

NOTICE OF MEETING

MEMBERS OF THE BOARD OF TRUSTEES

The Gulf Coast Center Board of Trustees meeting for the month of December will be held on Wednesday,

December 8th, 2021, at 6:15 p.m.

at the **Gulf Coast Center Administration Building**, 10000 Emmett F. Lowry Expressway, Suite 1220, Texas City

Thanks,

Lisa M. Becker

Secretary to the Board of Trustees

cc: December Board of Trustees Fil

THE GULF COAST CENTER

Regular Board of Trustees Meeting Mall of the Mainland – Administration Bldg. 10000 EF Lowry Expressway, Suite 1220 Texas City, TX 77591 Wednesday, December 8, 2021 6:15 pm



"Better community healthcare promoting healthy living."

1.	Call To Order
2.	Citizens' Comments
3.	Program Presentation &/or Report : Resilient Youth Safer Environments (RYSE) Project Diane Manley, MS, LPC
4.	Board Member Reports
	a. Texas Council of Community Centers
	b. Texas Council Risk Management FundMary Lou Flynn-Dupart, TCRMF Board Chair
	c. Board of Trustee Ad Hoc Committee final selection for CEO positionJamie Travis, Board Chair Consider ratification of GCC's CEO position selection and offer to Felicia Jeffery, LPC.
5.	Operations Report
	 a. Gulf Coast Center FY22-23 Strategic Plan b. 1115 Transition – Funding Strategies Update c. CEO Transition Update d. Mandatory COVID Vaccine Policy (Pg. 3)
6.	Budget, Finance and Admin Reports
	a. Financial & Operational Monthly Report & YTD Summary (Pg. 7)
7.	Consent Agenda
	 a. Review and approval of October 27, 2021, Board Minutes (Pg. 11) b. Review and approval of the October 2021 Check Register
8.	Action ItemsLinda Bell, JD, BSN, RN

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- a. Consider the ratification of the Center's Mandatory COVID Vaccine Policy to comply with Center for Medicare Services (CMS) interim final rule dated November 5, 2021, mandating vaccination for healthcare workers.
- **b.** Consider the ratification of the FY22 Renewal Agreement with The University of Texas Medical Branch at Galveston d/b/a/ UTMB Health to provide inpatient physician services at the Center's contracted inpatient hospitalization unit located within the behavioral health department of St. Joseph Medical Center in Houston. Amount not to exceed: 20 beds at \$65/daily visit (no change from FY22 rate)

Date	Event	Location	Time			
December 8, 2021	Board Meeting	Admin Bldg.	TBA			
January 26, 2022	Board Meeting	SBCSC	6:15 PM			
February 23, 2022	Board Meeting	Admin Bldg.	6:15 PM			
March 23, 2022	Board Meeting	SBCSC	6:15 PM			
April 27, 2022	Board Meeting	Admin Bldg.	6:15 PM			
May 25, 2022	Board Meeting	SBCSC	6:15 PM			
June 21–23, 2022	35 th Annual Texas Council Conference	Omni Hotel				
		Fort Worth				
July 27, 2022	Board Meeting	SBCSC	6:15 PM			
August 24, 2022	Board Meeting	Admin Bldg.	6:15 PM			
Admin location: 1000	Admin location: 10000 EF Lowry Expressway #1220, Texas City, TX					
SDCSC location, 101 Tierror, Angleton, TV						

SBCSC location: 101 Tigner, Angleton, TX

11. Executive Session

- As authorized by Chapter §551.071 of the Texas Government Code, the Board of Trustees reserves the right to adjourn into Executive Session at any time during this meeting to seek legal advice from its Attorney about any matters listed on the agenda.
- Pursuant to Texas Government Code §551.074 the Board will convene in Executive Session to discuss personnel matters related to the replacement of the Chief Executive Officer position.

12. Reconvene to Open Session

13. Adjourn



I. Title: Mandatory COVID-19 Vaccination

II. Purpose:

Vaccination is a vital tool to reduce the presence and severity of COVID-19 cases in the workplace, in communities, and in the nation as a whole. The Gulf Coast Center has adopted this policy on mandatory vaccination to safeguard the health of our employees from the hazard of COVID-19. This policy is to comply with Center for Medicare Services (CMS) interim final rule dated November 5, 2021, mandating vaccination for healthcare workers.

III. Scope & Applicability

This is a Center-wide policy. It applies to the following individuals regardless of clinical responsibility or patient contact who provide any type of care, treatment, or other services for the organization and/or its patients:

- a. Hospital Liaison staff and staff who provide coverage including the MH Hospital Transport Specialist.
- b. Center staff who provide services in a hospital or an emergency room.
- c. MCOT and ACT Team staff.
- d. Center staff who provide services in a long-term care facility i.e. PASSR staff
- e. Contractors, students/interns, trainees, and volunteers providing or associated with items a. thru d. above. or
- f. Center staff who are required due contractual arrangement which requires staff be vaccinated.

This policy does not apply to:

- Staff who exclusively provide telehealth or telemedicine services outside of the clinic or hospital setting and who do not have any direct contact with individuals in service and other staff.
- Staff who provide support services for a hospital (under contractual relationship with the Center) that are
 performed exclusively outside of the hospital setting and who do not have any direct contact with patients
 and other staff.

IV. Definitions

- <u>Fully vaccinated</u> means it has been 2 weeks or more since an individual has completed a primary vaccination series for COVID-19.
- <u>Primary vaccination series</u> for COVID-19 means the administration of a single-dose vaccine, or the administration of all required doses of a multi-dose vaccine.
- Acceptable vaccine means administration of one of the following:
 - o BioNTech, Pfizer Vaccine
 - o Johnson & Johnson Vaccine
 - o Moderna NIAID Vaccine
 - o A vaccine listed by the World Health Organization (WHO) for emergency use that is not approved or authorized by the FDA, or a vaccine administered in a clinical trial.

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- Medical exemption means an individual is not required to be vaccinated due to an allergic and/or recognized clinical contraindication to COVID-19 vaccines.
- Religious exemption means an individual is not required to be vaccinated due to religious beliefs or
 practices in accordance with ADA, Section 504 of the Rehabilitation Act, Section 1557 of the Accountable
 Care Act, and Title VII of the Civil Rights Act.

V. Policy

a. VACCINATION REQUIREMENT

By December 5, 2021, applicable individuals shall have received, at a minimum, the first dose of the primary series or a single dose of an acceptable COVID-19 vaccine or requested and/or been granted a medical or religious exemption, prior to said individual providing any care, treatment, or other services for the organization and/or its patients.

By January 4, 2022, all applicable individuals are fully vaccinated for COVID-19, except for those individuals who have been granted a medical or religious exemption or those individuals for whom vaccination must be temporarily delayed, as recommended by the CDC, due to clinical precautions and considerations.

Although not considered fully vaccinated until 14 days (2 weeks) after the final dose, an individual who has received the final dose of a primary vaccination series by January 4, 2022, is considered to have met the vaccination requirement, even if the individual has not yet completed the 14-day waiting period.

b. EVIDENCE OF VACCINATION

The following are considered acceptable forms vaccination proof:

- CDC COVID-19 vaccination record card (or a legible photo of the card),
- Documentation of vaccination from a health care provider or electronic health record, or
- State immunization information system record.

If vaccinated outside of the United States or its territories, a reasonable equivalent of any of the previous examples shall suffice.

c. EXEMPTIONS FROM VACCINATION

Individuals may request an exemption from COVID-19 vaccination requirements based on medical contraindication or for conflict with religious beliefs, observances, or practices. Requests shall be submitted to the Director, Human Resource Department on the approved form.

1. <u>Medical Exemption:</u> If an individual requests a medical exemption from vaccination, all documentation confirming recognized clinical contraindications to COVID-19 vaccines, and which supports the individual's request, must be signed, and dated by a licensed practitioner,

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who is not the individual requesting the exemption, and who is acting within their respective scope of practice as defined by, and in accordance with, all applicable State and local laws.

Such documentation must contain all information specifying which of the authorized COVID-19 vaccines are clinically contraindicated for the individual to receive and the recognized clinical reasons for the contraindications; and a statement by the authenticating practitioner recommending that the individual be exempted from the facility's COVID-19 vaccination requirements based on the recognized clinical contraindications.

- 2. <u>Religious Exemption:</u> If an individual requests a religious exemption from vaccination, the individual shall provide a personal written and signed statement detailing the religious basis for the vaccination objection, explaining why the religious exemption is requested, the religious principle(s) that guide the objection to vaccination, and the religious basis that prohibits the COVID-19 vaccination.
- 3. <u>Mitigation Strategies:</u> Individuals exempted from vaccination under 1 or 2 above shall undertake the following measures designed to mitigate the risk of getting/transmitting COVID-19:
 - Wear appropriate personal-protective-equipment in accordance with current CDC guidelines.
 - Be tested for the COVID-19 virus with a CDC approved test at a frequency determined by the Chief Nursing Officer. If tested positive, the individual's supervisor shall be immediately notified, and the individual shall be placed immediately off work and quarantined in accordance with CDC guidelines, law, and regulation.
 - The individual will not be permitted to work/access Center facilities until a negative COVID test is resulted and it has been at least 14 days since the positive test result.

d. TRACKING OF VACCINATION STATUS

The Center shall track and securely document the vaccination status of each individual, including those for whom there is a temporary delay in vaccination, such as recent receipt of monoclonal antibodies or convalescent plasma. Vaccine exemption requests and outcomes shall also be documented.

For employees, proof of vaccination shall be submitted to the Human Resources Department.

For independent contractors, proof of vaccination shall be submitted to the Chief Nursing Officer.

For individuals who provide care, treatment, or other services for the Center and/or its patients, under contract or by other arrangement, the Center may track and securely document the vaccination status of each individual or permit the individual/contracted entity to do so. If the latter option is chosen, the individual/contracted entity must provide evidence of vaccination or exemption prior to engaging in care, treatment, or service.

While no specific tool is mandated, records shall contain the following information – as applicable – for each individual:

- Start of Employment Date
- End of Employment Date

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- Last Name, First Name, Date of Birth
- Medical or Religious Exemption Granted / Date
- Declined COVID Vaccine / Date
- Vaccinated with Dose 1
 - o Date Administered
 - Vaccine Manufacturer Name
- Vaccinated with Dose 2
 - o Date Administered
 - Vaccine Manufacturer Name
- Is Vaccination Series Complete? Yes / No
- Eligible for Additional/Booster Dose? Yes / No, if Yes
 - Additional/Booster Dose Vaccination Date?
 - Additional/Booster Dose Manufacturer
- Employee or Non-Employee

Documentation shall be kept confidential and stored separately from the individual's personnel file.

VI. Attachments: None

VII. Related Policies and Procedures:

Policy 3.3a Pandemic/Epidemic Events

VIII. Additional References

- Medicare and Medicaid Programs; Omnibus COVID-19 Health Care Staff Vaccination Centers for Medicare & Medicaid Services on 11/05/2021
- § 482.42(g) and § 485.640(f): Condition of Participation: Infection Prevention and Control and Antibiotic Stewardship Programs.
- Safer Federal Workforce; Vaccinations, November 2021

The Gulf Coast Center	FY2022	FY2022	FY2022	FY202	2
Fiscal Year 2021	Annual Budget	Sep-21	Oct-21	YTD Actu	ıal
Board Operational Budget Schedule	Preliminary	_		YTD % s/b	8%
EXPENSES - OPERATING					
Salary and Wages	13,951,071	1,063,577.44	1,067,144.87	2,130,722.31	15%
Fringe Benefits	5,174,198	408,746.50	423,028.28	831,774.78	16%
Travel	138,134	2,857.15	2,381.98	5,239.13	4%
Consumable Supplies	199,845	12,151.75	9,550.81	21,702.56	11%
Pharmaceuticals/Laboratory	302,500	23,500.00	23,787.03	47,287.03	16%
Capital Outlay - Furniture/Equipment/Facilities	267,138	17,399.36	235,312.90	252,712.26	95%
Facilities - Rent/Maintenance/Utilities	909,732	61,597.69	83,871.93	145,469.62	16%
Other Operating Expenses	922,497	96,541.70	70,577.17	167,118.87	18%
Client Support Costs	469,875	22,964.32	22,538.50	45,502.82	10%
Consultant/Professional Providers	7,515,674	495,864.79	605,602.02	1,101,466.81	15%
TOTAL EXPENSE	\$ 29,850,665	\$ 2,205,200.70	\$2,543,795.49	\$4,748,996.19	16%
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REVENUES - OPERATING					
Local Funds					
County Funds	953,370	77,423.85	93,469.32	170,893.17	18%
Patient Fees Insurance/Reimbursement	479,314	38,197.78	27,130.31	65,328.09	14%
Miscellaneous Local Income	143,489	511.58	83,213.85	83,725.43	58%
	1,576,173	116,133.21	203,813.48	319,946.69	
Earned/Grant Income		•	·	•	
HUD - Transitional/Permanent Housing	677,824	41,000.00	58,027.41	99,027.41	15%
Recovery - Fee for Services / Grants	2,833,696	120,300.00	175,920.14	296,220.14	10%
Title XIX - Medicaid	2,511,904	160,620.03	160,270.41	320,890.44	13%
Transportation - Federal/State	-	2,200.00	131,606.22	133,806.22	#DIV/0!
Medicaid 1115 Waiver/Misc Federal	3,834,000	319,500.00	411,575.41	731,075.41	19%
Other State/Federal Funds/MAC	1,558,071	113,622.69	59,077.82	172,700.51	11%
	11,415,495	757,242.72	996,477.41	1,753,720.13	
Performance Contract DSHS & DADS					
General Revenue - MH (Adult & Child & Vets) - 10%	7,706,818	659,302.03	659,302.03	1,318,604.06	17%
General Revenue - Regional Hospital	4,232,246	340,187.17	350,379.17	690,566.34	16%
General Revenue - NGM (Adult & Child)	-	-	-	-	#DIV/0!
General Revenue - Crisis Services - 10%	1,125,427	65,671.04	65,671.04	131,342.08	12%
General Revenue/Permanency Plan - IDD	2,233,859	180,770.58	185,452.17	366,222.75	16%
Federal Block - MH (Adult & Child) and Crisis	1,560,646	101,416.07	96,741.43	198,157.50	13%
	16,858,995	1,347,346.89	1,357,545.84	2,704,892.73	
TOTAL REVENUES	\$ 29,850,664	\$ 2,220,722.82	\$2,557,836.73	\$4,778,559.55	16%
SUBTOTAL OPERATING (Rev-Exp)	\$ (1)	\$ 15,522.12	\$ 14,041.24	\$ 29,563.36	
		•		•	

Y2022	Monthly	Board Financ	<u>ial Review</u>		Unaudi	ted as of 10/31/2
scal Yea	r 2022 Unu	dited Centerwid	e General Fund Balar	nce Status		
						A (0.5=6
tal Gener	al Fund Bala	ance as of 08/31/20	21 (Unaudited)			\$ (8,679
/2021 Yea	r-to-Date Re	eported Expense an	d Revenue Totals (Unau	dited)		
		Expenditures	Operational	4,748,996		
			Non-Operational	-		
			Fund Balance	-	4,748,996	
		Revenues	Operational	4,778,560		
			Non-Operational	-	4,778,560	\$ 29
tal Canar	al Fund Dale	anas Vosu to Doto	(Unaudited)			\$ (8,709
nai Genei	ai Funu Dara	ance rear-to-Date	(Onaudited)			\$ (6,703
oard Com	mitted Use G	eneral Funds (Fis	cal Year Committed)			
Ca	pital Projects	- Facility (FY2008-	FY2 (200,000)			
		- Facility (FY2013)				
		- Facility (FY2014)				
		- Facility (FY2015)	(150,000)	(550,000.00)		
fy2	008-fy2018 E			439,153.86		
	-	Expenditure		-		
	ry2021 E	Expenditure		-		
				-	(110,846)	
					(110,040)	
Ca	pital Projects	- IT (FY2003-FY20	(600,000)			
		- IT (FY2015)	(150,000)			
Ca	ptial Projects	- IT (FY2017)	(140,000)	(890,000.00)		
fy2	003-fy2018 E	Expenditure		744,020.18		
	fy2020 E	Expenditure		-		
	fy2021 E	Expenditure		-		
				-	(1.15.000)	
					(145,980)	
ID	D Community	Service Support (F	Y20 (300,000)			
		Service Support (F				
		Service Support (F	_	(500,000.00)		
	005-fy2019 E			471,531.85		
	fy2020 E	Expenditure		-		
	fy2021 E	Expenditure				
				-		
					(28,468)	

	nnect Transit		-	-		
192	016-fy2017 E	Expenditure		-	_	
	1920101	Apenditure		-		
Co	nnect Transit	General Services	(422,869)	(422,869.00)		
	015-fy2018 E		(:==,507)	300,000.00		
		Expenditure		122,869.00		
	fy2021 E	Expenditure		-		
					-	
	· r ··· -		/***	(106.040.00)		
		Repairs (FY2014)	(186,940)	(186,940.00)		
1y20	014-fy2018 E	Expenditure		186,940.00		
		Expenditure		-		
	1,20211	z.ponururo			-	
Fle	exible Spendir	ng Supports (FY2004	4-20 (500,000)			
		ng Supports (FY2018	_	(600,000.00)		
	005-fy2019 E			517,663.44		
		Expenditure		-		
	fy2021 E	Expenditure				
					(82,337)	(367

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The Gulf Coast Center												
FY2022 Monthly Fund B	alance Re	port				Unaudit	ted as of	10/31/20	21			
		_					Ū					
Fiscal Year 2022 Unudited Ce	nterwide Ge	neral Fund B	alance Stat	<u>us</u>								
Total General Fund Balance as of	08/31/20 (Una	udited)		\$(8,679,935)								
				, (-),								
FY2022 Monthly Reported Expens	se and Revenu	e Totals (Unauc	lited)									
	September	October	November	December	January	February	March	April	May	June	July	August
Operational Expenses:	2,205,201	2,543,795										
Non-Operational Expenses:	2,203,201	(205,167.26)										
Fund Balance Expenses:	-	(200,107,20)										
Total Expenses:	2,205,201	2,338,628	-	-	-	-	-	-	-	-	-	-
Operational Revenues:	2,220,723	2,557,837										
Non-Operational Revenues:	2,220,723	(205,167.00)										
Fund Balance Revenues:		(===,====,										
Total Revenues:	2,220,723	2,352,670	-	-	-	-	-	-				-
Net increase/decrease to	15,522	14,042	-	-	-			-	-	-	-	
Fund Balance	10,022	1.,0.2										
Total General Fund Balance:	(8,695,457)	(8,709,498)	(8,709,498)	(8,709,498)	(8,709,498)	(8,709,498)	(8,709,498)	(8,709,498)	(8,709,498)	(8,709,498)	(8,299,675)	(8,299,67
Total Unrestricted Fund Balance	(7,857,601)	(8,341,867)										
Total Restricted Fund Balance	(837,856)	(367,631)										
Avg. Cost per day:	73,507	74,489	49,932	37,244	29,698	24,966	21,333	18,699	16,583	14,947	13,564	
Avg. Cost per day:	September	October	November	December	January	February	March	April	10,585 May	14,947	13,304	
DAYS OF OPERATION OF TOTAL FUND BALANCE	September 118	117	140VCHIDEF	December	Januar y	r cor uar y	IVIAI CII	Арги	Iviay			-
DAYS OF OPERATION OF												
UNRESTRICTED FUND BALANCE	107	112	•	-	•	-	•	-	•	•	•	

HEALTH INSURANCE FUND

	MONTHLY	MONTHLY	ANNUAL Y	<u>'EAR TO DATE</u>	YTD	YTD
	FY2022	FY 2022	FY 2022	FY 2022	Percent	<u>Dollar</u>
REVENUES:	BUDGET	October	BUDGET	October	Variance	Variance
Employer Contributions:	\$0.00	\$218,519.48	\$0.00	\$324,473.71	0	(\$324,473.71)
Employee Contributions:	\$0.00	\$28,011.91	\$0.00	\$40,386.91	0	(\$40,386.91)
Total Revenue:	\$0.00	\$246,531.39	\$0.00	\$364,860.62	0	(\$364,860.62)
EXPENSES:						
Medical Claims:	\$0.00	\$170,828.81	\$0.00	\$239,259.73	0	(\$239,259.73)
Pharmaceutical Claims:	\$0.00	\$46,888.74	\$0.00	\$46,888.74	. 0	(\$46,888.74)
Stop-Loss Premiums:	\$0.00	\$1,525.72	\$0.00	\$43,230.17	0	(\$43,230.17)
Administration Fees:	\$0.00	\$0.00	\$0.00	\$10,043.53	0	(\$10,043.53)
TOTAL EXPENSES:	\$0.00	\$219,243.27	\$0.00	\$339,422.17	0	(\$339,422.17)
EXCESS OF REVENUES	\$0.00	\$27,288.12	\$0.00	\$25,438.45	0	(\$25,438.45)
OVER EXPENSES						



"Better community healthcare promoting healthy living."

MINUTES - Gulf Coast Center Regular Meeting of the Board of Trustees October 27, 2021, at 6:15 p.m.

Join the meeting by phone (audio only):
Phone Number: +1 (646) 749-3112
Access Code: 745-266-421

1. Call To Order– Jamie Travis, Chair of the Board of Trustees, convened the regular meeting on Wednesday, October 27, 2021, at 6:15 p.m.

The following Board Members were present: Jamie Travis, Lieutenant Jaime Castro, Galveston County Sheriff's Department, Stephen D. Holmes, Wayne Mallia, Rick Price, Vivian Renfrow, and Caroline Rickaway

The following Board Member(s) were absent: Brazoria County Sheriff Bo Stallman-Excused, Mary Lou Flynn-DuPart- Excused, and Wayne Mallia- Excused.

Also, present: Melissa Meadows, CEO - Gulf Coast Center, CFO - Rick Elizondo.

Announcement(s):

- Judge Wayne Mallia resigned from the Board of Trustees.
- An ad hoc committee has been assembled by volunteer members for the purpose of assessing the Retirement offerings to be presented to the Board at the December 14th, 2021, Meeting of the Board of Trustees.
- 2. Citizen's Comments: NONE.
- 3. Program Report: Deferred until the December 08, 2021, Meeting of the Board of Trustees.

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14. Board	Member	Reports:	NONE
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- d. Texas Council of Community Centers Jamie Travis, Board Chair
- e. Texas Council Risk Management Fund.Mary Lou Flynn-Dupart, TCRMF Board Chair
- 15. Operations Report...... Melissa Meadows, CEO

e. SAMHSA Award – COVID Recovery Response Project – Community Mental Health Center Grant

Melissa Meadows, CEO, presented on the purpose of the Federal Award that Gulf Coast Center received through the Community Mental Health Center (CMHC) Grant Program. The funding is from the Department of Health and Human Services – Substance Abuse and Mental Health Serve Administration (SAMHSA). The award will be used to address gaps in service delivery that occurred because of the impact of COVID-19. It supports recruiting challenges, Zero Suicide initiatives, additional Psychiatry time and Ambulatory Detox implementation. Meadows outlined the number and type(s) of personnel positions that will be added because of this award.

f. Facility Update & Request for Feedback

Melissa Meadows, CEO, described potential options in the consideration of the lease of an under-utilized GCC facility. Members responded positively towards staff engaging in further research, emphasizing preference for a tenant that provides community service(s).

16. Budget, Finance and Admin Reports Rick Elizondo, CFO

b. Financial & Operational Monthly Report & YTD Summary

Rick Elizondo, CFO, presented the Operational Budget Schedule for September of Fiscal Year 2022. Elizondo reported a total fund balance of \$8,545,232 (YTD), maintaining \$7,857,601 in unrestricted general fund balance, and showing a fund balance of 116 days of operation, with 107 unrestricted days of operation.

- - c. Review and approval of September 22, 2021, Board Minutes.

On motion by Rick Price, seconded by Caroline Rickaway, the board voted the approval of the September 22, 2021, Board Minutes. The motion carried with all members voting in favor. There was no public comment.

d. Review and approval of the September 2021 Check Register

On motion by Rick Price, seconded by Caroline Rickaway, the board voted he approval of the September 2021 Check Register The motion carried with all members voting in favor. There was no public comment.

18. Action Items......Linda Bell, JD, BSN, RN

- c. Consider the approval of the recommended vendors/bidders for Janitorial Services at Galveston and Brazoria Center facilities
 - <u>Trash It Services</u> providing services for Galveston County facilities at \$88,000 for remainder of FY22.
 - <u>M&R Elite Janitorial Solutions</u> providing services for Brazoria County facilities at \$38,775 for remainder of FY22.

On motion by Caroline Rickaway, seconded by Vivian Renfrow, the board voted the approval of the FY 2022 vendors Trash It Services and M&R Elite Janitorial Solutions for Janitorial Services at Galveston and Brazoria County Center facilities. The motion carried with all members voting in favor. There was no public comment.

d. Consider the ratification of the FY22 renewal agreement with <u>Crystal Trahan MA</u>, a certified instructor and/or trainer in Mental Health First Aid (MHFA) as well as Applied Suicide Intervention Skills Training (ASIST). Reimbursement: \$45/hr. + travel costs), unchanged from FY21.

On motion by Lieutenant Jaime Castro, seconded by Caroline Rickaway, the board voted the approval of the ratification of the FY22 renewal agreement with Crystal Trahan. The motion carried with all members voting in favor. There was no public comment.

e. Consider approval of the FY21-22 Quality Management Plan.

On motion by Rick Price, seconded by Vivian Renfrow, the board voted the approval of the FY21-22 Quality Management Plan. The motion carried with all members voting in favor. There was no public comment.

- f. Consider ratification of the FY22 IDD Provider Services Network Agreement renewals with the below identified providers:
 - The Harmony Place Community Care, LLC to provide crisis respite, HCBC funded day hab, supported employment, supported home living, respite services as well as HHSC nursing facility specialized services. Rate unchanged from FY21
 - <u>Sunshine Center, INC</u>. To provide GR funded Day Habilitation, Community Support, Employment and Respite Services, HCBS funded day hab, supported

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- employment, supported home living, respite services as well as HHSC nursing facility specialized services. Rate unchanged from FY21.
- <u>Lifetime Homecare HCS, LLC</u> to provide crisis respite services. Amount not to exceed: \$150,000; \$250.00 per overnight stay. Increase of \$30,000 from FY21 due to utilization.

On motion by Caroline Rickaway, seconded by Lieutenant Jaime Castro, the board voted the approval of the ratification of the FY22 IDD Provider Agreement renewals for The Harmony Place Community Care, LLC, Sunshine Center, INC., and Lifetime Homecare HCS, LLC. The motion carried with all members voting in favor. There was no public comment.

g. Consider ratification of the FY21 contractual amendment to the agreement with <u>Lifetime Homecare HCS, LLC</u>, provider of crisis respite services. The agreement is being amended to increase the do not exceed amount to \$251,650.00 (increase of \$131,650.00 due to 3 consumers utilizing a bed daily while awaiting a crisis waiver diversion slot).

On motion by Caroline Rickaway, seconded by Lieutenant Jaime Castro, the board voted the approval of the ratification of the FY21 contractual amendment to the agreement with Lifetime Homecare HCS, LLC. The motion carried with all members voting in favor. There was no public comment.

h. Consider ratification of the FY22 renewal agreement with <u>TWG Investments</u>, <u>LTD dba The Wood Group</u> to provide crisis respite services. Amount not to exceed: \$368,740.00. No change from FY21

On motion by Lieutenant Jaime Castro, seconded by Vivian Renfrow, the board voted the approval of the ratification of the FY22 renewal agreement with TWG Investments, LTD dba The Wood Group. The motion carried with all members voting in favor. There was no public comment.

Consider ratification of the FY22 renewal lease agreement with <u>TWG Investments</u>, <u>LTD dba The Wood Group</u>. This lease is associated with the crisis respite program. \$1,642.50 monthly (revenue). No change from FY21

On motion by Vivian Renfrow, seconded by Caroline Rickaway, the board voted the approval of the ratification of the FY22 renewal lease agreement with TWG Investments, LTD dba The Wood Group. The motion carried with all members voting in favor. There was no public comment.

j. Consider ratification of the FY22 renewal agreement with J Allen and Associates of Texas, LLC for comprehensive psychiatric/tele-psychiatric and mental health services and pharmacy services in the Brazoria County Jail. Reimbursement: \$1000/mo. plus medication expense. No change from FY21.

On motion by Lieutenant Jaime Castro, seconded by Caroline Rickaway, the board voted the approval of the ratification of the FY2 renewal agreement with J Allen and Associates of Texas, LLC. The motion carried with all members voting in favor. There was no public comment.

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k. Consider ratification of the below Providers of substance use residential treatment services for FY22:

	TRA-INTENSIVE	TRA-SUPPORTIVE
2022 Rate of Reimbursement	\$96.07	\$36.47
Alcohol/Drug Abuse Women's	\$175,000.00	\$45,000.00
Center, Inc		
BARC Medically Indigent	\$175,000.00	\$45,000.00
Care		
On the Pathway to Recovery	\$500,000.00	\$80,000.00

On motion by Lieutenant Jaime Castro, seconded by Caroline Rickaway, the board voted the approval of the ratification of the FY22 Providers, Alcohol/Drug Abuse Women's Center Inc, BARC Medically Indigent Care, and On the Pathway to Recovery for substance use residential treatment services. The motion carried with all members voting in favor. There was no public comment.

19. Pending or Revised Action Items.....Linda Bell, JD

Pending or revised items are those items which were on a prior board agenda but not completely resolved or there has been a revision since approval. The items may be listed for update purposes or final action by the Board.

NONE.

Date	Event	Location	Time		
October 27, 2021	Board Meeting	SBCSC	6:15 PM		
November 17-19, 2021	Annual Texas Council Conf.	CANCELED			
December 8, 2021	Board Meeting	Admin Bldg.	TBA		
January 26, 2022	Board Meeting	SBCSC	6:15 PM		
February 23, 2022	Board Meeting	Admin Bldg.	6:15 PM		
March 23, 2022	Board Meeting	SBCSC	6:15 PM		
April 27, 2022	Board Meeting	Admin Bldg.	6:15 PM		
May 25, 2022	Board Meeting	SBCSC	6:15 PM		
June 20-22, 2022	Texas Council Annual Conf.	Fort Worth			
July 27, 2022	Board Meeting	SBCSC	6:15 PM		
August 24, 2022 Board Meeting Admin Bldg. 6:15 PM					
Admin location: 10000 EF Lowry Expressway #1220, Texas City, TX					
SBCSC location: 101 Tign	er, Angleton, TX				

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21. Executive Session: NONE.

- As authorized by Chapter §551.071 of the Texas Government Code, the Board of Trustees reserves the right to adjourn into Executive Session at any time during this meeting to seek legal advice from its Attorney about any matters listed on the agenda.
- Pursuant to Texas Government Code §551.074 the Board will convene in Executive Session to discuss personnel matters related to the replacement of the Chief Executive Officer position.

22. Reconvene to Open Session

23.	Adjo	ourn:	6:35	p.m.
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There being no further business to bring before the Board of Trustees, the meeting was adjourned at 6:35 p.m.

Respectfully,	Approved as to Content and Form,
Lisa M. Becker	Jamie Travis
Secretary to the Board of Trustees	Board Chair