Compensation Audit for FY 2023
- Update on Vehicle Purchases

PROGRAM COMMITTEE:

Resolution #08-31-04

Motion Made By: Jacob Paschal

Seconded By: Gail Page, with affirmative votes by Richard Duren, Sharon Walker, Tim Cannon, Morris Johnson and Carl Williamson that it be...

Resolved:

That the Board approve the IDD Local Plan for FY 2024-2025.

Resolution #08-31-05

Motion Made By: Jacob Paschal

Seconded By: Gail Page, with affirmative votes by Richard Duren, Sharon Walker, Tim Cannon, Morris Johnson and Carl Williamson that it be...

Resolved:

That the Board approve the IDD Quality Management Plan for FY 2024-2025.

The Community Resources Report was reviewed for information purposes only.

The Consumer Services Report for July 2023 was reviewed for information purposes only.

The Program Updates Report was reviewed for information purposes only.

Board Trustee, Tim Cannon, left the meeting at 11:14 a.m.

EXECUTIVE COMMITTEE:

Resolution #08-31-06

Motion Made By: Gail Page

Seconded By: Sharon Walker, with affirmative votes by Richard Duren, Morris Johnson, Jacob Paschal and Carl Williamson that it be...

Resolved:

That the Board approve the annual election of FY 2024 Board Officers; Patti Atkins as Board Chair, Gail Page as Vice-Chair and Jacob Paschal as Secretary.

The Personnel Report for July 2023 was reviewed for information purposes only.

The Texas Council Risk Management Fund Claims Summary as of July 2023 was reviewed for information purposes only.

BUSINESS COMMITTEE:

Resolution #08-31-07

Motion Made By: Morris Johnson

Seconded By: Jacob Paschal, with affirmative votes by Richard Duren, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve the July 2023 Financial Statements.

Resolution #08-31-08

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Jacob Paschal, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve the FY 2023 Budget Revision.

Resolution #08-31-09

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Jacob Paschal, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve the proposed FY 2024 Operating Budget.

Resolution #08-31-10

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Jacob Paschal, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board award bid for 402 Liberty Street, Cleveland, Texas to JLA Construction Solutions; authorize Evan Roberson to negotiate a contract with JLA Construction Solutions with assistance from Jackson Walker and authorize Evan Roberson to sign all necessary documents.

Resolution #08-31-11

Motion Made By: Richard Duren

Seconded By: Sharon Walker, with affirmative votes by Jacob Paschal, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve financing for 402 Liberty Street, Cleveland, Texas with First Financial Bank; authorize Evan Roberson to negotiate loan documents with First Financial Bank with assistance from Jackson Walker and authorize Evan Roberson to sign all necessary documents.

Morris Johnson abstained from voting on this agenda item.

Resolution #08-31-12

Motion Made By: Morris Johnson

Seconded By: Jacob Paschal, with affirmative votes by Richard Duren, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board ratify Health and Human Services Commission Contract No. HHS001333300037, Intellectual and Developmental Disability Authority Services.

Resolution #08-31-13

Motion Made By: Morris Johnson

Seconded By: Jacob Paschal, with affirmative votes by Richard Duren, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board ratify Health and Human Services Commission Local Mental Health Authority Performance Agreement, Contract No. HHS001324500037.

Resolution #08-31-14

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Jacob Paschal, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board ratify HHSC Contract No. HHS000477100006, Amendment No. 2, Community Mental Health Grant Program.

Resolution #08-31-15

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Jacob Paschal, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board ratify HHSC FY 2024 Children's Autism Grant Program Contract No. HHS000693900003, Amendment No. 3.

Resolution #08-31-16

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Jacob Paschal, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board appoint an increase in the contract maximum for James D. Phillips in FY 2023 to \$52,000 for on-site Peace Officer services at the PETC.

Resolution #08-31-17

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Jacob Paschal, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve the FY 2024 Lifetime Homecare Services Contract for IDD Respite Services for up to \$140,000.

Resolution #08-31-18

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Jacob Paschal, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve the FY 2024 RecessAbility, Inc. contract for up to \$85,000.

Resolution #08-31-19

Motion Made By: Morris Johnson

Seconded By: Jacob Paschal, with affirmative votes by Richard Duren, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve the FY 2024 Avail Solutions, Inc. contract for Crisis Hotline Assessment Services.

Resolution #08-31-20

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Jacob Paschal, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve the FY 2024 Kingwood Pines Hospital Contract for Inpatient Psychiatric Services for up to \$2,000,000.

Resolution #08-31-21

Motion Made By: Morris Johnson

Seconded By: Jacob Paschal, with affirmative votes by Richard Duren, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve the FY 2024 Woodland Springs Inpatient Hospital Contract for up to \$1,750,000.

Resolution #08-31-22

Motion Made By: Morris Johnson

Seconded By: Jacob Paschal, with affirmative votes by Richard Duren, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve the FY 2024 Cypress Creek Hospital Contract for Inpatient Services for up to \$1,500,000.

Resolution #08-31-23

Motion Made By: Morris Johnson

Seconded By: Sharon Walker, with affirmative votes by Jacob Paschal, Richard Duren, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve the FY 2024 Aspire Inpatient Hospital Contract for up to \$150,000.

Resolution #08-31-24

Motion Made By: Morris Johnson

Seconded By: Sharon Walker, with affirmative votes by Jacob Paschal, Richard Duren, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve the FY 2024 Sun Behavioral Inpatient Psychiatric Services Contract in the amount of \$150,000.

Resolution #08-31-25

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Jacob Paschal, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve contract maximum for James D. Phillips in FY 2024 for up to \$55,000 for on-site Peace Officer services at the PETC.

Resolution #08-31-26

Motion Made By: Morris Johnson

Seconded By: Sharon Walker, with affirmative votes by Jacob Paschal, Richard Duren, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve FY 2024 contract for Ralph Horne for up to \$58,000 for on-site Peace Officer services at the PETC.

Resolution #08-31-27

Motion Made By: Morris Johnson

Seconded By: Sharon Walker, with affirmative votes by Jacob Paschal, Richard Duren, Gail Page and Carl Williamson that it be...

Resolved:

That the Board ratify HHSC Treatment Services Youth (TRY) Substance Use Disorder Services Contract No. HHS000663700100, Amendment No. 3.

Resolution #08-31-28

Motion Made By: Morris Johnson

Seconded By: Gail Page, with affirmative votes by Jacob Paschal, Sharon Walker, Richard Duren and Carl Williamson that it be...

Resolved:

That the Board ratify HHSC Treatment Adult Services (TRA) Contract No. HHS000663700009, Amendment No. 3.

Resolution #08-31-29

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Jacob Paschal, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board ratify HHSC Co-Occurring Mental Health (COPSD) Substance Use Disorder Services Contract No. HHS000886900001, Amendment No. 2.

Resolution #08-31-30

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Jacob Paschal, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board ratify Health and Human Services Commission Substance Use Prevention Grant Program Contract No. HHS000539700205, Amendment No. 3.

Resolution #08-31-31

Motion Made By: Morris Johnson

Seconded By: Jacob Paschal, with affirmative votes by Richard Duren, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve the FY 2024 contract for Dr. Michelle Garcia, Psy. D. and Associates for counseling, behavior support plans and training, and for determinations of intellectual or developmental disability (DIDs) for the priority population for up to \$103,000.

Resolution #08-31-32

Motion Made By: Morris Johnson

Seconded By: Gail Page, with affirmative votes by Jacob Paschal, Sharon Walker, Richard Duren and Carl Williamson that it be...

Resolved:

That the Board approve the FY 2024 Sergio's Landscaping contract in the amount of \$73,932.

Resolution #08-31-33

Motion Made By: Morris Johnson

Seconded By: Jacob Paschal, with affirmative votes by Richard Duren, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve the FY 2024 Crown Cleaning Services contract in the amount of \$240,540.

Resolution #08-31-34

Motion Made By: Richard Duren

Seconded By: Jacob Paschal, with affirmative votes by Morris Johnson, Sharon Walker, Gail Page and Carl Williamson that it be...

Resolved:

That the Board appoint Deputy Chief Lee Tipton as a Director on the Tri-County Consumer Foundation Board for the remainder of a two-year term expiring August 31, 2024.

The Board of Trustees Unit Financial Statement for July 2023 was reviewed for information purposes only.

The regular meeting of the Board of Trustees adjourned at 12:18 p.m.

Adjournment:

Attest:

Patti Atkins
Chair

Date

Jacob Paschal
Secretary

Date

Agenda Item: Reappoint Intellectual and Developmental Disabilities Planning Network Advisory Committee Members

Board Meeting Date

September 28, 2023

Committee: Program

Background Information:

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.

Each of the following members have an expiring term and have 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, 2025.

- Ladana Igler – Family Member
- Pat Shaw – Family Member
- Judie Hunter – Family Member
- Carol Sloan – Community Member
- Madeline Brogan – Family Member

We currently have eight IDDPNAC members, but we need 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.

Supporting Documentation:

None

Recommended Action:

Reappoint Intellectual and Developmental Disabilities Planning Network Advisory Committee Members Ladana Igler, Pat Shaw, Judie Hunter, Carol Sloan, and Madeline Brogan to Two-Year Terms Expiring on August 31, 2025.

Agenda Item: Reappoint Mental Health Planning Network Advisory Committee Members

Board Meeting Date

September 28, 2023

Committee: Program

Background Information:

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.

The following members have an expiring term and have 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, 2025.

- Richard Duren – Family Member, Board Liaison
- Cori Carter – Family Member
- Bonnie Atkinson – Family Member, Community Member

We currently have five MHPNAC members, with four vacancies. We are currently meeting the nine members required per contract through our participation in the Regional PNAC, however would like to increase our membership to nine in the local MH PNAC 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.

Supporting Documentation:

None

Recommended Action:

Reappoint Mental Health Planning Network Advisory Committee Members Richard Duren, Cori Carter, and Bonnie Atkinson to a Two-Year Term Expiring on August 31, 2025.

Agenda Item: Review and Approve Goals and Objectives for FY 2024

Board Meeting Date

September 28, 2023

Committee: Program

Background Information:

The Extended Management Team met on August 11, 2023 for our annual Strategic Planning meeting. The goal of this meeting was to review last years plan, talk about emerging dynamics in Community Center operations and to set goals for FY 2024. Subsequently, we have created a Strategic Plan Review Summary which includes proposed Goals and Objectives for FY 2024.

Supporting Documentation:

Strategic Plan Review Summary with Goals and Objectives for FY 2024

Recommended Action:

Approve the Goals and Objectives for FY 2024

Strategic Planning Summary – FY 2024

Introduction

On August 11, 2023, members of the Tri-County Extended Management Team met together to discuss the strategic direction for Tri-County Behavioral Healthcare. The team had put together a comprehensive 5-year strategic plan in Fiscal Year 2021 that was endorsed as a good foundation for goals and objectives in FY 2024.

The agenda for the planning event included a review of area demographic changes, general economic factors impacting our communities, Center finances, impacts from the 88th Legislative Session, a review of persons served in FY 2023, and reviewed feedback that we have received from stakeholders and via collaborative workgroup meetings during FY 2023.

Significantly, the team discussed FY 2023 goals which are still underway like the Crisis Stabilization Unit restart, SmartCare implementation, Certified Community Behavioral Health Clinic recertification and the construction of the new Cleveland Service Facility – each of which will carry into FY 2024 and will require significant staff effort and support. It should also be noted that 64% of the persons who are currently employed at Tri-County were not employees on March 1, 2020 and therefore, on top of the efforts above, there is a significant need for training and development of these relatively new employees if we are going to meet our current client needs. Finally, as part of Senate Bill 26 from the 88th Legislative Session, the Center may receive a full-center Office of the Inspector General audit which will be significant to prep for and to participate in.

Two Visions

The team spent some time discussing the vision for the Center moving forward, with the principal question of ‘are we on track?’. In the last 10 years, the Center has been focused on growing the traditional service array, including services associated with our Certified Community Behavioral Health Clinic (CCBHC) status. As a part of these activities the Center has implemented no wrong door/open access process at all service locations; there has been a significant and ongoing process to upgrade our service facilities; we have expanded services with available grant funding including Board Certified Behavioral Analysis (BCBA) therapy for children with Autism; we have had a significant focus on expanding the number of individuals who can receive services in Spanish across the service array; have developed housing for persons with Serious Mental Illness (Cleveland); we have expanded the availability of crisis services including operations of a Crisis Stabilization Unit, Crisis Walk-in and three Crisis Intervention Teams with local law enforcement; we have significantly expanded Therapy services using Substance Abuse and Mental Health

Services Administration and County American Rescue Plan Act funding; and, we are about to break ground on the construction of the Cleveland Service Facility.

However, in addition to the activities we already have underway, we receive feedback from stakeholders that there are many unmet needs in the community and that Tri-County should do more to meet these needs. These items include things like more Jail Diversion; Jail-Based Competency Restoration; homeless services; low-income housing for persons with mental illness or substance use disorders; more school-based interventions; more services for persons with Autism; psychiatric and behavioral health support for persons with Intellectual and Developmental Disabilities who also have complex behavioral or psychiatric needs; full integration of Substance Use Disorder treatment, psychiatric, and medical care into 'one stop' services; residential psychiatric treatment placement for children and youth; additional IDD Respite services; focus on the other needs of persons we serve to include Social Determinants of Health (SDoH), including support with food and housing; and outreach to other groups of individuals who have not historically received services from the Center but drive Emergency Department, law enforcement or other costs in the community and could benefit from treatment; among other things.

So, the question asked of the team was 'are we on track?' or, should we shift to our focus to more of these worthy but additional priorities for our Center. Certainly, we are receiving feedback about these new priorities, and at least in some way, the fact that we are associated with these priorities is a recognition of the importance of our role in the community. In addition to the 'are we on track' conversation, the team also discussed what bandwidth our existing staff have to meet these additional needs. The team was given the additional assignment of thinking about these questions and providing feedback. Feedback received from the group could generally be summarized by the following points: 1) we do have a lot on our plate that will be continuing from FY 2023 and with the potential of an OIG audit it may be that our current managerial bandwidth is fully allocated; but, 2) that these needs in the community are coming up frequently and many are seen as a failure of the Community Center system, correctly or not.

So, ultimately, the team's answer about our vision was that we are on track and have made many earnest efforts in the last ten years to meet the needs of our communities, but that we also need to continue to develop champions within the Center to lead in some of these pop-up areas. As the French proverbs state, 1) 'perfect is the enemy of the good,' and 2) 'close is not sometimes good enough and exact is far too costly.' The question of where the Center's 2024 focus should be and what bandwidth we have as a managerial team to address these plans is perhaps more significant this year than those in recent memory and if we do not allocate the correct amount of resources we may not be very successful in meeting these goals. In short, we must be selective in our decisions to grow services to meet these emerging needs.

SWOT Analysis

The Management Team completed a traditional Strengths, Weaknesses, Opportunities, Threats (SWOT) Analysis for the Center and significant feedback is included below:

Strengths:

- We have a system which values contract and rule compliance.
- We have strong collaborative relationships.
- We are focused on growth.
- 40 years of operations.
- We are fiscally responsible.
- The Executive Team is capable and talented.

Weaknesses:

- Retention of staff/turnover.
- Our funding limits our vision.
- Bandwidth for growth, more specifically administrative (managerial) bandwidth, and specifically that of issue - champions.
- Our employee evaluation process needs work.
- Development of new managers.

Opportunities:

- Child/Youth and Walker County Crisis Collaborative Teams.
- Benefit offerings for staff (Magellan).
- Cleveland Service Facility.
- SmartCare implementation.

Threats:

- The pace and frequency of change.
- Potential loss of staff as a result of the SmartCare transition.
- Pressures on the viability of the IDD Provider and Authority systems.
- The mental health of employees.
- Office of Inspector General Audits.
- Decreasing amount of federal funds over the next year (ARPA, SAMHSA) which have helped meet clinical needs.

FY 2024 Board Goals and Objectives

Goal #1 – Clinical Excellence

Objective 1: Staff will successfully Complete Certified Community Behavioral Health Clinic (CCBHC) recertification by March 31, 2024.

Goal #2 – Community Connectedness

Objective 1: Staff will facilitate the development of two new Crisis Collaborative Teams, one focused on Walker County and the other focused on Children and Youth, by March 31, 2024.

Objective 2: Staff will arrange and host a Health and Human Services Commission Sequential Intercept Model (SIM) planning event by May 31, 2024.

Objective 3: Staff will contract with a company or hire a staff to update all public-facing documents and refresh Tri-County social media sites by April 30, 2024.

Objective 4: Staff will facilitate an IDD-focused community awareness event by April 30, 2024.

Goal # 3 – Information Technology

Objective 1: Staff will make recommendations to the Board of Trustees about the use of Artificial or Augmented Intelligence software which will simplify task completion for staff by March 31, 2024.

Goal #4 – Staff Development

Objective 1: Staff will create a management development program which will begin by February 29th, 2024.

Goal # 5 – Fiscal Responsibility

Objective 1: Staff will apply for at least two Substance Abuse and Mental Health Services Administration (SAMHSA) grants to enhance and/or expand services by August 31, 2024.

Agenda Item: Community Resources Report

Board Meeting Date:

September 28, 2023

Committee: Program

Background Information:

None

Supporting Documentation:

Community Resources Report

Recommended Action:

For Information Only

Community Resources Report

September 1, 2023 – September 28, 2023

Volunteer Hours:

Location	August
Conroe	91.25
Cleveland	7.5
Liberty	31.75
Huntsville	10.5
Total	141

COMMUNITY ACTIVITIES:

9/5/23	Veterans of Foreign Wars Monthly Meeting	Liberty
9/6/23	Outreach, Screening, Assessment, and Referral to Treatment (OSAR) Quarterly Meeting - Virtual	Houston
9/6/23	HEARTS Museum Veterans Collaborative	Huntsville
9/7/23	Rotary Club Presentation - Suicide Prevention	Dayton
9/7/23	Substance Use Disorder Marketing Meeting with Open Door Mission	Conroe
9/7-9/12/23	Texas Non-Medical Drivers of Health Consortium - Virtual	Conroe
9/9/23	Adult Mental Health First Aid - Montgomery County Search & Rescue Volunteers	Conroe
9/11/23	Conroe Homeless Coalition Meeting	Conroe
9/11/23	Veterans Whole Health Summit Planning Committee Meeting	Conroe
9/11/23	First Responders & Military Remembrance Dinner	Liberty
9/11/23	Park Place Senior Apartments Health Fair	Huntsville
9/12/23	Substance Use Disorder Marketing Meeting with Willis ISD	Willis
9/12/23	Montgomery County Juvenile Probation Behavioral Health Presentation	Conroe
9/12/23	AS+K Suicide Prevention Training - Lone Star College Community in Schools Programs	Tomball
9/12/23	Montgomery County Community Crisis Collaborative Sub-Committee Meeting - Virtual	Conroe
9/13/23	Conroe Noon Lions Club Luncheon	Conroe
9/13/23	Camp Valor Collaborative Group	Conroe
9/13/23	Veterans Treatment Court September Graduation	Conroe
9/13/23	HEARTS Museum Veterans Collaborative	Huntsville
9/13/23	Texas MCOT Leadership Meeting - Virtual	Conroe
9/14/23	Behavioral Health Suicide Prevention Task Force - Major Mental Health Workgroup/Gaps Analysis Meeting - Virtual	Conroe
9/14/23	Annual CASA Conference for Walker, San Jacinto & Trinity Counties	Huntsville
9/14/23	Adult Mental Health First Aid - Liberty Community General Public	Liberty

9/14/23	Wilkinson Elementary Resource Fair	Conroe
9/15/23	Willis ISD Prevention Planning Meeting	Willis
9/18/23	Youth Mental Health First Aid for Willis ISD	Willis
9/18/23	Liberty County Family Assistance Center Planning Meeting	Liberty
9/19/23	Montgomery County Community Resource Collaboration Group	Conroe
9/19/23	Liberty County Community Coalition Meeting	Cleveland
9/19/23	Annual Review of Community Engagement Committee with Veterans Affairs - Virtual	Conroe
9/20/23	Conroe Noon Lions Club Luncheon	Conroe
9/20/23	HEARTS Museum Veterans Collaborative	Huntsville
9/20/23	Montgomery County Youth Crisis Collaborative	Conroe
9/20/23	Child Crisis Collaborative Meeting of Montgomery County	Conroe
9/21/23	Liberty County Mental Health Collaborative Workgroup	Liberty
9/21/23	Behavioral Health Suicide Prevention Task Force	Conroe
9/23/23	Splendora ISD Color Run and Wellness Expo	Splendora
9/23/23	Splendora ISD Run and Wellness Expo	Splendora
9/25/23	Texas Integrated Care Strategy Listening Session - Virtual	Conroe
9/25/23	Department of Public Safety Complex Coordinated Terrorist Attack Exercise Planning Meeting	The Woodlands
9/26/23	Walker County Community Resource Collaboration Group	Huntsville
9/27/23	Montgomery County Community Crisis Collaborative Team Meeting	Conroe
9/27/23	Region 6 Education Center 3 rd Annual Community Resource Symposium	Huntsville
9/27/23	Liberty ISD Student Health Advisory Committee Meeting	Liberty
9/27/23	Conroe Noon Lions Club Luncheon	Conroe
9/27/23	Camp Valor Collaborative Group	Conroe
9/27/23	HEARTS Museum Veterans Collaborative	Huntsville
9/28/23	Moral Injury Family Workshop - Veterans & First Responders	Houston
9/28/23	VetFest Planning Committee Meeting	Conroe

UPCOMING ACTIVITIES:

9/29/23	Walker County Juvenile Justice Staffing	Huntsville
9/30/23	The Arc of Texas Board Meeting	Austin
10/1/23	Introduction of New Fellows into the 2023-2024 LoneStar LEND (Leadership Education in Neurodevelopmental and Related Disabilities) Program	Missouri City
10/2/23	Parent Vaping Presentation - New Waverly High School	New Waverly
10/3/23	Parent Vaping Presentation - New Waverly Elementary	New Waverly
10/3/23	Veterans of Foreign Wars Monthly Meeting	Liberty
10/9/23	Homeless Coalition Meeting	Conroe
10/9/23	Walker County Community Crisis Collaborative Meeting	Huntsville
10/10/23	American Legion Monthly Meeting	Conroe

10/11/23	Veterans Treatment Court October Graduation	Conroe
10/11/23	Suicide Prevention Collaborative Meeting - Virtual	Conroe
10/11/23	Texas MCOT Leadership Meeting - Virtual	Conroe
10/12/23	Behavioral Health Suicide Prevention Task Force - Major Mental Health Workgroup/Gaps Analysis Meeting - Virtual	Conroe
10/13/23	Lynn Lucas Trunk-or-Treat Event - Lynn Lucas Middle School	Willis
10/17/23	Montgomery County Community Resource Coordination Group	Conroe
10/17/23	Montgomery County Juvenile Probation Behavioral Health Presentation	Conroe
10/18/23	Montgomery County Youth Crisis Collaborative	Conroe
10/18/23	Child Crisis Collaborative Meeting of Montgomery County	Conroe
10/19/23	Behavioral Health Suicide Prevention Task Force	Conroe
10/23/23	New Caney ISD School Resource Fair	New Caney
10/24/23	Walker County Community Resource Collaborative Group	Huntsville
10/25/23	Montgomery County Community Crisis Collaborative Team Meeting	Conroe
10/26/23	San Jacinto Elementary Trunk-or-Treat Event	Conroe
10/27/23	Walker County Juvenile Services Staffing	Huntsville
10/31/23	Liberty County Community Resource Collaboration Group	Liberty

Agenda Item: Consumer Services Report for August 2023

Board Meeting Date:

September 28, 2023

Committee: Program

Background Information:

None

Supporting Documentation:

Consumer Services Report for August 2023

Recommended Action:

For Information Only

CONSUMER SERVICES REPORT
August 2023

Crisis Services, MH Adults/Children	MONTGOMERY COUNTY	PORTER	CLEVELAND	LIBERTY	WALKER COUNTY	TOTAL
Persons Screened, Intakes, Other Crisis Services	608	29	52	39	69	797
Transitional Services (LOC 5)	26	0	0	1	0	27
Psychiatric Emergency Treatment Center (PETC) Served	17	0	0	1	2	20
Psychiatric Emergency Treatment Center (PETC) bed days	72	0	0	5	12	89
Adult Contract Hospital Admissions	65	0	4	5	2	76
Child and Youth Contract Hospital Admissions	10	0	0	0	0	10
Total State Hospital Admissions (Civil only)	0	0	0	0	0	0
Routine Services, MH Adults/Children						
Adult Levels of Care (LOC 1-4, FEP)	1288	0	196	129	128	1741
Adult Medication Services	1045	0	106	101	154	1406
Child Levels of Care (LOC 1-4, YC, YES, TAY, RTC, FEP)	506	269	62	28	101	966
Child Medication Services	224	119	16	11	35	405
TCOOMMI (Adult Only)	91	0	18	19	12	140
Adult Jail Diversions	0	0	0	0	0	0
Persons Served by Program, IDD						
Number of New Enrollments for IDD Services	6	0	2	0	0	8
Service Coordination	680	0	38	39	66	823
Persons Enrolled in Programs, IDD						
Center Waiver Services (HCS, Supervised Living)	25	0	4	12	18	59
Substance Use Services						
Children and Youth Prevention Services	0	0	0	0	0	0
Youth Substance Use Disorder Treatment Services/COPSD	19	0	0	0	0	19
Adult Substance Use Disorder Treatment Services/COPSD	50	0	2	0	0	52

Waiting/Interest Lists as of Month End						
Home and Community Based Services Interest List	1769	0	159	136	204	2268
SAMHSA Grant Served by County						
SAMHSA CCBHC Served	64	10	44	4	21	143
SAMHSA CMHC Served	479	4	19	18	24	544
August Served by Service Area						
Adult Mental Health Services	1662	0	184	150	250	2246
Child Mental Health Services	641	319	71	36	114	1181
Intellectual and Developmental Disabilities Services	794	0	47	54	79	974
Total Served by Service Area	3097	319	302	240	443	4401
July Served by Service Area						
Adult Mental Health Services	1602	0	153	106	208	2069
Child Mental Health Services	600	260	73	32	106	1071
Intellectual and Developmental Disabilities Services	747	0	48	54	81	930
Total Served by Service Area	2949	260	274	192	395	4070

Agenda Item: Program Updates

Board Meeting Date:

September 28, 2023

Committee: Program

Background Information:

None

Supporting Documentation:

Program Updates

Recommended Action:

For Information Only

Program Updates

September 1, 2023 – September 28, 2023

Crisis Services

1. Crisis Services currently has one vacant position. All of our other vacant positions have been filled and new staff are in various stages of new employee training. We continue to seek an appropriate candidate for the Crisis Coordinator/Supervisor position, a vital role in maintaining appropriate supervision and training for our MCOT/CAS Team A.
2. In Montgomery County, Tri-County Crisis Intervention Team (CIT) staff provided a total of 548 crisis services to 399 individuals from June 1 to August 31, 2023. While the vast majority of the individuals served were adults, 72 services were provided to youth. Our CIT staff are partnered with CIT law enforcement officers through either Conroe Police Department, Montgomery County Precinct 1, or Montgomery County Sheriff's Department. Starting October 3rd, quarterly meetings will begin with the Director of Crisis Services at Tri-County and senior officers at each of these three law enforcement agencies to discuss ways we can continue to improve on these very important programs.
3. Our first meeting of the Child Crisis Collaborative of Montgomery County group occurred September 20th and consisted of representatives from all Montgomery county ISDs, CASA, Juvenile Justice, Safe Harbor, CPS, law enforcement, and other child specific stake holders. We plan to expand this group based on feedback from the existing key group members.
4. Our first meeting of the Walker County Crisis Collaborative is scheduled to occur in Huntsville on October 9th and will include representatives from both ISDs in the county, court officials, law enforcement, Juvenile Justice, Adult Probation, and other relevant agencies. We are still attempting to identify an appropriate representative from Huntsville Memorial Hospital who is knowledgeable and willing to participate in the monthly meetings.
5. In FY 2023, Tri-County authorized funding to 770 individuals at one of our five contracted behavioral health hospitals. These 770 individuals, of which 50 were under 18 years of age, utilized a total of 7,187 bed days, with several individuals experiencing multiple admissions during the fiscal year. Individuals who reside in Montgomery county accounted for 65.3% of the 770 receiving inpatient admissions followed by Harris county residents (12.6%), Liberty county residents (10%), and those residing in Walker county (6.8%).

MH Adult Services

1. We continue to search for a candidate for our open adult physician position in Conroe and are managing that with a locum tennens physician currently.
2. Dr. Pradan Nathan continues to serve as our 'acting' Medical Director in Dr. Sneed's absence and is caretaking a series of clinical and administrative tasks.
3. Adult Outpatient Services leadership continues efforts to assess social/non-medical drivers of health by participating in the Texas Non-Medical Drivers of Health Consortia, HHSC's Integrated Care Strategy trainings, as well as continuing conversations with local agencies working on similar initiatives.

4. Adult Outpatient Services continues to fill positions. The Rural Clinics have fully staffed existing caseloads. In Conroe, the higher levels of care teams are fully staffed, and we recently hired another bilingual field-based mental health specialist.
5. The newest Peer Support Specialist has completed all required trainings to be Certified in Peer Support.

MH Child and Youth Services

1. C&Y staff continue to work collaboratively as a team to share updates and problem solve as we work through the SmartCare transition. They are celebrating short-term wins and making adjustments as needed.
2. We are nearing completion on the new Child and Youth Clinic in Huntsville. We have hired a bilingual front desk specialist and are making the final preparations.
3. We are having more challenges this year with many schools exercising increased authority about when and how long our staff can see clients during the school day. Some of this has to do with lack of space and other resources at some of the schools. Our staff continue to problem solve in order to meet with our clients at frequency they need. Many are providing more services in the community than at the schools.
4. We are still awaiting word from Huntsville ISD about their interest in school-based mental health clinics.

Criminal Justice Services

1. Judge Echo Hudson has taken over the Mental Health Treatment Court in Montgomery County. Justice Services staff met with the Judge to review the collaborative process and how Tri-County is regularly involved in the Specialty Court staffings and docket.
2. Program leads are reviewing and updating our MOUs with the jails to reflect the services we provide in the jails, training, and opportunities for collaboration.
3. Staff participated in an HHSC training on Best Practices for Outpatient Coordination, Communication, and Reporting on cases that are found Not Guilty by Reason of Insanity (NGRI).

Substance Use Disorder Services

1. Our Prevention Team continues to reach out to schools across our catchment area to set up prevention education groups. We have many presentations scheduled, so we are focusing on scheduling more education groups at this time.
2. After experiencing significant staff turnover over the summer, we are finally fully staffed again. This will enable us to better engage the schools, reach more youth, and meet contract measures.
3. Our Prevention Manager has been working to get groups and presentations in Liberty ISD. She met with the counseling team for the district and gave a short presentation about prevention services. She was also invited to join the Liberty ISD Student Health Advisory Committee.
4. We have been successful in scheduling frequent prevention presentations to the students assigned to the Disciplinary Alternative Education Program (DAEP) in several school districts, including Conroe, Willis, New Waverly, and Huntsville.

5. The SUD team is focusing on community outreach and marketing to gather information around where the gaps are and how we can help support the community. SUD is focused on building strong relationships and referrals for both youth and adult services.
6. The Substance Use Disorder treatment programs participated in a Quality Management Audit to review our contracted treatment services September 18-21, 2023.
7. We have adjusted times for the youth SUD Parent group and have seen an increase in parent involvement and participation in treatment, which is extremely important and beneficial for this group of youth.

IDD Services

1. IDD Authority's CAP Compliance Review (CCR) Entrance Conference (virtual) was held on August 29, 2023. The CCR process is comprised of reviews of all FY23 Audit corrections, and includes all specific, systemic, and monitoring corrections implemented during the CAP correction period, which ended May 28, 2023. IDD Authority submitted all evidence supporting specific corrections for each program area – HCS, TxHmL, GR, CFC & QA. The CCR Exit was conducted on September 1, 2023. Results of CAP acceptance are pending, but preliminary discussion with the CCR team indicates concerns with the way we corrected some outcomes.
2. Effective September 1, 2023 there will be no advanced communication or formal notification of our HCS Provider Audits.
 - a. The auditors will show up on site and we the Provider need to ensure everything is ready for their review. That includes special documents that need to be ready at all times that we would normally fax the auditor prior to their arrival.
3. The IDD Provider area has had an increase in COVID positive cases, including cases at the Huntsville LifeSkills program.

Support Services

1. **Quality Management (QM):**
 - a. In addition to routine and ongoing quality assurance of documentation, staff reviewed 40 progress notes prior to billing to ensure compliance. Additional training and follow-up was provided with staff and supervisors when needed.
 - b. Staff attended the exit interview process for the IDD CAP review with HHSC on September 1, 2023.
 - c. Staff attended the Quality and Utilization Management Consortia in Austin on September 14 – 15, 2023.
 - d. Staff participated in the Regional PNAC meeting held on September 27, 2023.
 - e. Quality Management along with SUD Program Staff prepared for and participated in an HHSC Substance Use Audit which took place on September 18-21, 2023.
2. **Utilization Management (UM):**
 - a. Staff reviewed 10% of all Center discharges for August to ensure appropriateness and that proper notification and appeal forms were provided. Follow-up with staff was provided as needed to ensure quality improvement.
 - b. Staff reviewed 51 notes that utilized the COPSD Modifier for quality assurance purposes.

- c. Staff reviewed 34 notes that utilized the MCOT Modifier for quality assurance purposes.
- d. Staff updated the internal data dashboard to reflect new contract performance measures.

3. Training:

- a. The IT Department along with Quality Management staff are continuing to assist staff with learning and navigating our new electronic health record Smartcare. The Clinical Trainer has uploaded computer based trainings for staff who may need to become better familiar with or revisit certain aspects of Smartcare.
- b. The Center is seeing an increase in new hire groups over the past couple New Hire Orientation groups with 19 new hires being onboarded during the week of September 4-8, 2023.

4. Veteran Services and Veterans Counseling/Crisis:

- a. The department was awarded \$253,236.00 to spend in less than five weeks to help our local Veterans with MH and SUD to maintain recovery and prevent homelessness by assisting them with housing, utilities, food, etc. Though we did not spend the entire amount, we helped 62 veterans and their family members, and spent a total of \$210,148. This allowed our veterans and their family members to catchup on some much needed bills.
- b. MVPN participated in the Military and First Responder 9/11-Remembrance Dinner in Liberty; there were a lot of tears and some very good relationship building. In addition, the department is working on building better relationships with landlords in the area to assist veterans who are struggling with housing.

5. Planning and Network Advisory Committee(s) (MH and IDD PNACs):

- a. The MH PNAC met on August 9, 2023 and reviewed routine Center updates along with a discussion of the Purpose and Impact of the PNAC over the past several years. The PNAC provided positive feedback about the various community collaborations in place and recommends continued focus on opportunities to provide additional resources and supports to families of individuals served when possible.
- b. The MH PNAC met on August 30, 2023 and reviewed routine Center updates along with a special presentation to the Committee related to School Based Mental Health Clinics. The MH PNAC provided positive feedback about these clinics and recommended that the Center continue to expand these clinics as funding and collaboration allow and noted that they felt there was additional value in expanding school based clinics in the same ISD corridors to ensure continuity across age groups.

Community Activities

School districts in Texas are now required to have staff trained in mental health. Many have a requirement to get a certain percentage of staff trained by a specific deadline. There are numerous mental health trainings available to school district staff, however Montgomery ISD has chosen to go with Youth MHFA to meet their mental health training requirement. This means that Montgomery ISD is on board with getting 25% of their staff trained by the 2025-2026 school year. We are already looking at dates to hold trainings next month and in February of 2024 for MISD.

<p>Agenda Item: Planning Network Advisory Committee Annual Reports</p> <p>Committee: Program</p>	<p>Board Meeting Date</p> <p>September 28, 2023</p>
<p>Background Information:</p> <p>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. Some 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.</p>	
<p>Supporting Documentation:</p> <p>Mental Health PNAC Annual Report</p> <p>Intellectual and Developmental Disabilities PNAC Annual Report</p>	
<p>Recommended Action:</p> <p>For Information Only</p>	

Mental Health Planning Network Advisory Committee FY 2023 Annual Report

In FY 2023, the Mental Health Planning Network Advisory Committee (MHPNAC) was provided with the following regular Center Updates:

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

Special presentations and topics are presented to the Committee as needed to increase their knowledge and understanding of Center operations, needs and barriers as well as to receive feedback on areas of quality improvement. This year, the Committee reviewed and discussed the following key areas:

- FY 23 Annual Continuous Quality Improvement (CQI) Goals and Status Updates
- Recommendations from Prosumers International Consult related to Peer Services
- School Based Services
- SAMHSA grant updates
- Expansion of Counseling Services
- Staff Turnover, Retention and Center Challenges
- HHSC Audit Results
- Tri-County Electronic Health Record Transition
- CSU Challenges and Reopening
- HB 4 expansion of allowances – expansion of services allowed via electronic means
- Plans for new facilities in Liberty and Walker Counties

In FY 23 the MH PNAC received annual training, budget information and participated in the Consolidated Local Plan and Local Provider Network Development planning process. The committee discussed the unique challenges facing our Center to include but not limited to, continued growth, staffing challenges, need for additional funding and resources, and noted that, overall, the Center is doing well with the resources they have.

The MHPNAC met seven times for regularly scheduled meetings with a 46% attendance rate. Membership continued to be a significant focus of the committee in FY 23 with three new members added to the group. The MHPNAC is required to have nine members and as of the end of FY 23, the committee membership was at five members with four vacancies. Following Prosumers International Recommendations our peer member was moved to a Center liaison.

Additionally, MHPNAC member Richard Duren attended and served as a member of the Regional Planning and Network Advisory Committee on behalf of the local MH PNAC committee throughout the year and membership is at the required nine for this Committee.

Intellectual and Developmental Disabilities Planning Network Advisory Committee

FY 2023 Annual Report

In FY 2023, the Intellectual and Developmental Disabilities Planning Network Advisory Committee (IDDPNAC) was provided with the following regular Center Updates:

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

Special program presentations and topics are presented to the Committee as needed to increase their knowledge and understanding of Center operations, needs and barriers and to obtain informed feedback from the Committee. This year the Committee reviewed and discussed the following areas:

- Annual Training
- Individualized Skills and Socialization (ISS)
- Staff Turnover and Retention efforts to include changes to State regulations guiding qualifications for Service Coordinators
- Center Audit Results
- Center Electronic Health Record Transition
- Reopening of the Crisis Stabilization Unit
- Plans to build new facilities in Liberty and Walker Counties
- Purpose and Impact of the PNAC

In addition to providing feedback on regular Center updates and special topics, the IDD PNAC participated in the Local Provider Network Development Planning (Local Plan) process for the Fiscal Year 2024-2025 plan. The PNAC and other stakeholders identified the following focus areas for this plan:

- Continued need for greater awareness in the community (families, employers, legislative staff, educational system, healthcare providers, etc.) about IDD to include the needs of individuals and families as well as how community organizations are working with and impacted by IDD;
- Development of additional resources for services and supports. Feedback specifically cited challenges with long interest lists for waiver services, services and supports for individuals with Autism to include supports for those who may not qualify for waiver services, and the need for additional respite and local transportation options;
- Staff retention and reduction of turnover whenever possible.

In FY 2023, the IDDPNAC met six times and had an overall attendance of 58%.

The IDDPNAC currently has eight of the required nine members locally and is currently meeting contract membership requirements through participation in the Regional PNAC.

Agenda Item: FY 2023 Goals and Objectives Progress Report

Board Meeting Date

September 28, 2023

Committee: Program

Background Information:

Attached is the final report of the Board Goals and Objectives for FY 2023.

Supporting Documentation:

FY 2023 Goals and Objectives Progress Report

Recommended Action:

For Information Only

Year-to-Date Progress Report

September 1, 2022 – August 31, 2023

Goal #1 – Clinical Excellence

Objective 1:

Develop a two-year implementation plan for appropriate clinical use of telehealth, including a plan for accelerating the plan if needed, which incorporates state regulations and clinical best practices by June 1, 2023.

- A 'Whitepaper' has been completed and submitted on May 12, 2023. The white paper explored the advancements of telehealth, including benefits, challenges, and potential impact on individuals, providers, and healthcare systems in an effort to determine when and how telehealth may be strategically used to advance the availability and accessibility of services.
- As a part of this whitepaper the Quality Assurance Department conducted two phone surveys of random samples of clients designed to gather feedback surrounding interest in participating in services provided using telehealth. The initial survey contacted clients across the Center, but the second was focused on collecting information from clients residing in Walker and Liberty counties. It was learned that while face to face services are preferred as the primary method of service provision, respondents across the service area indicated they would like to have the option to use telehealth if available. Respondents further indicated that a telehealth option would increase attendance as it would address barriers, including transportation, child or elder care, or cancellations due to illness, as well as allow for greater flexibility in scheduling for those who are working.
- As part of the whitepaper, an implementation timeline was provided, outlining the steps that would be necessary to start telehealth programs as well as the anticipated length of time for each action item.
- Following completion of the initial goal, the implementation plan, findings, and recommendations were reviewed with the Management Team in early August. Next steps include identifying which services would best benefit from having an added telehealth modality and initiating a pilot program to determine best practices and work through any challenges prior to any potential expansion down the line.

Objective 2:

If appropriate operational funding can be secured, reopen the Crisis Stabilization Unit by May 1, 2023 – or – If additional funds are not available for CSU operations, design an alternative Crisis program for Board approval by April 1, 2023.

- With the assistance of Justice of the Peace Wayne Mack, Tri-County secured continued American Rescue Plan Act funding from Montgomery County that will allow us to reopen the Crisis Stabilization Unit, among other things.

- We had a team of staff working on multiple aspects of reopening, which occurred on June 18, 2023.
 - Facility modifications, updates and relicensing:
 - The Board approved a not-to-exceed budget for \$400,000 for CSU modifications at the January 26, 2023 Board meeting. Interior construction was completed in May with roof replacement occurring in June.
 - The CSU passed the Department of State Health Services (DSHS) reinspection on May 28th and license was received within a few days, allowing the unit to officially reopen on June 18th.
 - Staff hiring and development:
 - All positions for the Crisis Stabilization Unit were hired except for (PRN) nurse and tech positions (which will remain open).
 - Several job fairs were held in an effort to hire staff.
 - Licensing and operational procedure development:
 - Facility licensing procedures were finalized in April after review and approval by the Medical Director and Executive Director. In total, the procedures were around 140 pages.
 - 97 forms were updated for use at the CSU.
 - 14 operating (desk) procedures were completed prior to reopening, and several more are being developed.
 - Operations, including reestablishing relationships with contractors:
 - Vendors have been selected and contracts completed for janitorial services, linens, medical screening and assessment, food, etc. All of the contract costs have increased by 20-30%.
 - Genoa is managing the pharmacy oversight services for now, but are unable to provide all of the medications needed for the CSU. We may have to use more than one pharmacy to meet CSU needs.
 - We have had a technical conversation with a Pyxis vendor (automated medication distribution machine) and will plan to purchase that as a part of our CSU design going forward, but have to figure out the pharmacy first.
 - We are reviewing software needs. Anasazi will be used initially so many of the assessments, etc., will remain unchanged until SmartCare is implemented on September 1, 2023.
- Our Chief Nursing Officer, Andrea Scott, APRN, is managing the Crisis Stabilization Unit.

Goal #2 – Professional Facilities

Objective 1:

Break ground on the new Cleveland Service Facility by August 31, 2023.

- The design team held regular meetings with Identity Architects to design the Cleveland Service Facility. At this point, the construction documents are about 90% complete.

- Building contractor Mike Duncum and Architect David Kastendieck have met with the City of Cleveland Planning and Zoning Department to discuss the project and report that no significant challenges with the site design are expected.
- After interviews conducted by a Board sub-committee and select Center staff, the Board selected JLA Construction as the general contractor for the building at the August 31, 2023 Board meeting.
- The date for Groundbreaking will be set once the civil permit for the project is received from the City of Cleveland.

Objective 2:

Complete a refresh of the Sgt. Ed Building in Conroe to include inside paint, carpet where needed and other general cleanup, the waiting rooms and children's playroom by June 1, 2023.

- Following a complete walk-through of the Conroe facility, several projects were identified to address general deterioration associated with daily use, most of which have been completed, including:
 - Interior walls have been repainted throughout the building.
 - Carpet has been replaced with faux wood ceramic tile in high traffic areas, including replacing baseboards in these areas.
 - The parking lot has been pressure washed and restriped.
 - Exterior stucco repairs and exterior paint on the entire building have been completed.
 - The interior and exterior shipping and receiving door has been refinished.
- Other identified areas that are in process include wall-paper, bathroom stalls, and sheet-rock repairs, as well as adding corner guards.
- A 'calm room' for children and adolescents who are experiencing behavioral emergencies is nearing completion on the second floor to provide a safe space to deescalate these individuals.
- The team worked with the Diversity Workgroup to identify artwork for the building that is representative of the various cultures of the community that will replace or supplement existing pieces. Art has been placed around the building with positive reviews from staff and clients.
- Finally, replacement lobby furniture has been ordered to replace torn or stained furniture in the lobbies and reception areas.

Goal #3 – Information Technology

Objective 1:

Prepare the Streamline SmartCare Behavioral Health Software System for 'Go-Live' by August 31, 2023.

- Streamline SmartCare provided a week-long Super User Training to staff and Managers to prepare them to be able to answer front line user questions. The first three days were

dedicated to clinical and medical process and the last two days were dedicated to billing, process, and administrative processes.

- The 'Go-Live' date for the new software was on September 1, 2023. On Friday September 1 and the week that followed, schedules were kept at about half normal levels to allow staff time to complete documentation in a new system.
- The initial response to the software has been good overall, but lots of work is needed to add features which had been added by staff to Anasazi. We expect heavy development of this product throughout FY 2024.

Goal #4 – Employee Retention

Objective 1:

Create an employee leadership development program for Center managers by May 1, 2023.

- Staff have explored leadership development options with a goal of identifying opportunities that are meaningful and worthwhile, while also being accessible to the different levels of management, including staff who are considering a future in leadership, mid-level managers, and those in higher level leadership roles. As part of this initiative, staff have reviewed a variety of certificate programs available through several highly respected colleges and universities, focusing on programs that target advancement of key leadership skills that will benefit the Center, while also considering factors such as cost, time commitment, prestige, effort, and course availability. Staff have further started identifying strategies for developing internal leadership programming designed to enhance supervisor aptitude and encourage growth for both existing supervisors and those who may be interested in future movement.
- The team identified a series of online leadership certificate programs available through several highly respected colleges and universities that target development of higher-level leadership skills, identifying several affordable, yet meaningful programs.
- A proposal was provided to and approved by the Executive Director. Next steps for implementation are underway and include marketing the program to staff and adding an application form to Datis to allow staff to request opportunity to participate.

Goal #5 – Financial

Objective 1:

Implement required business office processes to ensure compliance with the Public Health Provider – Charity Care Pool guidance by February 28, 2023.

- A Center procedure was developed, establishing guidelines for completing the application for the Charity Care Pool program, including methods for evaluating eligibility, determining fee for service, and payment collection, while ensuring appropriate data collection practices to allow for accurate and timely completion of the annual cost report.
- Financial staff and others involved in the implementation and ongoing maintenance of the CCP program have received training on the program requirements and have started assisting the clients with the application process to determine eligibility, including

documentation of completion and Charity Care eligibility in the electronic health record. Notices of the Charity Care Pool program have also been posted in each clinic site and publicized on the website in compliance with charity care requirements. Finally, Business Office procedures, including desk procedures, have been developed and implemented to ensure ongoing compliance with all requirements and standards necessary for cost reporting submission and reimbursement.

- Since implementation of the Charity Care program, staff have aided clients with the application process to determine eligibility, including documentation of completion and Charity Care eligibility in the electronic health record. Notices of the Charity Care Pool program have been posted and publicized in all clinic sites and on the website, in compliance with requirements.
- The Business Office is providing monitoring and oversight of this program to ensure compliance with all requirements and standards necessary for cost reporting submission and reimbursement.
- A process for tracking and monitoring payment collection efforts has been implemented in alignment with Charity Care regulations.
 - There has been some inconsistent information about the level of tracking that will be required for collection efforts and Financial staff are working to clarify this information further.

Agenda Item: 4th Quarter FY 2023 Corporate Compliance and Quality Management Report

Board Meeting Date

September 28, 2023

Committee: Program

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 4th quarter of FY 2023 are included in this Board packet.

Supporting Documentation:

4th Quarter FY 2023 Corporate Compliance and Quality Management Report

Recommended Action:

For Information Only

Corporate Compliance and Quality Management Report

4th Quarter, FY 2023

Corporate Compliance Activities

A. Key Statistics:

One compliance concern was reported in the 4th Quarter of FY23, when Compliance staff received a request from the HR Manager to complete an audit due to performance concerns. Compliance concerns were confirmed. As a result, payback was made in the amount of \$680.39 for completing non-billable services during billable service time. The findings were referred back to the HR Manager to address with staff.

B. Committee Activities:

The Corporate Compliance Committee met on June 21, 2023. The Committee reviewed the following:

1. A final summary of FY23 3rd Quarter investigations/reviews;
2. FY23 4th Quarter updates; and
3. Trending concerns.

Quality Management Initiatives

A. Key Statistics:

1. Staff reviewed and submitted 21 record requests, totaling 87 charts.
2. Staff completed two Program Surveys during this timeframe.
3. Staff conducted several ongoing internal audits including documentation reviews, authorization override requests for clinically complex individuals, and use of the co-occurring psychiatric and substance use modifier as well as Mobile Crisis Outreach Team Modifier.

B. Reviews/Audits:

1. Staff prepared and submitted two record requests totaling three charts to Aetna dating back to January 2022.
2. Staff prepared and submitted five record requests totaling six charts to Amerigroup dating back to January 2022.
3. Staff prepared and submitted six record requests totaling 14 charts to Cigna Medicare dating back to January 2022.
4. Staff prepared and submitted one record request totaling one chart to Devoted Health dating back to January 2022.
5. Staff prepared and submitted two record requests totaling five charts to Humana dating back to January 2022.

6. Staff prepared and submitted one record request totaling one chart to Molina dating back to January 2022.
7. Staff prepared and submitted two record requests totaling two charts to United HealthCare dating back to January 2023.
8. Staff prepared and submitted two record requests totaling 55 charts to WellCare dating back to January 2022.
9. Staff reviewed 132 notes that used the Co-Occurring Psychiatric and Substance Use Disorder modifier to ensure that the intervention was used appropriately. This review indicated that the staff utilizing this code are using it correctly.
10. Staff reviewed 100 notes which used the MCOT Modifier for quality assurance purposes. Feedback was provided to those who had utilized the modifier incorrectly.
11. Staff reviewed 77 discharges that occurred in Q4 and communicated areas that were needing improvement to supervisory staff.
12. Staff reviewed 20 MH Adult and Child and Youth progress notes for quality assurance purposes. Follow up was provided to supervisors as needed for any re-training purposes.
13. Staff completed program surveys for the First Episode Psychosis and the Programs for Assistance in the Transition from Homelessness (PATH) programs.

Other Quality Management Activities:

1. QM along with Adult Outpatient staff participated in an HHSC audit of the First Episode Psychosis program on August 22 – 23, 2023.
2. The Continuous Quality Improvement Committee met two times in quarter four to review progress on annual goals and discuss next steps as well as future areas of need and focus. All goals for FY 23 were met this year with a review of the past PDSA cycles indicating additional improvement over time. Specifically, the Liberty Medication Clinic show rate has improved by over six percent since 2020.
3. QM participated in additional Center activities along with other identified staff including but not limited to, CCBHC recertification, Streamline implementation, Local Planning and Disaster Response meetings and exercises.

Agenda Item: Annual Corporate Compliance Report and 1st Quarter Corporate Compliance Training

Board Meeting Date

September 28, 2023

Committee: Program

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 2023 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 2023 Annual Corporate Compliance Report

FY 2024 1st Quarter Corporate Compliance Training

Recommended Action:

For Information Only

Corporate Compliance Program FY2023 Annual Report

General Overview:

Tri-County Behavioral Healthcare’s (TCBHC) Board Policy on Corporate Compliance requires that the Chief Compliance Officer present an annual report on program activities and investigations from the prior fiscal year.

Annual Report:

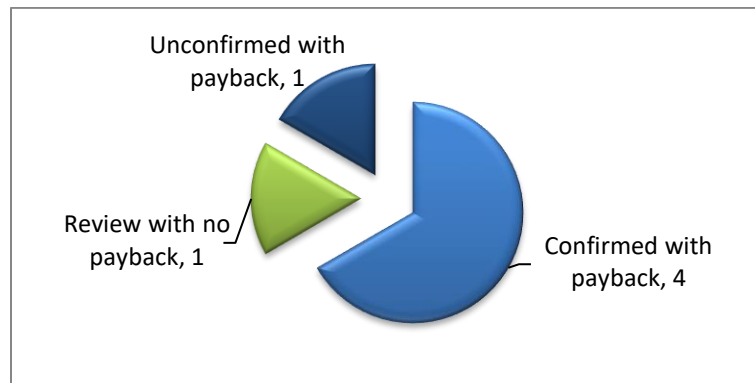
The Compliance Department is responsible for taking appropriate steps to design, implement, and/or modify TCBHC’s Compliance Program to mitigate the risk of any compliance-related errors or misconduct by TCBHC employees or contractors. The Compliance Department and the Corporate Compliance Committee reviewed TCBHC’s Corporate Compliance Action Plan (CCAP) this past year, as recommended by the United States Department of Justice. This year, the Committee did not recommend any changes be made to TCBHC’s CCAP; therefore, moving forward into FY24, TCBHC’s Compliance Department will continue to ensure TCBHC adheres to the CCAP in order to prevent, detect, and respond to potential compliance violations, while fostering a culture that promotes integrity and ethical behavior through programs such as these illustrated below:

The Compliance Department continues to require that all new hires complete three (3) compliance-related trainings: a computer-based training module, a face-to-face training conducted by the Compliance Department, and an in-person compliance “refresher” training that is conducted by the Compliance Department after ninety (90) days of employment. In addition to new hires, all employees and contractors receive quarterly compliance training in newsletter form, as well as annual computer-based training. The Compliance Department also provides specific programs with additional training as needed or warranted.

The Compliance Department receives, investigates, monitors, and provides resolution to all allegations of compliance-related concerns. The Compliance Department reports the outcome of all allegations to the Corporate Compliance Committee, Executive Director, and TCBHC’s Board of Directors in order to address compliance issues quickly and transparently.

Corporate Compliance Investigation Results:

In FY23, eight (8) corporate compliance allegations were received. Of the eight (8) allegations, six (6) required further review/investigation by the Chief Compliance Officer. Shown below is the breakdown of these six (6) reviews/investigations:



NEWSLETTER HIGHLIGHTS

COMPLIANCE: We Are All In This Together

Your Compliance Team

Report Compliance Concerns



COMPLIANCE: We Are All In This Together

When it comes to healthcare, every one of us is a stakeholder and every one of us is responsible for making sure that we have an effective compliance program.

Compliance ensures we conduct our business within the boundaries of the law. This aspect of healthcare compliance is the one that usually captures the headlines, showing heavy penalties levied against misbehaving healthcare organizations and individuals.

The purpose of this training is to make the connection between the law and our daily work here at TCBHC, and to instill a culture where unlawful conduct is unequivocally rejected by all in our organization.

Most importantly, compliance is simply the right thing to do, and our ethical compass must guide us to do what is right every time.

We must do right by the individuals we serve and right for TCBHC, as we aim to uphold the highest ethical standards through vigilance in preventing, detecting, and correcting any instance of non-compliance that we see.

And remember, we are all in this together.

Compliance Concerns Hotline:
866-243-9252

YOUR CORPORATE COMPLIANCE TEAM

Amy Foerster
Chief Compliance Officer
amyf@tcbhc.org

Heather Hensley
Administrator of Compliance
heatherh@tcbhc.org

Ashley Bare
HR Manager
ashleyba@tcbhc.org

REPORT

Reports are kept confidential and may be made anonymously.

Reports may be made without fear of reprisal or penalties.

Report to your supervisor, or any Compliance team member any concerns of fraud, abuse, or other wrong doing.

Agenda Item: Appoint Texas Council Representative and Alternate for FY 2024

Board Meeting Date

September 28, 2023

Committee: Executive

Background Information:

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.

Supporting Documentation:

None

Recommended Action:

Appoint Texas Council Representative and Alternate for FY 2024

Agenda Item: Cast Election Ballot for Texas Council Risk Management Fund Board of Trustees

Board Meeting Date

September 28, 2023

Committee: Executive

Background Information:

The election process to fill the positions of the Board of Trustees in Places 4, 5 and 6 will be completed during the Texas Council Risk Management Fund Board Meeting on November 17th. Election ballots are due by Tuesday, October 31st.

Only one (1) candidate can be selected for each of the three (3) places:

- Judge Van York (Incumbent)
- Dr. Yueh Sam Yang or Ms. Edreauanna Fowler
- Mr. Bob Brown (Incumbent)

Supporting Documentation:

Memorandum from the Texas Council Risk Management Fund Nominating Committee

Election Ballot

Recommended Action:

Cast Election Ballot for the Texas Council Risk Management Fund Board of Trustees to Fill Places 4, 5 and 6

September 11, 2023

MEMORANDUM

To: Executive Directors
Member Centers, Texas Council Risk Management Fund

From: TCRMF Nominating Committee

Subject: **Board of Trustees Election Ballot
Places 4, 5 and 6**

The election process for Places 4, 5 and 6 will be finalized at the November 17, 2023, Annual Member Meeting of the Texas Council Risk Management Fund. Attached is the election ballot indicating the eligible candidates for this year's election.

The Nominating Committee has prepared the ballot for the upcoming election. Incumbents Judge Van York (Place 4) and Mr. Bob Brown (Place 6) are seeking re-election and are listed on the ballot. Brief bios are attached for the incumbents. There are two nominees seeking election for Place 5 which is currently vacant. Bios for these nominees are also attached.

Please return the election ballot by email or mail so that it is received in the Fund's office **no later than October 31, 2023**. You may also vote in person at the Annual Member Meeting on November 17th.

If you have any questions, please call Jacey Garza- Raines at the Fund, either 512-970-8398 or email her at Jacey.garzaraines@sedgwick.com.

cc: TCRMF Board of Trustees
Advisory Committee
Pam Beach



BOARD OF TRUSTEES ELECTION BALLOT

At the November 17th Annual Member Meeting of the Texas Council Risk Management Fund, elections will be finalized to fill the positions of Trustees in Places 4, 5, and 6. Incumbents Judge Van York (Place 4) and Mr. Bob Brown (Place 6) are seeking re-election. There are two nominees seeking election for Place 5 which is currently vacant. Each Center may cast its votes by email (preferred), mail, in advance or in person at the Annual Member Meeting.

Please vote for one candidate for each of the three places. Note that you must select either Dr. Yang or Ms. Fowler for Place 5.

	Mark Vote (“X”) In box below (for THREE)
Place 4	
Judge Van York	[]
Place 5	
Dr. Yueh Sam Yang	[]
Ms. Edreauanna Fowler	[]
Place 6	
Mr. Bob Brown	[]

I certify that the above represents the Board of Trustees Election Ballot of the below named Texas Council Risk Management Fund member and that I am duly authorized to execute and deliver this ballot on behalf of the Center.

Name of Community Center

Signature of Authorized Representative

Date

**PLEASE COMPLETE AND MAIL OR EMAIL THIS BALLOT
NO LATER THAN October 31, 2023, TO:**

TEXAS COUNCIL RISK MANAGEMENT FUND
P.O. Box 26655, Austin, Texas 78755-0655
Attention: Jacey Garza- Raines
Email: Jacey.garzaraines@sedgwick.com



**Board of Trustees
2023 Election
Biographical Summaries of Candidates**

Mr. Bob Brown

Mr. Bob Brown has practiced law in Tarrant county for over 35 years. He is a member of the Board of Trustees of Tarrant County MHMR and also serves as a Board member for the Texas Council Community Centers. Bob has served as a Trustee on the Texas Council Risk Management Fund Board since 2022.

Judge Van L. York

Judge Van L. York served as Borden County Judge for 28 years. He has been a member of the Board of Trustees of West Texas centers since 2001. Judge York also serves as a Board member for Texas Council Community Centers. He has served as a Trustee on the Texas Council Risk Management Fund Board since 2010.

Personal Profile of Sam Yang

Personal

Age: 71
Married 45 years, with three adult children
Enjoy reading, music, travel, skiing, volunteer work, world affair, and culture events

Education

Ph.D in Mechanical Engineering from U. of Texas at Austin, 1978-1981
M.S. in Chemical/Nuclear Engineering from U. of Cincinnati, 1976-1978
B.S. in Nuclear Engineering from National Tsing Hua University, 1971-1974

Professional History

2012-Present

Founder, Ex-Chairman of the Board, Current Board Director, ECLAT Education Foundation

Founded ECLAT (Education Changes Life And Time) Education Foundation. ECLAT is a nonprofit, charitable Foundation and its main mission is to help the deserving and needy students in China, Taiwan, and US to complete and fulfill their educational dreams.

1991-Present

Galaxy Electronics Company, CEO and President

Founded Galaxy Electronics Company in 1988. Galaxy is a manufacturer of fiber optic passive components and custom fiber optic and copper cable assembly and electrical-mechanical assembly company. Products are sold in telecom and Datacom industries throughout the United States.

2007-2008

Commissioner for City of Dallas Culture Affairs Committee and Board members for various art organizations.

1994-2020

Phase Dynamics Inc, Chairman of the Board, Chief Financial Officer

Founder and Co-inventor of the real-time, on-line water-cut measurement device and three phase measurement system for oil field applications. Design, manufacture, and marketing of measurement devices for oil production all over the world.

1981-1991

Arco Oil & Gas Company. Principal Research Engineer/Project Manager

The areas of research included:

- Arctic Technologies
- Ice Breaking Tanker Design and Model Testing
- Multiphase Flow Model Simulation
- Water in Oil Analyzer Development
- Three Phase Measurement System Development
- Artificial Lift Enhance Oil Recovery
- Rod Pump Efficiency Improvement

1978-1981

University of Texas at Austin, Research Associate

Research subjects:

Heat transfer through randomly packed spheres by Monte Carlo Method/
Thermal-hydraulic analysis and fuel element design in the blanket of Tandem Mirror Hybrid Reactor.

1979- 1980

General Atomic Company, San Diego, Research Engineer

Numerical analysis of transient thermal-hydraulic computer code for Gas Cooled Graphite Reactor

Publications and Patents

1. Thermal-hydraulic Design Comparison for the Tandem Mirror Hybrid Reactor Blanket, by Y. Sam Yang, C. P. Wong, and K. R. Schultz, Fourth ANS Topical Meeting on the Technology of Controlled Nuclear Fusion, October, 1980, King of Prussia, Pennsylvania

2. Monte Carlo Simulation of Thermal Conduction Through a Randomly Packed Bed of Spheres, by Sam Yang, and J. R. Howell, Proceeding of Seventh International Heat Transfer Conference, September, 1982, Munich, Germany
3. Radiative Heat Transfer Through a Randomly Packed Bed of Spheres by the Monte Carlo Method, by Sam Yang, J. R. Howell, and D. E. Klein, Journal of Heat Transfer, May, 1983
4. First-Year Pressure Ridge Consolidation Study, Sam Yang, ARCO Oil & Gas Research Report, RR 84-0070
5. Sea Ice Data Analysis for Offshore Alaska, Sam Yang, Arco Oil & Gas Research Report, RR 84-0085
6. Arctic Tanker Transiting Simulation System, Sam Yang, Arco Oil & Gas Research Report, RR 85-0131
7. Scaling Technique for Icebreaking: Tanker Resistance Force Prediction, Sam Yang, Arco Oil & Gas Research Report RR 86-0077
8. Computer Simulation of Large Icebreaking Tanker, by P. Serafin, A. Baird, and Sam Yang, "Marine Computers '86", Boston, 1985
9. Forecasting Bering Sea Ice Edge Behavior, by R. S. Pritchard, D. C. Mueller, D. J. Hanzlick, and Sam Yang, Journal of Geophysical Research, Vol. 95, NO. C1, Pages 775-788, January 15, 1990
10. The Design, Development, and Field Testing of a Water-Cut Meter based on a Microwave Technique, Sam Yang, Bentley Scott, and B. B. Cregger, 1990 SPE Annual Technical Conference and Exhibition, New Orleans
11. United States Patent Number: 4,776,210
Multiphase Fluid Flow Measurement Systems and Method
12. United States Patent Number: 4,862,060
Microwave Apparatus for Measuring Fluid Mixtures
13. United States Patent Number: 4,996,490
Microwave Apparatus and Method for measuring High Water-Cut in Oil-Water Mixture.
14. United States Patent Number: 5,157,339
Method for Measuring Water-Oil Mixtures with Relatively High Gas Content,

Edreauanna Fowler

Fowler received a Bachelor of Arts in Human Relations from The University of Oklahoma, and she earned her Master of Education in Administration from Lamar University. She began her career in education in 2011 as a tutor and facilitator for Project ReDirect in Port Arthur ISD. She later served as a chemistry teacher for Port Arthur ISD from 2012-14.

Currently, Fowler is a fifth-grade science teacher at Lakeview Elementary School in Port Arthur. During her time in this role, she was named Rookie Teacher of the Year in 2017 and Teacher of the Year in 2018. She has also served as the chair for the Lakeview Elementary School science fair since 2015 and is a member of the Science Teacher Association of Texas.

Fowler attends Antioch Missionary Baptist Church, where she has served in several roles, including as the director of youth ministry operations, the youth Sunday school superintendent and on the Scholarship Committee Board.

In January of 2021, the Jefferson County Commissioners Court appointed Edreauanna Fowler to the Spindletop Center Board of Trustees. She took the seat left vacant after her mother, Gladdie Fowler, who passed away on Dec. of 2020. Gladdie had represented Jefferson County on the Spindletop Center Board of Trustees for over 35 years.

Edreauanna R. Fowler

*525 Drummond St.
Port Arthur, TX 77640
409-543-2871
edreauanna@gmail.com*

Education

University of Oklahoma— Norman, OK

Bachelor of Arts – Human Relations

Lamar University – Beaumont, TX

Master’s Degree in Educational Administration

Completed with a 4.0 GPA

Professional Experience

Port Arthur Independent School District Port Arthur, TX August 2014-Present

5th Science Teacher at Lakeview Elementary

- Instructs fifth grade students in the area of science
- Prepared students of cumulative STAAR Science Assessment
 - *Experienced gains each year on STAAR Science Assessment (double digit gain after 1st year)
 - *Conducts FREE Science Saturday School Sessions each spring to provide extra hands-on enrichment for students who needed an extra push on passing the 5th grade science STAAR Exam.
- **Lakeview Elementary School Science Fair Chair (2015-Present)**
 - *Assisted with project set-up, score sheets, and securing judges from the community and industry for Science Fair that displayed over 300 projects for 3rd-5th graders at Lakeview Elementary
- **2017 Rookie Teacher of the Year**
 - *Honor bestowed upon a teacher who is early in their teaching career
 - *Chosen by the principal for dedication and service above and beyond what is expected
- **2018 Teacher of the Year**
 - *Honor bestowed upon a teacher who has been teaching 3 years or more
 - *Chosen by the faculty and staff for dedication and service above and beyond what is expected
- **Member of Lakeview Elementary School and Port Arthur ISD District Site Based Committees**
- **Selected to the 2017 and 2019 5th Grade Science STAAR Review Committee**
 - *One of 20 educators and administrators selected from hundreds of applicants across the state of Texas
 - *Chosen to review, analyze, and evaluate material and questions to be selected for the state 5th grade Science STAAR test.

Port Arthur Independent School District

Port Arthur, TX

August 2012-June 2014

Chemistry Teacher/Summer School Biology remediation

- Instructed tenth and eleventh grade students in the area of Chemistry
- Successfully guided students to a 97% passage rate on the Texas Assessment of Knowledge and Skills Test (TAKS)
- Instructed ninth and tenth graders in the summer in the area of Biology who made significant gains to pass their state mandated STAAR Test
- Built and maintained positive relationships with faculty, staff, parents, and students

Port Arthur Independent School District

Port Arthur, TX

September 2011-July 2012

Tutor/Facilitator for Project ReDirect and Summer STAAR EOC Institute

- Instructed students in various At-Risk situations
- Successfully helped over thirty students graduate from Memorial High School through Project ReDirect who were in danger of not graduating due to lacking three credits or more
- Instructed ninth graders in the area of English/Language Arts who made significant gains to pass their state mandated STAAR Test
- Built and maintained positive relationships with faculty, staff, parents, and students

Professional Presentations

- **Presenter at 2016 and 2017 Port Arthur ISD Instructional and Curriculum Conference**

- ***2016** - Taught and facilitated workshop to district elementary and secondary teachers on the logistics of Science Fair (how to select project topics, how to set up project boards, information needed to give to parents, necessity of journal and abstract, etc.)

- ***2017**- Taught and facilitated workshop to district elementary and secondary teachers on how to make your classroom and curriculum “come alive” in your classroom with activities, 5E Model lessons, and everyday procedures and strategies

- **Presenter at 2017, 2018, and 2019 Region V MiniCAST**

- ***2017**-Taught and facilitated a workshop to MiniCAST participants called SCIENCEPALOOZA (hands on lab stations, activities and instructional activities to get students involved and interested in learning science, Make It – Take It activities, etc.)

- ***2018**- Taught and facilitated a workshop for MiniCAST participants called YOU CAN TEACH THEM ALL (strategies, learning methods, ways of differentiating instruction and lab activities for different types of learners, etc)

- ***2019**-Taught and facilitated a workshop for MiniCAST participants called FANTASTIC FOLDABLES (learning how to use foldables in the classroom to assist with learning new material and reviewing material for assessments and tests)

- **Presenter at 2018 and 2019 Region V Curriculum Conference**

- ***2018** - Taught and facilitated workshop to Region V elementary and secondary teachers entitled JAZZED UP JOURNALS (methods and strategies on how to effectively journal in a science classroom.)

***2019-** Taught and facilitated workshop to Region V elementary and secondary teachers entitled VIVACIOUS VOCABULARY (teaching strategies and exciting educational games to teachers that they can take back to their students to enhance learning of vocabulary in any subject matter.)

Other Affiliations and Community Involvements

- Trustee for Spindletop Center
 - *Appointed in January 2021 to the Board of Trustees of Spindletop Center which serves Jefferson, Orange, Hardin, and Chambers counties who serves individuals with mental health, intellectual and developmental disabilities
- Member of the Antioch Missionary Baptist Church
 - *G4:12 Youth Ministry Co-Ordinator
 - Oversee and facilitate over 20 ministries that fall under the Youth Ministry umbrella
 - *Youth Sunday School Superintendent 1st and 2nd grade Sunday School Teacher
 - *Member of the Greeter's Ministry
 - *Scholarship Committee Board
- Eastern Progressive Missionary Baptist District Association – Congress of Christian Education High School Teacher
 - *Annual week-long session held in the summer that teaches young Christians how to live a better Christian and Godly life
- Owner and Operator of Fowler's A+ Tutoring
 - *Conduct private one on one tutoring sessions for students in grades K-12 in various subjects matters
 - *Specializes in science and math tutoring
 - * Students have a high success and passing rates on state mandated exams

Agenda Item: Personnel Report for August 2023

Board Meeting Date:

September 28, 2023

Committee: Executive

Background Information:

None

Supporting Documentation:

Personnel Report for August 2023

Recommended Action:

For Information Only

Personnel Report

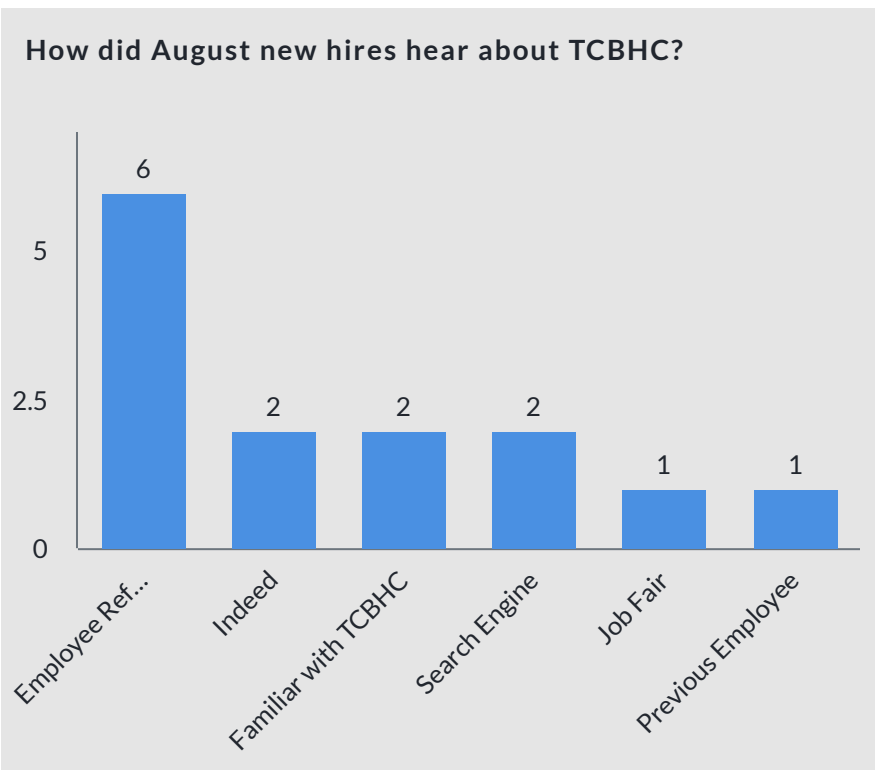
FY23 | August 2023



OVERVIEW

NEW HIRES August 9 POSITIONS YTD 186 POSITIONS	SEPARATIONS August 18 POSITIONS YTD 138 POSITIONS	Vacant Positions 87 Frozen Positions 0	Newly Created Positions 0 Total Budgeted Positions 487
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RECRUITING



APPLICANTS

August Total Applicants	483
YTD Applicants	4066

CURRENT OPENINGS

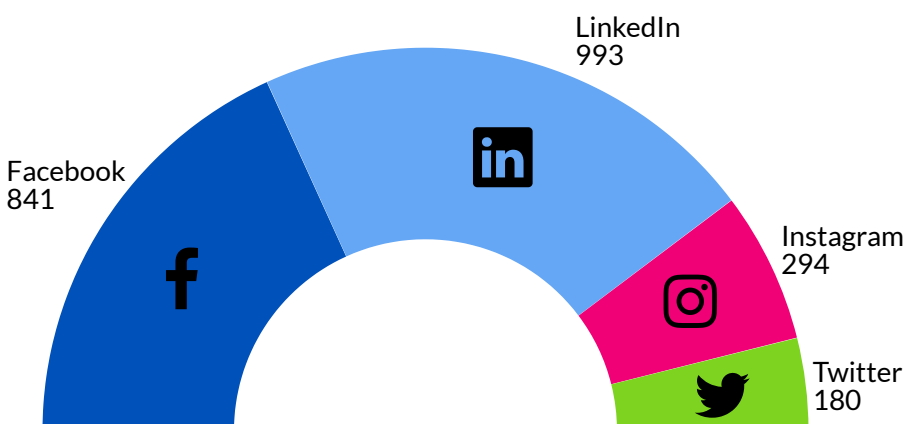
VACANCIES BY LOCATION

CONROE	58
PETC	9
CLEVELAND	8
LIBERTY	6
HUNTSVILLE	6
PORTER	0

RECRUITING EVENTS

PETC Job Fair	8/2/2023
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SOCIAL MEDIA FOLLOWERS



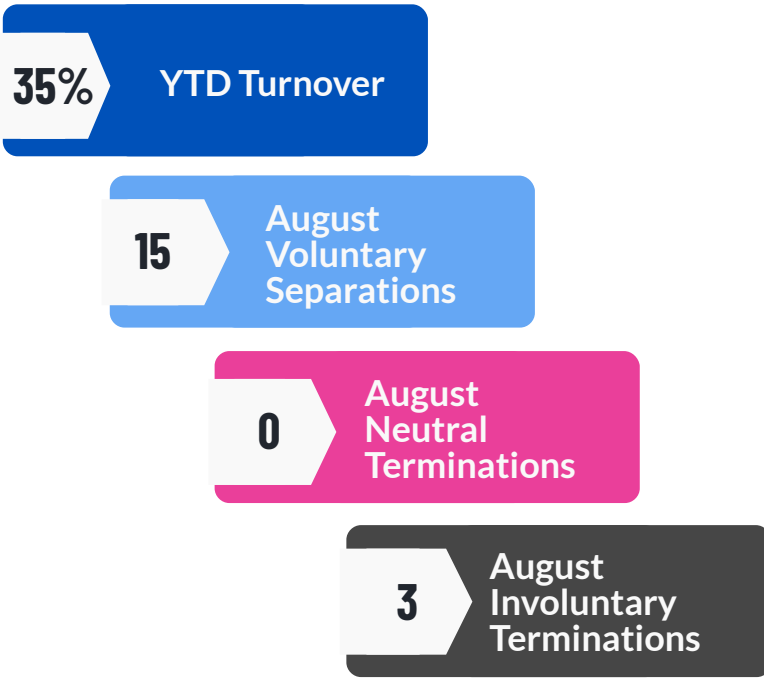
TOP 5 VACANCIES

Mental Health Specialist/Case Manager (Adult, Crisis and C&Y)	40
Direct Care Provider	9
Licensed Clinician	6
Licensed Vocational Nurse	5
Program Support Services Asst	4

Exit Data

FY23 | August 2023

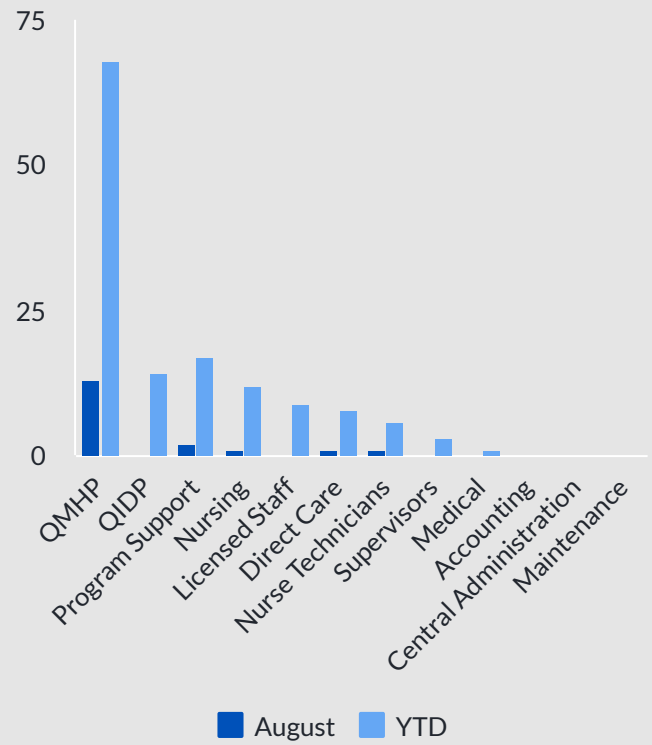
Exit Stats at a Glance



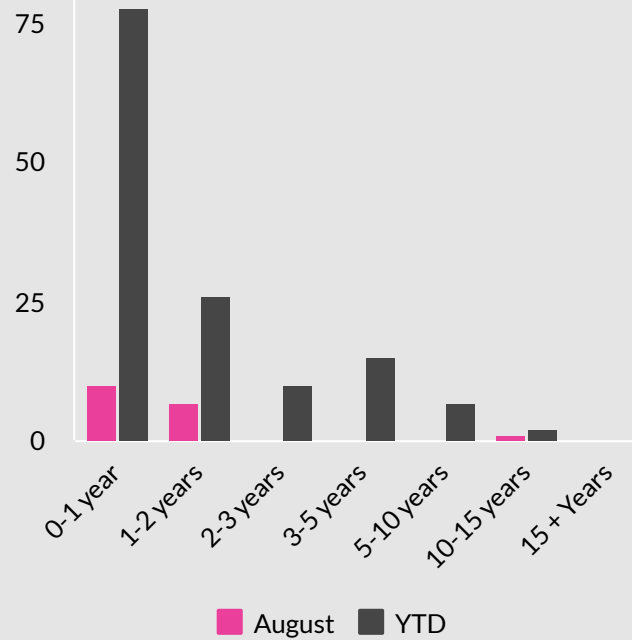
YTD Top Reasons for Separations

- 1 Another Job
- 2 Personal/Family, includes Relocating
- 3 Involuntarily Terminated
- 4 Better Pay
- 5 Health

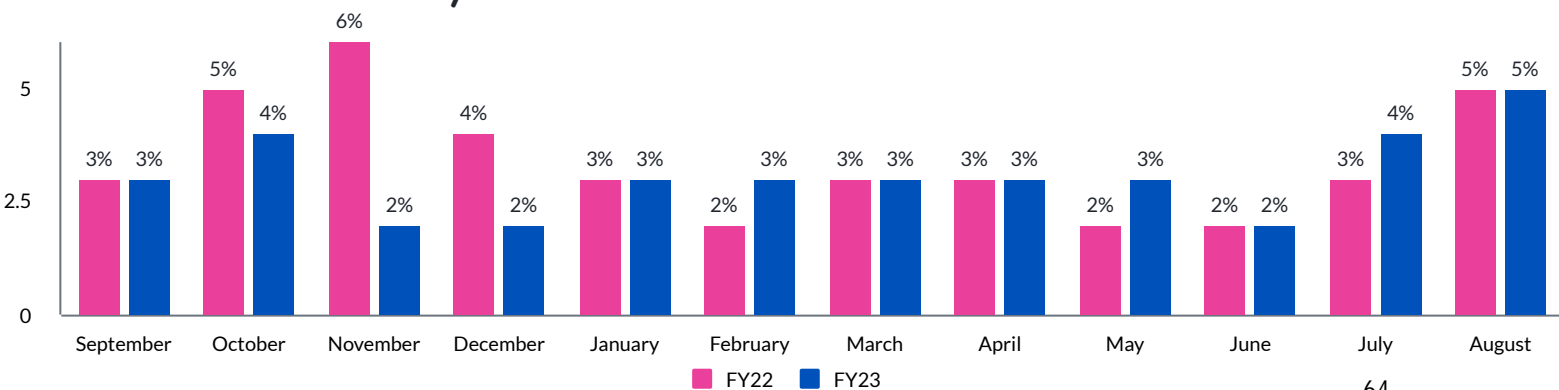
Separations by Category



Separations by Tenure



Turnover Rate by Month



Agenda Item: Texas Council Risk Management Fund Claims Summary as of August 2023

Board Meeting Date:
September 28, 2023

Committee: Executive

Background Information:

None

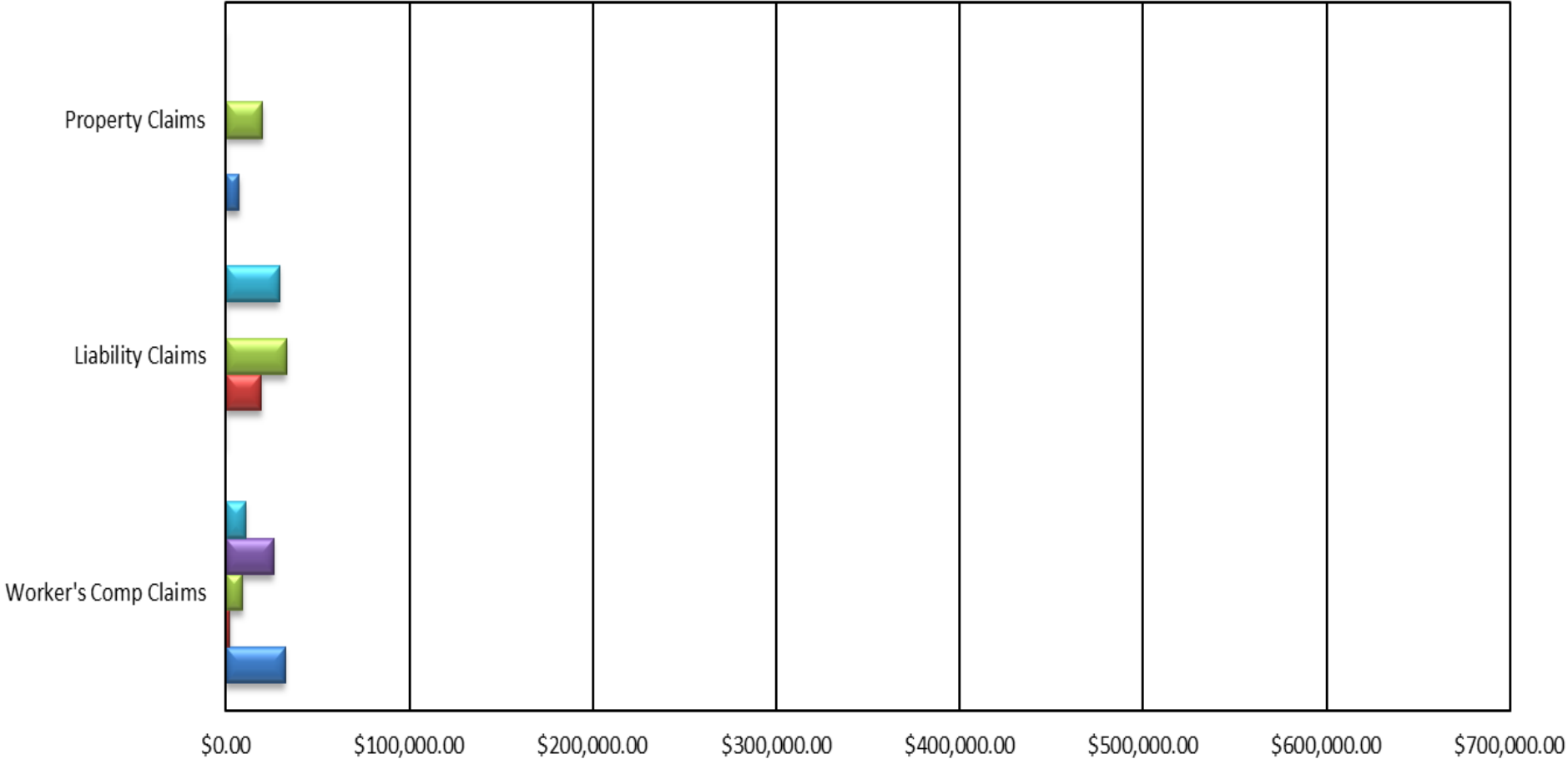
Supporting Documentation:

Texas Council Risk Management Fund Claims Summary as of August 2023

Recommended Action:

For Information Only

TCRMF Claims Summary August 2023



	Worker's Comp Claims	Liability Claims	Property Claims
2019	\$10,826.00	\$29,330.00	\$0.00
2020	\$26,111.00	\$0.00	\$0.00
2021	\$9,040.00	\$33,042.00	\$20,074.00
2022	\$2,215.00	\$19,417.00	\$0.00
2023	\$32,242.00	\$0.00	\$7,243.00

Agenda Item: Board of Trustees Reappointments and Oaths of Office

Board Meeting Date

September 28, 2023

Committee: Executive

Background Information:

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, 2025.

Reappointments:

- Gail Page, Liberty County
- Morris Johnson, Walker County
- Tracy Sorensen, Walker County
- Sharon Walker, Montgomery County

Oaths of Office will be recited at the Board meeting.

Supporting Documentation:

Oath of Office Recitation

Liberty County Trustee – Copy of Minutes from Liberty County Commissioner's Court Meeting dated June 13, 2023.

Walker County Trustees – Copy of Minutes from Walker County Commissioner's Court Meeting dated June 20, 2023.

Montgomery County Trustee – Copy of Minutes from Montgomery County Commissioner's Court Meeting dated June 27, 2023.

Recommended Action:

Recite Oaths of Office



LIBERTY COUNTY COMMISSIONERS COURT
Regular Meeting of Commissioners Court
June 13, 2023
9:00 a.m.
1923 Sam Houston St., Room 203 - Liberty, Texas 77575

1. CALL TO ORDER :

BE IT REMEMBERED that on TUESDAY, JUNE 12, 2023, at 9:03 A.M., Judge Jay Knight called to order a REGULAR SESSION meeting of the Commissioners Court of Liberty County, Texas, with the following members present, to-wit:

Hon. Jay Knight, County Judge
Hon. Bruce Karbowski, Commissioner, Precinct 1
Hon. Greg Arthur, Commissioner, Precinct 2
Hon. David Whitmire, Commissioner, Precinct 3
Hon. Leon Wilson, Commissioner, Precinct 4 (via Zoom)
Hon. Lee Haidusek Chambers, County Clerk (*Ex-officio*)

Other elected officials and county department executives present:

Hon. Bobby Rader, Sheriff
Hon. Matthew Poston, County Attorney (Kathrine McCarty representing)
Hon. Kim Harris, Treasurer
Hon. Richard Brown, Tax Assessor-Collector
Dwayne Gott, County Auditor
Harold Seay, County Purchaser
Melinda Soliday, County Engineer
Bill Hergemeuller, Fire Marshal/Emergency Management

Having a quorum established, the Liberty County Commissioners Court considered the following matters:

2. PLEDGE TO THE U.S. FLAG AND TEXAS FLAG :

PLEDGES TO U.S. AND TEXAS FLAGS LED BY CHILDREN FROM THE LIBERTY ELEMENTARY SCHOOL - DayShai Nevels

3. INVOCATION :

PRAYER LED BY COUNTY JUDGE JAY KNIGHT.

4. NOTICES AND PROCLAMATIONS :

1. NOTICES AND PROCLAMATIONS

TEXAS HISTORICAL COMMISSION AWARDED THE 2022 DISTINGUISHED SERVICE AWARD TO THE LIBERTY COUNTY HISTORICAL COMMISSION. THIS AWARD AFFIRMS LCHC APPOINTEES FOR MANAGING OUR WELL ROUNDED HISTORY AND PRESERVATION RELATED PROGRAMS THAT ENRICH OUR TEXAS COMMUNITY

Agenda Attachments

1. 6-13-2023 item 4.1 notices.proclamations.pdf

2. NOTICES AND PROCLAMATIONS

PROCLAMATION - DECLARING JUNE 2023 AS ELDER ABUSE AWARENESS MONTH IN LIBERTY COUNTY, TEXAS

Agenda Attachments

1. 6-13-2023 item 8.17 veteran grant.pdf

MOTION TO APPROVE THE VETERANS' GRANT AWARD OF \$50,000.00 CONTINUED FOR 2023-2024 FROM TEXAS VETERANS COMMISSION FUND FOR VETERANS ASSISTANCE

MOTION BY: Greg Arthur
SECONDED BY: Leon Wilson
VOTED AYE: Bruce Karbowski, Greg Arthur, Leon Wilson
VOTED NO: None
ABSTAINED FROM VOTE: Jay Knight
ABSENT FOR VOTE: David Whitmire
THE MOTION PASSED.

18. COUNTY JUDGE JAY KNIGHT

CONSIDER AND APPROVE THE REAPPOINTMENT OF GAIL PAGE TO THE TRI-COUNTY BEHAVIORAL HEALTHCARE BOARD OF TRUSTEES FOR A TWO-YEAR TERM

Agenda Attachments

1. 6-13-2023 item 8.18 tcbh.page.pdf

MOTION TO APPROVE THE REAPPOINTMENT OF GAIL PAGE TO THE TRI-COUNTY BEHAVIORAL HEALTHCARE BOARD OF TRUSTEES FOR A TWO-YEAR TERM

MOTION BY: Greg Arthur
SECONDED BY: Leon Wilson
VOTED AYE: Bruce Karbowski, Greg Arthur, Leon Wilson
VOTED NO: None
ABSTAINED FROM VOTE: Jay Knight
ABSENT FOR VOTE: David Whitmire
THE MOTION PASSED.

19. COUNTY ATTORNEY MATTHEW POSTON / KATHRINE MCCARTY

CONSIDER AND APPROVE THE EXECUTION OF TCEQ FORM NOTICE OF INTENT TO OPERATE A CITIZEN'S COLLECTION STATION FOR AUDIT PURPOSES

Agenda Attachments

1. 6-13-2023 item 8.19.pdf

MOTION TO APPROVE THE EXECUTION OF TCEQ FORM NOTICE OF INTENT TO OPERATE A CITIZEN'S COLLECTION STATION FOR AUDIT PURPOSES FOR THE DAYTON WASTE DISPOSAL SITE

MOTION BY: Bruce Karbowski
SECONDED BY: Greg Arthur
VOTED AYE: Bruce Karbowski, Greg Arthur, Leon Wilson
VOTED NO: None
ABSTAINED FROM VOTE: Jay Knight
ABSENT FOR VOTE: David Whitmire
THE MOTION PASSED.

20. PURCHASING AGENT HAROLD SEAY

CONSIDER AND APPROVE THE FOLLOWING VEHICLES AS SURPLUS AND APPROVE FOR TRADE INS FOR NEW VEHICLES FOR THE LIBERTY COUNTY SHERIFF'S OFFICE :

BTJ3671 / 1FMEU62E76UA18918 2006 WHITE FORD EXPLOR



Lee H Chambers



**MINUTES for Walker County Commissioners Court
REGULAR SESSION
Tuesday, June 20, 2023, 9:00 a.m.**

CALL TO ORDER

Be it remembered, Commissioners Court of Walker County was called to order by County Judge, Colt Christian at 9:00 a.m. in Commissioners Courtroom, 1st Floor, 1100 University Avenue, Huntsville Texas.

County Judge	Colt Christian	Present
Precinct 1, Commissioner	Danny Kuykendall	Present
Precinct 2, Commissioner	Ronnie White	Present
Precinct 3, Commissioner	Bill Daugette	Present
Precinct 4, Commissioner	Brandon Decker	Present

County Judge, Colt Christian 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

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

CONSENT AGENDA

1. Approve minutes from Commissioners Court Regular Session on June 5, 2023.
2. Approve Disbursement Report for the period 6/1/23 – 6/8/23.
3. Approve payment of claims and invoices submitted for payment.
4. Approve the membership applications of George Clogston to the Walker County Historical Commission.
5. Receive the Texas Historical Commission 2022 Distinguished Service Award for the Walker County Historical Commission.
6. Receive Financial Information as of June 13, 2023, for the fiscal year ending September 30, 2023.
7. Receive Walker County Appraisal District monthly tax collection report for May 2023.
8. Receive District Clerk Report for May 2023.
9. Receive Justice of the Peace Precinct 1 Report for April 2023.
10. Receive Justice of the Peace Precinct 2 Report for April 2023.
11. Receive Justice of the Peace Precinct 3 Report for April 2023.
12. Receive Justice of the Peace Precinct 4 Report for April 2023.
13. Receive Employee Injury Report.

*Commissioner White asked to pull items 1, 3 and 13 for discussion.
Judge Christian asked to pull item 5 for discussion.*

MOTION: Made by Commissioner Daugette to APPROVE Consent Agenda with items 1, 3, 5 and 13 pulled for discussion.

SECOND: Made by Commissioner Decker.

VOTE: Motion carried unanimously.

- (1) Approve minutes from Commissioners Court Regular Session on June 5, 2023:
Commissioner White stated item 34 needs to include public auction and individual. County Clerk, Kari French will update.

MOTION: Made by Commissioner White to APPROVE minutes from Commissioners Court Regular Session on June 5, 2023 with addition.

SECOND: Made by Commissioner Kuykendall.

VOTE: Motion carried unanimously.

- (2) Approve payment of claims and invoices submitted for payment

Auditor

19. Discuss and take action to approve hiring of temporary employee in County Auditor Department to be paid from funds available in salary and benefit budget.

Patricia Allen presented information.

MOTION: Made by Commissioner White to APPROVE to approve to hire a temporary employee in the County Auditor Department to be paid from funds available in salary and benefit budget.

SECOND: Made by Commissioner Daugette.

VOTE: Motion carried unanimously.

Maintenance

20. Discuss and take action on API Deficiency Inspection reports.

Larry Whitener presented information.

MOTION: Made by Commissioner Kuykendall to APPROVE to take action on API Deficiency Inspection reports in a total amount of \$ 10,990.33, to be paid from Facilities Project fund.

SECOND: Made by Judge Christian.

VOTE: Motion carried unanimously.

County Clerk

21. Discuss and take action to approve County Clerk Fiscal Year 2024 - Remote Birth Access Contract with Texas Department of State Health Services (DSHS).

Kari French presented information.

MOTION: Made by Commissioner Daugette to APPROVE to approve County Clerk Fiscal Year 2024 - Remote Birth Access Contract with Texas Department of State Health Services (DSHS).

SECOND: Made by Commissioner Decker.

VOTE: Motion carried unanimously.

Commissioners Court

22. Discuss and take action on the reappointment of Morris Johnson and Judge Tracy Sorensen to the Tri-County Behavioral Healthcare Board of Trustees.

Judge Christian presented information.

MOTION: Made by Judge Christian to APPROVE to take action on the reappointment of Morris Johnson and Judge Tracy Sorensen to the Tri-County Behavioral Healthcare Board of Trustees.

SECOND: Made by Commissioner White.

VOTE: Motion carried unanimously.

23. Discussion and presentation of proposed Walker County Strategic Plan.

Judge Christian presented information.

ACTION: *Presentation was presented to the Court.*

24. Discuss and take action on distribution of SETH grant funds.

Judge Christian presented information. These funds have no guidelines, they just ask that we use it for low-income individual family's seniors and veterans. There was discussion about the Court changing it to a more Community Engagement distribution. There was discussion on sending the applications the Court has to see if they would be acceptable.

MOTION: Made by Commissioner Daugette to NOT distribute the SETH grant funds and recommend that the County search for needed assistance at the individual level.

There was more discussion regarding the funds and distribution for an individual and not an organization.

32. Discuss and take action on Mark and Dana Smith request for variance to Section 5 of the Walker County Subdivision Regulations regarding amending plats to be allowed to proceed under Section 232.010 of the Texas Local Government Code for conveyance of portions of platted lot via metes and bounds description for Lot 75, Block 7 of the Harmon Creek Ranchettes Subdivision, John Crane Survey, A-14 - North Fork Lane - Pct. 3.

MOTION: Made by Commissioner Dauge to APPROVE Mark and Dana Smith request for variance to Section 5 of the Walker County Subdivision Regulations regarding amending plats to be allowed to proceed under Section 232.010 of the Texas Local Government Code.

SECOND: Made by Commissioner White.

VOTE: Motion carried unanimously.

33. Discuss and take action on Brian and Emily Wright request for variance to On-Site Sewage Facility Regulations of Walker County Texas regarding Permit Application # 2023-0116 - Sky Oak Road - Pct. 2.

MOTION: Made by Commissioner White to APPROVE Brian and Emily Wright request for variance to On-Site Sewage Facility Regulations of Walker County Texas regarding Permit Application # 2023-0116.

SECOND: Made by Commissioner Decker.

VOTE: Motion carried unanimously.

ACTION: County Judge, Colt Christian took a recess at 9:58 a.m.

ACTION: County Judge, Colt Christian reconvened back into session at 10:08 a.m.

BUDGET WORKSHOP

ACTION: Workshop began at 10:08 a.m.

County Auditor, Patricia Allen presented an overview of requests the County is looking from Departments. There was discussion among the Court. There was discussion about the salary requests to go thru the Salary Committee and then brought back to Court. There was discussion regarding the Departments needing to come to Court to present their requests and answer questions from the Court.

ACTION: Workshop closed at 12:40 p.m.

ACTION: County Judge, Colt Christian adjourned the meeting at 12:40 p.m.

I, Kari A. French, County Clerk of Walker County, Texas, do hereby certify that these Commissioners Court Minutes are a true and correct record of the proceedings from the Meeting on June 20, 2023.

Kari A. French

Walker County Clerk, Kari A. French



Colt Christian 7/23/23

Walker County Judge, Colt Christian

Date Minutes Approved by Commissioners Court

FILED FOR RECORD
At 9:03 o'clock A.M.

JUL 03 2023

KARI FRENCH, COUNTY CLERK
WALKER COUNTY, TEXAS
K. French Deputy

#2 9A1

JUL 25 2023

COMMISSIONERS COURT DOCKET
JUNE 27, 2023
REGULAR SESSION

THE STATE OF TEXAS

COUNTY OF MONTGOMERY

BE IT REMEMBERED that on this the 27th day of June, 2023, 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 | Mark Keough |
| Commissioner, Precinct 1 | Robert Walker |
| Commissioner, Precinct 2 | Charlie Riley |
| Commissioner, Precinct 3 | James Noack |
| Commissioner, Precinct 4 | Matt Gray |
| County Clerk | L. Brandon Steinmann |

MOMENT OF SILENCE OBSERVED IN MEMORY OF CAPTAIN KENNETH H. DUNLAP.

INVOCATION GIVEN BY Judge Mark J. Keough.

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

CITIZENS – AGENDA ITEM 7

No citizens addressed the court at this time.

PAYROLL CHANGE REQUEST FORM 59 WAS REMOVED FROM HUMAN RESOURCES PACKET, AGENDA ITEM 8I1.

AGENDA ITEM 8B4 WAS MOVED TO OPEN SESSION. SEE MOTION 3 FOR COURT ACTION.

	SMITH, LISA/ PT DO COMMISSARY 1	TRANSFERRED/ REPLACEMENT FOR AGUILAR, VANESSA	06/24/2023
	TUNSTALL, JAROD/ DET-SO PTL W-11	PROMOTION/ REPLACEMENT FOR ZIESE, ZACHARIAH	06/24/2023
	VEITH, CODY/ DO-SO JAIL-164	DISCHARGED	06/07/2023
	WARNER, DALLAS/ DISPATCH- SO-13	NEW HIRE/ REPLACEMENT FOR RABAN, CHARLES	06/24/2023
	WHAPHAM, ASHLEY/ DISPATCH-SO-42	TRANSFERRED/ REPLACEMENT FOR STORINO, GEENA	06/24/2023
	WOOD, TRAVIS/ SPC-SO ADM-4	TRANSFERRED/ REPLACEMENT FOR HUDSON, THOMAS	06/24/2023
	ZIESE, ZACHARIAH/ DET-SO SVU-6	TRANSFERRED/ REPLACEMENT FOR LAMBERT, THOMAS	06/24/2023
TAX ASSESSOR- COLLECTOR	BANE, ERICA/ QC MGR-TAX	RETIRED	06/30/2023
	BAUERKEMPER, MELONEY/ DEPUTY SPEC I	RESIGNED	06/20/2023
TRAFFIC OPERATIONS	HIBBARD, PATRICK/ SIGNAL TECH I-TRAF	DISCHARGED	06/09/2023

12. LIST ACCEPTED of employees eligible for bilingual stipend effective July 8, 2023.

COUNTY JUDGE – AGENDA ITEMS 8J1-2

- J1. RE-APPOINTMENT APPROVED of Sharon Walker to the Tri County Behavioral Healthcare Board of Trustees for a 2-year term expiring August 31, 2025.

BY: J. Brock Allen
COUNTY CLERK

[Signature]
COUNTY JUDGE



ADMINISTERING THE OATH OF OFFICE

Please raise your right hand and repeat after me...

I, STATE YOUR NAME,

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.

ADMINISTERING THE 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

Board Meeting Date

September 28, 2023

Committee: Executive

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 2023 Regular and Special Called Board Meetings

Board Meeting Date

September 28, 2023

Committee: Executive

Background Information:

None

Supporting Documentation:

Board of Trustees Attendance Analysis for FY 2023

Recommended Action:

For Information Only

Board Member	Regular Meetings	Attendance Percentage for Regular Meetings	Special Called Meetings	Attendance Percentage for Special Called Meetings	Total Attendance
Patti Atkins	9/10	90%	-	-	90%
Tracy Sorensen	7/10	70%	-	-	70%
Sharon Walker	10/10	100%	-	-	100%
Richard Duren	10/10	100%	-	-	100%
Morris Johnson	10/10	100%	-	-	100%
Gail Page	9/10	90%	-	-	90%
Jacob Paschal	6/10	60%	-	-	60%
Carl Williamson	6/6	100%	-	-	100%
Tim Cannon	8/10	80%	-	-	80%

Summary of Attendance

Total Regular Meetings Held:

2021

8

2022

9

2023

10

Average Attendance:

85%

78%

79%

Total Special Called Meetings Held:

0

0

0

Average Attendance:

N/A

N/A

N/A

Total Number of Meetings Held:

8

9

10

Average Attendance:

85%

78%

79%

Average Number of Members Present:

6.75

6.23

7.50

Agenda Item: Ratify HHSC Mental Health Coordinated Specialty Care Grant Program Contract No. HHS001329300021, First Episode Psychosis

Board Meeting Date

September 28, 2023

Committee: Business

Background Information:

Tri-County Behavioral Healthcare contracted with the Health and Human Services Commission for early psychosis identification and service provision under the Coordinated Specialty Care Implementation grant initiative in January of 2019.

The First Episode Psychosis program (FEP) is designed to provide early interventions to persons who are having their first psychotic break and to provide interventions which can significantly alter the long-term impact of brain damage that is done during a psychotic break. Tri-County will provide FEP services for individuals ranging in age from 15-30 that meet the diagnostic criteria.

This amendment is effective September 1, 2023 and will continue the program until August 31, 2025. The amendment results in the addition of \$600,000 for the two-year period. At \$300,000 per year, the grant loses a small amount overall each year (\approx \$10,000) if we are fully staffed.

The Executive Director has signed this contract in advance of the Board meeting to prevent a delay in contract funding.

Supporting Documentation:

Contract Amendment will be Available for Review at the Board Meeting

Recommended Action:

Ratify HHSC Mental Health Coordinated Specialty Care Grant Program Contract No. HHS001329300021, First Episode Psychosis

Agenda Item: Approve FY 2024 Dues Commitment and Payment Schedule for the Texas Council

Board Meeting Date

September 28, 2023

Committee: Business

Background Information:

The Texas Council of Community Centers serves as the trade organization for the 39 Texas Community Centers. The Council is supported by dues from member centers which are based on the size of the budget of the Center.

The Texas Council Operating Budget for FY 2024 was approved at the Texas Council Board meeting on August 19, 2023.

Total dues for Tri-County in FY 2024 were increased by \$9,042 from \$40,445 to \$49,487. The Center will pay this fee in one installment.

Supporting Documentation:

Cover Memorandum from Lee Johnson, CEO

FY 2024 Dues Commitment and Payment Schedule

Recommended Action:

Approve FY 2024 Dues Commitment and Payment Schedule for the Texas Council



MEMO
September 1, 2023

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

FROM: Lee Johnson 
Chief Executive Officer

SUBJECT: FY 2024 Commitment of Dues for
Texas Council of Community Centers

Please find attached the FY 2024 (September 1, 2023 – August 31, 2024) 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 by the Texas Council Board of Directors at the August 19, 2023 annual board meeting. To assist with local discussions, we include the following information:

- Budget Overview
- FY 2024 Budget (with side-by-side comparison to FY 2023)
- FY 2024 Dues Comparison to FY 2023 Dues
- FY 2024 Commitment of Dues Payment Form

If you have any questions, please contact Mike Horne at mhorne@txcouncil.com or Tara Brown at tbrown@txcouncil.com.

cc: Texas Council Board Delegate

FY 2024 Commitment of Dues Payment for Texas Council of Community Centers

CENTER: Tri-County Behavioral Healthcare

The dues for FY 2024 have been calculated as follows:

Total Dues	\$51,570.00
LESS: Credit for Texas Council Risk Management Fund Members... (\$2,083.00)	
Net Dues	\$49,487.00

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 2023	_____	_____	<u>\$49,487.00</u>
October	_____	_____	
November	_____	_____	
December	_____	_____	
January 2024	_____	_____	
February	_____	_____	
March	_____	_____	
April	_____	_____	
May	_____	_____	
June	_____	_____	
July	_____	_____	
August	_____	_____	
TOTALS	\$ _____	\$ _____	\$ <u>49,487.00</u>

Invoice for each payment required? Yes No

We appreciate your prompt and timely payment!

APPROVED:

Date: _____

(Authorized Signature)

Agenda Item: Reappoint Tri-County's Consumer Foundation Board of Directors

Board Meeting Date

September 28, 2023

Committee: Business

Background Information:

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.

Each of the following members have an expiring term and have 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, 2025.

- Richard Duren
- Philip Dupuis
- Matthew Blake
- Lynn Carr

Supporting Documentation:

None

Recommended Action:

Reappoint Tri-County's Consumer Foundation Directors Richard Duren, Philip Dupuis, Matthew Blake, and Lynn Carr to a Two-Year Term Expiring on August 31, 2025

Agenda Item: Approve Bond Financing for 402 Liberty Street, Cleveland, Texas

Board Meeting Date

September 28, 2023

Committee: Business

Background Information:

At the August 31, 2023 Board of Trustees meeting, the Board approved the following resolution:

Resolved: That the Board approve financing for 402 Liberty Street, Cleveland, Texas with First Financial Bank; authorize Evan Roberson to negotiate loan documents with First Financial Bank with assistance from Jackson Walker and authorize Evan Roberson to sign all necessary documents.

Since this time, staff have had the opportunity to explore bond financing options through Municipal Capital Markets Group, Inc., which was founded in 1989. The difference in rates for bond issuance vs. conventional financing are significant (4.7% APR vs. 6.25% APR). In addition, the bond financing would not require the Center to contribute the out of pocket cash up front contribution to the project of 30% down, and the cash can be available to be invested to earn interest while rates continue to be high. The overall the cost of the bond financing is less than the conventional loan over the 25-year term.

After review, staff are recommending that the Board approve a change in finance strategy for 402 Liberty Street, Cleveland Texas from First Financial Bank to bond funding with Municipal Capital Markets Group, Inc.

Further information will be provided at the meeting.

Supporting Documentation:

Bond Financing vs. Conventional

Recommended Action:

Approve Change in Financing for 402 Liberty Street in Cleveland, Texas to Bond Financing with Municipal Capital Markets Group, Inc.

BOND ISSUE:			Conventional Loan:		
Construction Cost	\$	11,937,962		\$	12,592,000
DSRF	\$	434,030			
Origination Fee	4.0%	\$ 511,670		0.25%	\$ 31,480
Financed Amount	100%	\$ 12,883,662		70%	\$ 8,836,436
Term		25 years			25 years
Rate		4.70%			6.25%
		Annual			Annual
Payment		\$886,836.52			\$707,750.98
					Monthly
					\$58,979.25
Total Interest Over Term		\$ 9,287,251			\$ 8,857,338
Required Cash Deposit		\$443,418			
Deposit Rate	4.70%	\$ (521,016)			
DSRF - Applied to the last 6 months payments of the loan.		\$ (434,030)			
Cost of Finance		<u>\$ 8,332,204</u>			<u>\$ 8,857,338</u>
Difference to Conventional Loan		\$ (525,134)			

Possible Interest Earned On Cash

Bond Financing			1st Financial Option		
Amount of Funds not put Down on Facility Financing					
Cash Savings Deposit	\$	2,274,544		\$	1,000,000
Deposit Rate	5.31%	\$ (3,019,457)		4.25%	\$ (1,062,500)

Agenda Item: Approve Purchase of a Used Generator for 402 Liberty Street, Cleveland, Texas

Board Meeting Date

September 28, 2023

Committee: Business

Background Information:

At each of our new service facilities, we are wiring the facility for an emergency generator. For the Cleveland Service Facility at 402 Liberty Street, we plan to purchase a 600KW natural gas-powered generator to back up the entire facility.

Mike Duncum has located a 15-year-old generator with a Cummins Engine that only has 177 hours of use. The price of this generator is \$250,000 which is substantially less than a new generator of this size which would be between \$577,178 and \$666,600. This used generator would have a guarantee to get it up and running, but will not have any warranty thereafter; however, an independent company has assessed and tested the generator and it has passed this inspection.

The Center purchased a used generator for the Sgt. Ed Holcomb site in Conroe and it has performed well.

In addition to the cost of the generator itself, it would cost \$5,000 to transport it to Texas, \$4,000 to store it for 10 months, \$1,750 to set it in place, and there would be an additional cost for the appropriate transfer switch of \$15,000, bringing the total to: \$275,750.

The cost of this generator can be included as part of the facility financing.

Staff recommend purchasing this generator rather than buying a new one at almost double the price.

Supporting Documentation:

Generator Specifications Sheet

Recommended Action:

Approve Purchase of a Used Generator for 402 Liberty Street, Cleveland, Texas



Cummins GFLA Standby Natural Gas Generator

Call for Pricing

KW:600

Manufacture Year:2009

Hours:177

Dims and Weight:365in x 102in x 136in
20,000 lbs

Item Number:18812

Description:

Cummins GTA50 CC Natural Gas Engine

600 kW Standby

PowerCommand® Control 3.3

175 Hours Since New

Load Bank Tested

See All [Cummins Generators For Sale >](#)



Engine Details

Engine Manufacturer: Cummins

Engine Model: GTA50 CC

Engine HP: 949

Engine RPM: 1,800

Engine Block Heater: No

Generator Set Details

Package Manufacturer: Cummins

Model: 600GFLA

S/N: M09G044501

Enclosure Type: Sound Attenuated

Amps: 1200 A

Generator End Details

Generator Manufacturer: Stamford

KW Rating: 600

KVA: 750

Voltage: 240/480V

Power Factor: 0.8

Frequency: 60 Hz

Phase: 3 Phase

Phase Selector Switch: No

Generator RPM: 1800

Agenda Item: Review August 2023 Preliminary Financial Statements

Board Meeting Date

September 28, 2023

Committee: Business

Background Information:

None

Supporting Documentation:

August 2023 Preliminary Financial Statements

Recommended Action:

For Information Only

August 2023 Preliminary Financial Summary

Revenues for August 2023 were \$3,150,126 and operating expenses were \$3,981,193 resulting in a loss in operations of \$831,067. Capital Expenditures and Extraordinary Expenses for August were \$784,331 resulting in a loss of \$1,615,399. Total revenues were 115.56% of the monthly budgeted revenues and total expenses were 94.60% of the monthly budgeted expenses (difference of 20.96%).

Year to date revenues are \$46,566,545 and operating expenses are \$41,784,399 leaving excess operating revenues of \$4,782,146. YTD Capital Expenditures and Extraordinary Expenses are \$3,095,435 resulting in a gain YTD of \$1,686,711. Total revenues are 99.83% of the YTD budgeted revenues and total expenses are 99.41% of the YTD budgeted expenses (difference of .42%).

REVENUES

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

Revenue Source	YTD Revenue	YTD Budget	% of Budget	\$ Variance
ARPA Walker County	343,180	357,769	95.92%	14,589
Title XIX HCS/IDD	1,848,770	1,894,377	97.59%	45,607
ARPA Montgomery Database Development	651,625	642,210	101.46%	12,584
ARPA Montgomery Essential Workers	1,091,831	1,122,544	97.26%	30,713
ARPA Montgomery Crisis	2,294,290	2,358,590	97.27%	64,299
SAMSHA CCBHC-E	1,316,333	1,328,660	99.07%	12,326
SAMHSA CMHC	1,818,414	1,830,348	99.35%	11,933
HHSC – MH First Aid	111,242	161,050	69.07%	49,807

ARPA Walker County, ARPA Montgomery Database Development, ARPA Montgomery Essential Workers and ARPA Montgomery Crisis – These line items are all for ARPA funded programs. ARPA is based on a calendar year budget so the variances for these lines will carry over into FY 2024. The new budgets for ARPA programs begin on January 1st and will be reflected in the first FY 24 Budget revision.

Title XIX HCS/IDD – This line item is for our HCS program. This line has come in under the projected budget due to several clients being hospitalized over the past few months. We have also had a change in the billing process, moving from the CARE system to TMHP for billing and payments. To ensure all payments have been received we will be doing a complete reconciliation of the program before the financial statements are finalized.

SAMHSA CCBHC-E – This is a grant that is funded for two years. We have been under budget for the entire grant period mainly due to staff shortages. SAMHSA has approved this grant for an eight-month cost extension to spend out the remaining funds of the original grant.

SAMHSA CMHC – This is also grant funded for a two-year period. We have applied for the cost extension for this grant and we have not received approval as of this time.

HHSC – MH First Aid – This is the Mental Health First Aid program that funds Outreach and also training for school employees to receive certified training in Mental Health First Aid. We have under spent in the training part of the program. The new program year we will be reimbursed for training anyone who receives Mental Health First Aid training, and not be limited to school employees. We should see the revenue increase in FY 24.

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
Consumer Services – General	329,133	266,822	123.35%	62,311
Contract Services – Foster Care	739,445	726,173	101.83%	13,272
Employee Recruitment	18,873	4,900	385.16%	13,973
Fixed Assets – Construction in Progress	458,485	400,000	114.62%	58,485
License Fees - Software	765,771	736,956	103.91%	28,815

Consumer Services - General – This line item reflects the end of year spending that was approved by the UTSA Veterans program to spend out as much as possible of the remaining funds before year end. This was a last-minute change to the program. We have an increase in revenue to offset this overage in the expense line.

Contract Services – Foster Care – This line item is for Foster Care services for the HCS program. This line is over due to changing the Contractors billing cycle to be the calendar month instead of the 25th to the 24th. This month was the change over month and had an additional week of expense.

Employee Recruitment – This line item reflects the cost of paying a recruiting service a fee for searching for a new Psychiatrist.

Fixed Assets – Construction in Progress – This line item is over budget due to a last-minute invoice for the Cleveland project that didn't make it into the budget revision, but was an expected cost to the project.

License Fee – Software – This line item continues to have additional programs purchased that are associated with the implementation of the new clinical software, Streamline. The programs are required for integration to our existing systems to be able to transition smoothly. Now that we are up and running this line should calm down and be at a new more consistent level.

**TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended August 2023
Preliminary**

ASSETS	TOTALS COMBINED FUNDS August 2023	TOTALS COMBINED FUNDS July 2023	Increase (Decrease)
CURRENT ASSETS			
Imprest Cash Funds	2,100	2,050	50
Cash on Deposit - General Fund	7,442,513	11,341,488	(3,898,975)
Cash on Deposit - Debt Fund			-
Accounts Receivable	4,987,631	8,012,047	(3,024,416)
Inventory	(1,141)	(289)	(852)
TOTAL CURRENT ASSETS	12,431,103	19,355,296	(6,924,193)
FIXED ASSETS	21,487,943	21,487,943	-
OTHER ASSETS	305,286	294,002	11,284
TOTAL ASSETS	\$ 34,224,332	\$ 41,137,241	\$ (6,912,908)
LIABILITIES, DEFERRED REVENUE, FUND BALANCES			
CURRENT LIABILITIES	2,073,722	2,133,208	(59,486)
NOTES PAYABLE	694,011	694,011	-
DEFERRED REVENUE	82,367	4,779,173	(4,696,806)
LONG-TERM LIABILITIES FOR			
First Financial Conroe Building Loan	9,658,864	9,752,715	(93,851)
Guaranty Bank & Trust Loan	1,732,388	1,743,867	(11,479)
Lease Liability	448,112	448,112	-
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR			
General Fund	1,686,711	3,855,663	(2,168,951)
FUND EQUITY			
RESTRICTED			
Net Assets Reserved for Debt Service	(11,839,364)	(11,944,694)	105,330
Reserved for Debt Retirement			-
COMMITTED			
Net Assets - Property and Equipment	21,488,095	21,488,095	-
Reserved for Vehicles & Equipment Replacement	613,711	613,711	-
Reserved for Facility Improvement & Acquisitions	1,163,802	1,163,802	-
Reserved for Board Initiatives	1,500,000	1,500,000	-
Reserved for 1115 Waiver Programs	502,677	502,677	-
ASSIGNED			
Reserved for Workers' Compensation	274,409	274,409	-
Reserved for Current Year Budgeted Reserve	74,000	61,667	12,333
Reserved for Insurance Deductibles	100,000	100,000	-
Reserved for Accrued Paid Time Off	(694,011)	(694,011)	-
UNASSIGNED			
Unrestricted and Undesignated	4,664,837	4,664,837	-
TOTAL LIABILITIES/FUND BALANCE	\$ 34,224,332	\$ 41,137,241	\$ (6,912,909)

**TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended August 2023**

ASSETS	Preliminary General Operating Funds	Memorandum Only Final August 2022
CURRENT ASSETS		
Imprest Cash Funds	2,100	1,750
Cash on Deposit - General Fund	7,442,513	5,629,875
Cash on Deposit - Debt Fund	-	-
Accounts Receivable	4,987,631	6,824,724
Inventory	(1,141)	1,649
TOTAL CURRENT ASSETS	12,431,103	12,457,998
FIXED ASSETS	21,487,943	21,488,094
OTHER ASSETS	305,286	247,899
	-	-
Total Assets	\$ 34,224,332	\$ 34,193,991
LIABILITIES, DEFERRED REVENUE, FUND BALANCES		
CURRENT LIABILITIES	2,073,722	2,029,164
NOTES PAYABLE	694,011	694,011
DEFERRED REVENUE	82,367	521,097
LONG-TERM LIABILITIES FOR		
First Financial Conroe Building Loan	9,658,864	10,202,342
Guaranty Bank & Trust Loan	1,732,388	1,800,620
Lease Liability	448,112	448,112
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR		
General Fund	1,686,711	354,155
FUND EQUITY		
RESTRICTED		
Net Assets Reserved for Debt Service - Restricted	(11,839,364)	(12,451,074)
Reserved for Debt Retirement	-	-
COMMITTED		
Net Assets - Property and Equipment - Committed	21,488,095	21,488,094
Reserved for Vehicles & Equipment Replacement	613,711	613,712
Reserved for Facility Improvement & Acquisitions	1,163,802	2,500,000
Reserved for Board Initiatives	1,500,000	1,500,000
Reserved for 1115 Waiver Programs	502,677	502,677
ASSIGNED		
Reserved for Workers' Compensation - Assigned	274,409	274,409
Reserved for Current Year Budgeted Reserve - Assigned	74,000	-
Reserved for Insurance Deductibles - Assigned	100,000	100,000
Reserved for Accrued Paid Time Off	(694,011)	(694,010)
UNASSIGNED		
Unrestricted and Undesignated	4,664,837	4,310,682
TOTAL LIABILITIES/FUND BALANCE	\$ 34,224,332	\$ 34,193,991

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
For the Month Ended August 2023
and Year To Date as of August 2023
Preliminary

INCOME:	MONTH OF August 2023	YTD August 2023
	<u> </u>	<u> </u>
Local Revenue Sources	(318,266)	2,468,312
Earned Income	1,799,758	25,176,868
General Revenue - Contract	1,668,634	18,921,365
TOTAL INCOME	<u>\$ 3,150,126</u>	<u>\$ 46,566,545</u>
EXPENSES:		
Salaries	2,398,753	24,208,473
Employee Benefits	240,936	4,208,271
Medication Expense	46,726	509,367
Travel - Board/Staff	38,909	404,595
Building Rent/Maintenance	10,297	452,334
Consultants/Contracts	827,409	8,548,728
Other Operating Expenses	418,163	3,452,631
TOTAL EXPENSES	<u>\$ 3,981,193</u>	<u>\$ 41,784,399</u>
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	<u>\$ (831,067)</u>	<u>\$ 4,782,146</u>
CAPITAL EXPENDITURES		
Capital Outlay - FF&E, Automobiles, Building	697,300	2,078,972
Capital Outlay - Debt Service	87,031	1,016,463
TOTAL CAPITAL EXPENDITURES	<u>\$ 784,331</u>	<u>\$ 3,095,435</u>
GRAND TOTAL EXPENDITURES	<u>\$ 4,765,524</u>	<u>\$ 44,879,834</u>
Excess (Deficiency) of Revenues and Expenses	<u>\$ (1,615,399)</u>	<u>\$ 1,686,711</u>

Debt Service and Fixed Asset Fund:		
Debt Service	87,031	1,016,463
Excess (Deficiency) of Revenues over Expenses	<u>87,031</u>	<u>1,016,463</u>

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
Year to Date as of August 2023
Preliminary

	YTD August 2023	APPROVED BUDGET	Increase (Decrease)
INCOME:			
Local Revenue Sources	2,468,312	2,455,780	12,532
Earned Income	25,176,868	25,258,080	(81,212)
General Revenue	18,921,365	18,931,997	(10,632)
TOTAL INCOME	\$ 46,566,545	\$ 46,645,857	\$ (79,312)
EXPENSES:			
Salaries	24,208,473	24,210,678	(2,205)
Employee Benefits	4,208,271	4,283,324	(75,053)
Medication Expense	509,367	531,025	(21,658)
Travel - Board/Staff	404,595	405,717	(1,122)
Building Rent/Maintenance	452,334	467,100	(14,766)
Consultants/Contracts	8,548,728	8,667,021	(118,293)
Other Operating Expenses	3,452,631	3,362,012	90,619
TOTAL EXPENSES	\$ 41,784,399	\$ 41,926,877	\$ (142,477)
 Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	 \$ 4,782,146	 \$ 4,718,980	 \$ 63,165
CAPITAL EXPENDITURES			
Capital Outlay - FF&E, Automobiles, Building	2,078,972	2,201,034	(122,062)
Capital Outlay - Debt Service	1,016,463	1,016,462	1
TOTAL CAPITAL EXPENDITURES	\$ 3,095,435	\$ 3,217,496	\$ (122,061)
 GRAND TOTAL EXPENDITURES	 \$ 44,879,834	 \$ 45,144,373	 \$ (264,538)
 Excess (Deficiency) of Revenues and Expenses	 \$ 1,686,711	 \$ 1,501,484	 \$ 185,227

Debt Service and Fixed Asset Fund:			
Debt Service	1,016,463	1,016,465	(2)
Excess(Deficiency) of Revenues over Expenses	1,016,463	1,016,465	(2)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
For the Month Ended August 2023
Preliminary

INCOME:	MONTH OF August 2023	APPROVED BUDGET	Increase (Decrease)
Local Revenue Sources	(318,266)	(338,281)	20,015
Earned Income	1,799,758	1,400,443	399,315
General Revenue-Contract	1,668,634	1,663,918	4,716
TOTAL INCOME	\$ 3,150,126	\$ 2,726,080	\$ 424,046
EXPENSES:			
Salaries	2,398,753	2,299,737	99,016
Employee Benefits	240,936	176,328	64,608
Medication Expense	46,726	60,919	(14,193)
Travel - Board/Staff	38,909	76,613	(37,704)
Building Rent/Maintenance	10,297	77,976	(67,679)
Consultants/Contracts	827,409	914,549	(87,140)
Other Operating Expenses	418,163	484,644	(66,481)
TOTAL EXPENSES	\$ 3,981,193	\$ 4,090,766	\$ (109,572)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ (831,067)	\$ (1,364,686)	\$ 533,618
CAPITAL EXPENDITURES			
Capital Outlay - FF&E, Automobiles, Building	697,300	859,958	(162,658)
Capital Outlay - Debt Service	87,031	87,034	(3)
TOTAL CAPITAL EXPENDITURES	\$ 784,331	\$ 946,992	\$ (162,661)
GRAND TOTAL EXPENDITURES	\$ 4,765,524	\$ 5,037,758	\$ (272,234)
Excess (Deficiency) of Revenues and Expenses	\$ (1,615,399)	\$ (2,311,678)	\$ 696,280

Debt Service and Fixed Asset Fund:			
Debt Service	87,031	87,034	(3)
Excess (Deficiency) of Revenues over Expenses	87,031	87,034	(3)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With YTD August 2022 Comparative Data
Year to Date as of August 2023
Preliminary

INCOME:	YTD August 2023	YTD August 2022	Increase (Decrease)
Local Revenue Sources	2,468,312	2,259,074	209,238
Earned Income	25,176,868	18,912,871	6,263,997
General Revenue-Contract	18,921,365	19,417,492	(496,127)
TOTAL INCOME	\$ 46,566,545	\$ 40,589,436	\$ 5,977,108
EXPENSES:			
Salaries	24,208,473	20,816,509	3,391,964
Employee Benefits	4,208,271	3,660,874	547,397
Medication Expense	509,367	582,386	(73,019)
Travel - Board/Staff	404,595	270,133	134,462
Building Rent/Maintenance	452,334	313,842	138,492
Consultants/Contracts	8,548,728	8,181,889	366,839
Other Operating Expenses	3,452,631	3,193,864	258,767
TOTAL EXPENSES	\$ 41,784,399	\$ 37,019,497	\$ 4,764,902
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 4,782,146	\$ 3,569,939	\$ 1,212,206
CAPITAL EXPENDITURES			
Capital Outlay - FF&E, Automobiles, Building	2,078,972	1,590,113	488,859
Capital Outlay - Debt Service	1,016,463	908,705	107,758
TOTAL CAPITAL EXPENDITURES	\$ 3,095,435	\$ 2,498,818	\$ 596,617
GRAND TOTAL EXPENDITURES	\$ 44,879,834	\$ 39,518,312	\$ 5,361,522
Excess (Deficiency) of Revenues and Expenses	\$ 1,686,711	\$ 1,071,122	\$ 615,589

Debt Service and Fixed Asset Fund:			
Debt Service	1,016,463	908,705	107,758
Excess (Deficiency) of Revenues over Expenses	1,016,463	908,705	107,758

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With August 2022 Comparative Data
For the Month ending August 2023
Preliminary

INCOME:	MONTH OF August 2023	MONTH OF August 2022	Increase (Decrease)
Local Revenue Sources	(318,266)	(97,055)	(221,211)
Earned Income	1,799,758	3,252,038	(1,452,280)
General Revenue-Contract	1,668,634	1,553,281	115,353
TOTAL INCOME	\$ 3,150,126	\$ 4,708,264	\$ (1,558,138)
Salaries	2,398,753	2,144,180	254,573
Employee Benefits	240,936	173,955	66,981
Medication Expense	46,726	63,646	(16,920)
Travel - Board/Staff	38,909	30,266	8,643
Building Rent/Maintenance	10,297	24,634	(14,337)
Consultants/Contracts	827,409	949,114	(121,705)
Other Operating Expenses	418,163	336,569	81,594
TOTAL EXPENSES	\$ 3,981,193	\$ 3,722,365	\$ 258,829
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ (831,067)	\$ 985,899	\$ (1,816,967)
CAPITAL EXPENDITURES			
Capital Outlay - FF&E, Automobiles, Building	697,300	213,612	483,688
Capital Outlay - Debt Service	87,031	80,053	6,978
TOTAL CAPITAL EXPENDITURES	\$ 784,331	\$ 293,665	\$ 490,666
GRAND TOTAL EXPENDITURES	\$ 4,765,524	\$ 4,016,030	\$ 749,494
Excess (Deficiency) of Revenues and Expenses	\$ (1,615,399)	\$ 692,234	\$ (2,307,633)

Debt Service and Fixed Asset Fund:

Debt Service	87,031	80,053	6,978
Excess (Deficiency) of Revenues over Expenses	87,031	80,053	6,978

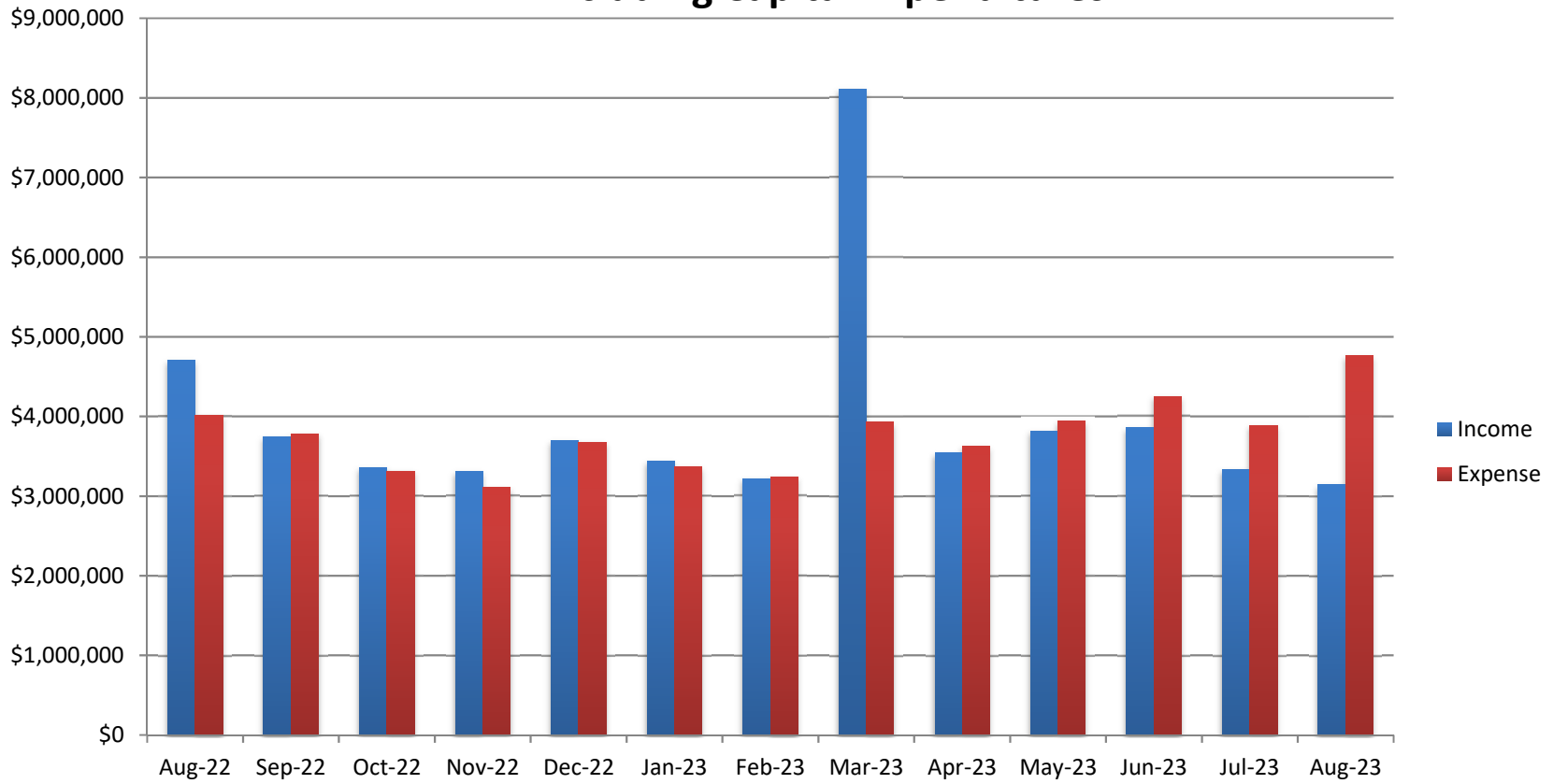
TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With July 2023 Comparative Data
For the Month Ended August 2023
Preliminary

INCOME:	MONTH OF August 2023	MONTH OF July 2023	Increase (Decrease)
Local Revenue Sources	(318,266)	(86,223)	(232,043)
Earned Income	1,799,758	1,669,008	130,750
General Revenue-Contract	1,668,634	1,754,585	(85,951)
TOTAL INCOME	\$ 3,150,126	\$ 3,337,370	\$ (187,244)
EXPENSES:			
Salaries	2,398,753	2,097,768	300,985
Employee Benefits	240,936	382,780	(141,844)
Medication Expense	46,726	43,834	2,892
Travel - Board/Staff	38,909	40,743	(1,834)
Building Rent/Maintenance	10,297	75,706	(65,409)
Consultants/Contracts	827,409	683,695	143,714
Other Operating Expenses	418,163	281,682	136,481
TOTAL EXPENSES	\$ 3,981,193	\$ 3,606,208	\$ 374,985
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ (831,067)	\$ (268,838)	\$ (562,229)
CAPITAL EXPENDITURES			
Capital Outlay - FF&E, Automobiles, Building	697,300	197,681	499,619
Capital Outlay - Debt Service	87,031	87,031	-
TOTAL CAPITAL EXPENDITURES	\$ 784,331	\$ 284,713	\$ 499,619
GRAND TOTAL EXPENDITURES	\$ 4,765,524	\$ 3,890,921	\$ 874,603
Excess (Deficiency) of Revenues and Expenses	\$ (1,615,399)	\$ (553,552)	\$ (1,061,848)
Debt Service and Fixed Asset Fund:			
Debt Service	87,031	87,031	-
Excess (Deficiency) of Revenues over Expenses	87,031	87,031	-

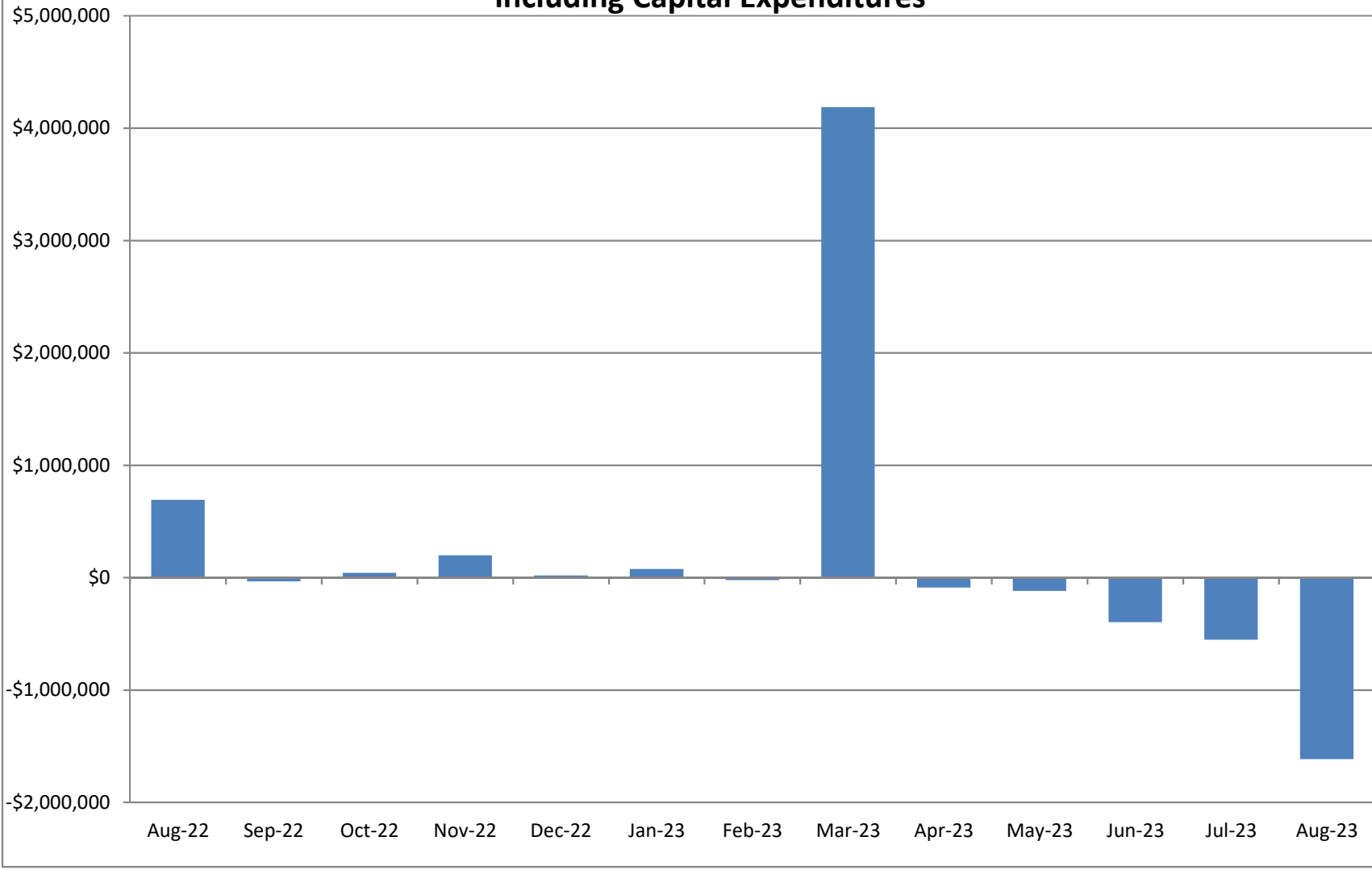
TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary by Service Type
Compared to Budget
Year To Date as of August 2023
Preliminary

	YTD Mental Health August 2023	YTD IDD August 2023	YTD Other Services August 2023	YTD Agency Total August 2023	YTD Approved Budget August 2023	Increase (Decrease)
INCOME:						
Local Revenue Sources	2,464,824	42,235	(38,748)	2,468,311	2,455,780	12,531
Earned Income	9,651,742	4,582,150	10,942,976	25,176,868	25,258,080	(81,212)
General Revenue-Contract	16,467,059	1,774,338	679,968	18,921,365	18,931,997	(10,632)
TOTAL INCOME	28,583,625	6,398,723	11,584,196	\$ 46,566,545	\$ 46,645,857	\$ (79,313)
EXPENSES:						
Salaries	14,854,700	3,583,867	5,769,906	24,208,473	24,210,678	(2,205)
Employee Benefits	2,659,300	654,338	894,633	4,208,271	4,283,324	(75,053)
Medication Expense	433,717	-	75,650	509,367	531,025	(21,658)
Travel - Board/Staff	212,549	124,629	67,416	404,594	405,717	(1,123)
Building Rent/Maintenance	410,050	15,846	26,439	452,335	467,100	(14,765)
Consultants/Contracts	4,230,906	1,139,224	3,178,598	8,548,728	8,667,021	(118,293)
Other Operating Expenses	1,980,435	753,741	718,455	3,452,631	3,362,012	90,619
TOTAL EXPENSES	24,781,657	6,271,645	10,731,097	\$ 41,784,399	\$ 41,926,877	\$ (142,478)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	3,801,968	127,078	853,099	\$ 4,782,146	\$ 4,718,980	\$ 63,165
CAPITAL EXPENDITURES						
Capital Outlay - FF&E, Automobiles, Building	1,661,905	158,399	258,669	2,078,972	2,201,034	(122,062)
Capital Outlay - Debt Service	609,878	152,469	254,116	1,016,463	1,016,462	1
TOTAL CAPITAL EXPENDITURES	2,271,783	310,868	512,785	\$ 3,095,435	\$ 3,217,496	\$ (122,061)
GRAND TOTAL EXPENDITURES	27,053,440 ##	6,582,513	11,243,882	\$ 44,879,834	\$ 45,144,373	\$ (264,539)
Excess (Deficiency) of Revenues and Expenses	1,530,185	(183,790)	340,314	\$ 1,686,711 #	\$ 1,501,484	\$ 185,227
Debt Service and Fixed Asset Fund:						
Debt Service	2,271,783	310,868	512,785	3,095,435	3,217,496	(122,061)
Excess (Deficiency) of Revenues over Expenses	2,271,783	310,868	512,785	3,095,435	3,217,496	(122,061)

TRI-COUNTY BEHAVIORAL HEALTHCARE Income and Expense including Capital Expenditures



TRI-COUNTY BEHAVIORAL HEALTHCARE
Income after Expense
including Capital Expenditures



Agenda Item: 4th Quarter FY 2023 Quarterly Investment Report

Board Meeting Date

September 28, 2023

Committee: Business

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 31st, 2023

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	\$110.49	\$431.12	\$5,228,692.52
Accrual of Interest Income	\$112,059,930.98	\$120,432,598.26	\$137,735,646.41
Interest and Management Fees Payable	(\$126,737,524.92)	(\$129,036,097.50)	(\$131,780,051.07)
Payable for Investments Purchased	(\$674,614,426.64)	(25,000,000.00)	(124,999,999.99)
Accrued Expense & Taxes	(\$30,161.51)	(\$31,797.54)	(\$32,127.84)
Repurchase Agreements	\$12,665,055,000.00	\$12,053,794,000.00	\$13,019,878,000.00
Mutual Fund Investments	\$2,025,085,200.00	\$2,025,074,000.00	\$2,025,085,200.00
Government Securities	\$12,617,643,932.36	\$11,799,492,441.67	\$10,920,912,044.47
U.S. Treasury Bills	\$1,986,391,085.54	\$1,767,849,957.87	\$1,948,578,912.51
U.S. Treasury Notes	\$1,160,039,303.25	\$1,300,040,877.38	\$1,440,656,985.65
TOTAL	\$29,759,806,811.18	\$28,912,616,411.26	\$29,241,263,302.66

Book Value for the Period

Type of Asset	Beginning Balance	Ending Balance
Uninvested Balance	(\$502.15)	\$5,228,692.52
Accrual of Interest Income	\$128,803,444.70	\$137,735,646.41
Interest and Management Fees Payable	(\$134,129,655.34)	(\$131,780,051.07)
Payable for Investments Purchased	0.00	(124,999,999.99)
Accrued Expenses & Taxes	(\$31,852.18)	(\$32,127.84)
Repurchase Agreements	\$11,483,201,000.00	\$13,019,878,000.00
Mutual Fund Investments	\$2,025,085,200.00	\$2,025,085,200.00
Government Securities	\$14,981,831,730.77	\$10,920,912,044.47
U.S. Treasury Bills	\$1,606,970,449.89	\$1,948,578,912.51
U.S. Treasury Notes	\$1,024,956,978.09	\$1,440,656,985.65
TOTAL	\$31,116,675,593.78	\$29,241,263,302.66

Portfolio by Maturity as of August 31st, 2023

1 to 7 days	8 to 90 day	91 to 180 days	181 + days
86.6%	6.3%	1.0%	6.1%

Portfolio by Type of Investments as of August 31st, 2023

Treasuries	Repurchase Agreements	Agencies	Money Market Funds
11.5%	44.4%	37.2%	6.9%

SUMMARY INFORMATION

On a simple daily basis, the monthly average yield was 5.05% for June, 5.12% for July, and 5.30% 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 31st, 2023 was 23 days.

The net asset value as of August 31st, 2023 was 0.99984.

The total amount of interest distributed to participants during the period was \$131,770,097.22.

TexPool interest rates did not exceed 90 Day T-Bill rates during the entire 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 increased to 2,788.

Fund 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 2023
 As Of August 2023**

BANK NAME	INTEREST EARNED				
	1st QTR.	2nd QTR.	3rd QTR.	4th QTR.	YTD TOTAL
Alliance Bank - Central Texas CD	\$ -		\$ 315.07	\$ 619.86	\$ 934.93
First Liberty National Bank	\$ 0.46	\$ 1.19	\$ 1.87	\$ 1.87	\$ 5.39
JP Morgan Chase (HB)	\$ 11,474.99	\$ 18,463.12	\$ 32,472.39	\$ 24,372.38	\$ 86,782.88
Prosperity Bank	\$ 165.64	\$ 251.90	\$ 24.89	\$ 26.09	\$ 468.52
Prosperity Bank CD (formerly Tradition)	\$ 12.51	\$ 13.14	\$ 2.43	\$ 2.55	\$ 30.63
TexPool Participants	\$ 290.16	\$ 649.74	\$ 1,028.56	\$ 11,170.59	\$ 13,139.05
First Financial Bank	\$ -	\$ -	\$ 260.38	\$ 633.10	\$ 893.48
Total Earned	\$ 11,943.76	\$ 19,379.09	\$ 34,105.59	\$ 36,826.44	\$ 102,254.88

Agenda Item: Board of Trustees Unit Financial Statement as of August 2023

Board Meeting Date

September 28, 2023

Committee: Business

Background Information:

None

Supporting Documentation:

August 2023 Board of Trustees Unit Financial Statement

Recommended Action:

For Information Only

Unit Financial Statement

FY 2023

August 31, 2023

	August 2023 Budget	August 2023 Actual	Variance	YTD Budget	YTD Actual	Variance	Percent	Budget
Revenues								
Allocated Revenue	\$ 1,928	\$ 1,928	\$ -	\$ 23,125	\$ 23,125	\$ -	100%	\$ 23,125
Total Revenue	\$ 1,928	\$ 1,928	\$ -	\$ 23,125	\$ 23,125	\$ -	100%	\$ 23,125
Expenses								
Insurance-Worker Compensation	\$ (78)	\$ 5	\$ (83)	\$ 60	\$ 52	\$ 8	87%	\$ 150
Legal Fees	\$ 1,500	\$ 1,500	\$ -	\$ 18,000	\$ 18,000	\$ -	100%	\$ 18,000
Training	\$ 32	\$ -	\$ 32	\$ 857	\$ 1,010	\$ (153)	118%	\$ 900
Travel - Local	\$ 42	\$ -	\$ 42	\$ 500	\$ 106	\$ 394	21%	\$ 500
Travel - Non-local mileage	\$ 35	\$ -	\$ 35	\$ 425	\$ 424	\$ 1	100%	\$ 425
Travel - Non-local Hotel	\$ 217	\$ -	\$ 217	\$ 2,600	\$ 1,212	\$ 1,388	47%	\$ 2,600
Travel - Meals	\$ 46	\$ -	\$ 46	\$ 550	\$ 339	\$ 211	62%	\$ 550
Total Expenses	\$ 1,794	\$ 1,505	\$ 289	\$ 22,992	\$ 21,143	\$ 1,849	92%	\$ 23,125
Total Revenue minus Expenses	\$ 134	\$ 423	\$ (289)	\$ 133	\$ 1,982	\$ (1,849)	8%	\$ -

Agenda Item: Tri-County's Consumer Foundation Board Update Committee: Business	Board Meeting Date September 28, 2023
Background Information: Tri-County's Consumer Foundation Board of Directors met on July 28, 2023. The Board reviewed and approved one application during the meeting in the amount of \$1,040. The board accepted the financial statements through June 30, 2023 and set the spending amount for Q3 FY 2023 in the amount of \$7,500. The Board of Directors reviewed 18 assistance applications received during Quarter 2 and approved 15 of them. After determining the exact needs for these applications, the total was more than the \$7,500 target for the Quarter by \$1,016. On July 18, 2023 staff contacted the Board of Directors informing them of the need to go over the approved budget to fund all approved assistance applications and the Board approved the additional expenditure. The Board reviewed the final dollar amount on our recent cookbook fundraiser which totaled \$3,367.	
Supporting Documentation: None	
Recommended Action: For Information Only	

UPCOMING MEETINGS

October 26, 2023 – Board Meeting

- Longevity Presentations
- Approve Minutes from September 28, 2023 Board Meeting
- Community Resources Report
- Consumer Services Report for September 2023
- Program Updates
- Board of Trustees Oaths of Office (if not present in September 2023)
- Approve Financial Statements for September 2023
- Personnel Report for September 2023
- Texas Council Risk Management Fund Claims Summary for September 2023
- Approve Financial Statements for September 2023
- 401(a) Retirement Plan Account Review
- Board of Trustees Unit Financial Statement for September 2023
- HUD 811 Updates – Cleveland, Montgomery & Huntsville
- Consumer Foundation Board Meeting Update

November 30, 2023 – Board Meeting

- Life Skills Christmas Carolers Presentation
- Consumer Christmas Card Contest Winners Presentation
- Approve Minutes from October 26, 2023 Board Meeting
- Community Resources Report
- Consumer Services Report October 2023
- Program Updates
- Personnel Report October 2023
- Texas Council Board Meeting Update
- Texas Council Risk Management Fund Claims Summary for October 2023
- Approve Financial Statements for October 2023
- Reappoint ICI, MSHI and CSHI Board of Directors
- Board of Trustees Unit Financial Statement October 2023

Tri-County Behavioral Healthcare Acronyms

Acronym	Name
1115	Medicaid 1115 Transformation Waiver
AAIDD	American Association on Intellectual and Developmental Disabilities
AAS	American Association of Suicidology
ABA	Applied Behavioral Analysis
ACT	Assertive Community Treatment
ADA	Americans with Disabilities Act
ADD	Attention Deficit Disorder
ADHD	Attention Deficit Hyperactivity Disorder
ADL	Activities of Daily Living
ADRC	Aging and Disability Resource Center
AMH	Adult Mental Health
ANSA	Adult Needs and Strengths Assessment
AOP	Adult Outpatient
APM	Alternative Payment Model
APRN	Advanced Practice Registered Nurse
APS	Adult Protective Services
ARDS	Assignment Registration and Dismissal Services
ASH	Austin State Hospital
BCBA	Board Certified Behavior Analyst
BJA	Bureau of Justice Administration
BMI	Body Mass Index
C&Y	Child & Youth Services
CAM	Cost Accounting Methodology
CANS	Child and Adolescent Needs and Strengths Assessment
CARE	Client Assignment Registration & Enrollment
CAS	Crisis Access Services
CBT	Computer Based Training & Cognitive Based Therapy
CC	Corporate Compliance
CCBHC	Certified Community Behavioral Health Clinic
CCP	Charity Care Pool
CDBG	Community Development Block Grant
CFC	Community First Choice
CFRT	Child Fatality Review Team
CHIP	Children's Health Insurance Program
CIRT	Crisis Intervention Response Team
CISM	Critical Incident Stress Management
CIT	Crisis Intervention Team
CMH	Child Mental Health
CNA	Comprehensive Nursing Assessment
COC	Continuity of Care
COPSD	Co-Occurring Psychiatric and Substance Use Disorders
COVID-19	Novel Corona Virus Disease - 2019
CPS	Child Protective Services
CPT	Cognitive Processing Therapy
CRCG	Community Resource Coordination Group
CSC	Coordinated Specialty Care
CSHI	Cleveland Supported Housing, Inc.
CSU	Crisis Stabilization Unit
DADS	Department of Aging and Disability Services
DAHS	Day Activity and Health Services Requirements
DARS	Department of Assistive & Rehabilitation Services
DCP	Direct Care Provider
DEA	Drug Enforcement Agency
DFPS	Department of Family and Protective Services
DID	Determination of Intellectual Disability

DO	Doctor of Osteopathic Medicine
DOB	Date of Birth
DPP-BHS	Directed Payment Program - Behavioral Health Services
DRC	Disaster Recovery Center
DRPS	Department of Protective and Regulatory Services
DSHS	Department of State Health Services
DSM	Diagnostic and Statistical Manual of Mental Disorders
DSRIP	Delivery System Reform Incentive Payments
DUA	Data Use Agreement
DUNN	Dunn Behavioral Health Science Center at UT Houston
Dx	Diagnosis
EBP	Evidence Based Practice
ECI	Early Childhood Intervention
EDO	Emergency Detention Order
EDW	Emergency Detention Warrant (Judge or Magistrate Issued)
EHR	Electronic Health Record
EOU	Extended Observation Unit
ETBHN	East Texas Behavioral Healthcare Network
EVV	Electronic Visit Verification
FDA	Federal Drug Enforcement Agency
FEMA	Federal Emergency Management Assistance
FEP	First Episode Psychosis
FLSA	Fair Labor Standards Act
FMLA	Family Medical Leave Act
FTH	From the Heart
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
HUD	Housing and Urban Development
ICAP	Inventory for Client and Agency Planning
ICF-IID	Intermediate Care Facility - for Individuals w/Intellectual Disabilities
ICI	Independence Communities, Inc.
ICM	Intensive Case Management
IDD	Intellectual and Developmental Disabilities
IDD PNAC	Intellectual and Developmental Disabilities Planning Network Advisory Committee
IHP	Individual Habilitation Plan
IMR	Illness Management and Recovery
IP	Implementation Plan
IPC	Individual Plan of Care
IPE	Initial Psychiatric Evaluation
IPP	Individual Program Plan
ISS	Individualized Skills and Socialization
ITP	Individual Transition Planning (schools)
JDC	Juvenile Detention Center
JUM	Junior Utilization Management Committee
LAR	Legally Authorized Representative
LBHA	Local Behavioral Health Authority
LCDC	Licensed Chemical Dependency Counselor
LCSW	Licensed Clinical Social Worker
LIDDA	Local Intellectual & Developmental Disabilities Authority
LMC	Leadership Montgomery County
LMHA	Local Mental Health Authority
LMSW	Licensed Master Social Worker
LMFT	Licensed Marriage and Family Therapist
LOC	Level of Care (MH)

LOC-TAY	Level of Care - Transition Age Youth
LON	Level Of Need (IDD)
LOSS	Local Outreach for Suicide Survivors
LPHA	Licensed Practitioner of the Healing Arts
LPC	Licensed Professional Counselor
LPC-S	Licensed Professional Counselor-Supervisor
LPND	Local Planning and Network Development
LSFHC	Lone Star Family Health Center
LTD	Long Term Disability
LVN	Licensed Vocational Nurse
MAC	Medicaid Administrative Claiming
MAT	Medication Assisted Treatment
MCHC	Montgomery County Homeless Coalition
MCHD	Montgomery County Hospital District
MCO	Managed Care Organizations
MCOT	Mobile Crisis Outreach Team
MD	Medical Director/Doctor
MDCD	Medicaid
MDD	Major Depressive Disorder
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 on Mental Illness
NASW	National Association of Social Workers
NEO	New Employee Orientation
NGM	New Generation Medication
NGRI	Not Guilty by Reason of Insanity
NP	Nurse Practitioner
OCR	Outpatient Competency Restoration
OIG	Office of the Inspector General
OPC	Order for Protective Custody
OSAR	Outreach, Screening, Assessment and Referral (Substance Use Disorders)
PA	Physician's Assistant
PAP	Patient Assistance Program
PASRR	Pre-Admission Screening and Resident Review
PATH	Projects for Assistance in Transition from Homelessness (PATH)
PCB	Private Contract Bed
PCIT	Parent Child Interaction Therapy
PCP	Primary Care Physician
PCRP	Person Centered Recovery Plan
PDP	Person Directed Plan
PETC	Psychiatric Emergency Treatment Center
PFA	Psychological First Aid
PHI	Protected Health Information
PHP-CCP	Public Health Providers - Charity Care Pool
PNAC	Planning Network Advisory Committee
PPB	Private Psychiatric Bed
PRS	Psychosocial Rehab Specialist
QIDP	Qualified Intellectual Disabilities Professional
QM	Quality Management
QMHP	Qualified Mental Health Professional
RAC	Routine Assessment and Counseling
RCF	Residential Care Facility
RCM	Routine Case Management
RFP	Request for Proposal

RN	Registered Nurse
ROC	Regional Oversight Committee - ETBHN Board
RPNAC	Regional Planning & Network Advisory Committee
RSH	Rusk State Hospital
RTC	Residential Treatment Center
SAMA	Satori Alternatives to Managing Aggression
SAMHSA	Substance Abuse and Mental Health Services Administration
SASH	San Antonio State Hospital
SH	Supported Housing
SHAC	School Health Advisory Committee
SOAR	SSI Outreach, Access and Recovery
SSA	Social Security Administration
SSDI	Social Security Disability Income
SSI	Supplemental Security Income
SSLC	State Supported Living Center
STAR Kids	State of Texas Reform-Kids (Managed Medicaid)
SUD	Substance Use Disorder
SUMP	Substance Use and Misuse Prevention
TAC	Texas Administrative Code
TANF	Temporary Assistance for Needy Families
TAY	Transition Aged Youth
TCBHC	Tri-County Behavioral Healthcare
TF-CBT	Trauma Focused CBT - Cognitive Behavioral Therapy
TCCF	Tri-County Consumer Foundation
TCOOMMI	Texas Correctional Office on Offenders with Medical & Mental Impairments
TCRMF	Texas Council Risk Management Fund
TDCJ	Texas Department of Criminal Justice
TEA	Texas Education Agency
TIC/TOC	Trauma Informed Care-Time for Organizational Change
TMHP	Texas Medicaid & Healthcare Partnership
TP	Treatment Plan
TRA	Treatment Adult Services (Substance Use Disorder)
TRR	Texas Resilience and Recovery
TxHmL	Texas Home Living
TRY	Treatment Youth Services (Substance Use Disorder)
TVC	Texas Veterans Commission
TWC	Texas Workforce Commission
UM	Utilization Management
UW	United Way of Greater Houston
WCHD	Walker County Hospital District
WSC	Waiver Survey & Certification
YES	Youth Empowerment Services
YMHFA	Youth Mental Health First Aid
YPS	Youth Prevention Services
YPU	Youth Prevention Selective

Updated September 2023