



NOTICE OF MEETING

MEMBERS OF THE BOARD OF TRUSTEES

The Gulf Coast Center Meeting of the Board of Trustees for the month of February will be held on

Wednesday, February 22nd, 2023, at 6:15 p.m.,

at the Southern Brazoria County Service Center (SBCSC),
101 Tigner, Angleton.



Thanks,

Rachel Griffitts

Rachel M. Griffitts

Secretary to the Board of Trustees

4352 Emmett F. Lowry
Expressway
Texas City, TX 77591
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cc: February Board of Trustees File



"Better community healthcare promoting healthy living."

1. **Call To Order**Jamie Travis, Board Chair
 - a. Announcements and Introductions
2. **Citizens' Comments**
3. **Program Report:** Community First Choice.....Brook Camarata, IDD Team Lead
4. **Board Member Reports**
 - a. Texas Council of Community Centers Jamie Travis, Board Chair
 - b. Texas Council Risk Management Fund.Mary Lou Flynn-Dupart, TCRMF Board Chair
5. **Operations Report:**..... Felicia Jeffery, CEO
 - a. Operational, Clinical, & Financial Excellence
 - BJEDI-A (Belonging, Justice, Equity, Diversity, Inclusion, Access) - Linda Bell, General Counsel
 - Brazoria County Drug Court and DWI Court Update – Craig Fritz, Specialty Courts Programs Supervisor, Brazoria County
 - b. Clinical Operations Dashboard
6. **Budget, Finance and Admin Reports**.....Rick Elizondo, CFO
 - a. Financial & Operational Monthly Report & YTD Summary **(Pg. 5-8)**
 - b. Corporate Compliance Annual Training & Report presented by Linda Bell, General Counsel **(Pg. 9-13)**
7. **Consent Agenda**.....Linda Bell, JD, BSN, RN
Consideration and Approval of Recommendations and Acceptance of Consent Agenda Items.
(Consent agenda items may be pulled from this consideration for individual action or presentation.)
 - a. Review and approval of January 25, 2023 Board Minutes. **(Pg.14-20)**
 - b. Review and approval of the January 2023 Check Register.
8. **Action Items**.....Linda Bell, JD, BSN, RN
 - a. Consider approval of an increase in the Center's mileage reimbursement rate from \$0.625 cents per mile to \$0.655 cents per mile retro to January 1, 2023 for any mileage incurred on or after this

date. The revised rate is consistent with the IRS allowable mileage rate for use of personal vehicle, as well as the State of Texas Comptroller's travel policy, which were revised effective January 1, 2023 \$0.655 cents per mile rate.

- b. Consider ratification of the consulting agreement with James Rollens, III for safety related consultation and training.
Term: January 1, 2023- August 31, 2023
Rate of Reimbursement: \$58/hr.
Description: James was the Center's Safety Officer for over two decades and retired December 31, 2023. He has agreed to train the new Safety Officer and provide consultation as needed.

- c. Consider ratification of the FY23 renewal agreement with NAMI Gulf Coast.
Amount not to exceed: \$28,000.00
Description: NAMI provides education and training to support CCBHC initiatives, support groups for persons served by Gulf Coast Center and their families, and coordination of legislative forums as needed.

- d. Consider approval of the Centers FY23 ADA SELF-EVALUATION AND TRANSITION PLAN.
Description: This required plan describes the Center's efforts in addressing barriers, accessibility, and accommodations for individuals at Center facilities. Updates made included adding current CEO, ADA Coordinator, and GICSC new address. No substantive revisions made. **(pg. 21-45)**

- e. Consider ratification of the 5ft water line easement and right-of-way easement with the City of Alvin at the Center's Alvin location, 101 N. Brennan, Alvin, TX for \$1000.00.

- f. Consider ratification of the new agreement with The University of Texas Health Science Center at Houston ("UTHealth"), on behalf of its Harris County Psychiatric Center and its Dunn Behavioral Sciences Center for inpatient psychiatric services for Youth.
Term: September 1, 2022 – August 31, 2023
Amount not to exceed: \$100,000 (\$700/bed day)
Description: UTHealth will provide Private Psychiatric Beds to expand inpatient bed capacity for youth.

- g. Consider ratification of the new agreement with Misty's Mystical Cleaning Services for janitorial services in Galveston County.
Term: February 1, 2023 – August 31, 2023
Amount not to exceed: \$45,150
Description: Due to unresolved issues the Center had to terminate its relationship and immediately seek the services of Misty's Mystical Cleaning Service to complete janitorial service in the Center's Galveston County facilities.

- h. Consider approval of the new agreement with Community Health Network for psychiatric services associated with the Ambulatory Withdrawal Management Services.
Term: March 1, 2023 – August 31, 2023
Rate of Reimbursement: \$342.02 per encounter for each patient per day
Description: Community Health Network (Brazoria County FQHC) will essentially provide the medical component (with exception of daily nursing service/assessment), while GCC will provide the counseling component with daily programming led by LCDCs and Peer Counselor for the Ambulatory Withdrawal Management services. An MD from CHN will serve as medical

director and will evaluate/admit individuals in need of service; and will supervise their mid-level NPs who will provide follow-up visits following admission to program.

- i. Consider approval of the Board Resolution and Interlocal Agreement with Purchasing Cooperative of America (PCA) a national purchasing cooperative active in all 50 states that provides a host of vendors who have met contracting, purchasing, and/or RFP or RFQ solicitation requirements. (No cost for membership)
- j. Consider approval of new Policy 8.20 Prohibited Technologies Security Policy. Governor Greg Abbott is requiring all state agencies and state contractors to ban the video-sharing application TikTok and other prohibited technologies. This policy was created for compliance with the directive. (pg. 46-49)

9. Pending or Revised Action Items.....Linda Bell, JD, BSN, RN

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.

10. Calendar.....Jamie Travis, Board Chair

Date	Event	Location	Time
<i>September 20, 2022</i>	<i>Board Retreat</i>	<i>Tremont House</i>	<i>12:00</i>
September 28, 2022	Board Meeting	SBCSC	6:15 PM
October 26, 2022	Board Meeting	MCSC	6:15 PM
<i>December 7, 2022</i>	<i>Board Meeting</i>	<i>SBCSC</i>	<i>6:15 PM</i>
January 25, 2023	Board Meeting	MCSC	6:15 PM
February 22, 2023	Board Meeting	SBCSC	6:15 PM
March 22, 2023	Board Meeting	MCSC	6:15 PM
April 26, 2023	Board Meeting	SBCSC	6:15 PM
May 24, 2023	Board Meeting	MCSC	6:15 PM
June 21-23, 2023	TX Council Annual Conference	Westin Galleria Houston	
July 26, 2023	Board Meeting	SBCSC	6:15 PM
August 23, 2023	Board Meeting	MCSC	6:15 PM
MCSC location: 7510 FM 1765, Texas City, TX			
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.*

12. Reconvene to Open Session

13. Adjourn

The Gulf Coast Center					
FY2023 Monthly Board Financial Review				<i>Unaudited as of 01/31/2023</i>	
Fiscal Year 2023 Unaudited Centerwide General Fund Balance Status					
Total General Fund Balance as of 08/31/2022 (Audited)				\$ 9,374,633	
FY2023 Year-to-Date Reported Expense and Revenue Totals (Unaudited)					
Expenditures		<i>Operational</i>	12,953,414		
		<i>Non-Operational</i>	-		
		<i>Fund Balance</i>	-	12,953,414	
Revenues		<i>Operational</i>	13,492,685		
		<i>Non-Operational</i>	-	13,492,685	\$ 539,271
Total General Fund Balance Year-to-Date (Unaudited)				\$ 9,913,904	
Board Committed Use General Funds (Fiscal Year Committed)					
Capital Projects - Facility (FY2008-FY2011)		(200,000)			
Capital Projects - Facility (FY2013)		(100,000)			
Capital Projects - Facility (FY2014)		(100,000)			
Capital Projects - Facility (FY2015)		(150,000)	(550,000.00)		
fy2008-fy2018 Expenditure			439,153.86		
fy2020 Expenditure			-		
fy2021 Expenditure			-		
				(110,846)	
Capital Projects - IT (FY2003-FY2014)		(600,000)			
Capital Projects - IT (FY2015)		(150,000)			
Capital Projects - IT (FY2017)		(140,000)	(890,000.00)		
fy2003-fy2018 Expenditure			744,020.18		
fy2020 Expenditure			-		
fy2021 Expenditure			-		
				(145,980)	
IDD Community Service Support (FY2011-2)		(300,000)			
IDD Community Service Support (FY2016)		(100,000)			
IDD Community Service Support (FY2018)		(100,000)	(500,000.00)		
fy2005-fy2019 Expenditure			471,531.85		
fy2020 Expenditure			-		
fy2021 Expenditure			-		
				(28,468)	
Connect Transit (FY LJ Urban		-	-		
fy2016-fy2017 Expenditure			-		
fy2018 Expenditure			-		
Connect Transit (FY General Services		(422,869)	(422,869.00)		
fy2015-fy2018 Expenditure			300,000.00		
fy2020 Expenditure			122,869.00		
fy2021 Expenditure			-		
				-	
Major Facility Repairs (FY2014)		(186,940)	(186,940.00)		
fy2014-fy2018 Expenditure			186,940.00		
fy2020 Expenditure			-		
fy2021 Expenditure			-		
				-	
Flexible Spending Supports (FY2004-2013)		(500,000)			
Flexible Spending Supports (FY2018)		(100,000)	(600,000.00)		
fy2005-fy2019 Expenditure			517,663.44		
fy2020 Expenditure			-		
fy2021 Expenditure			-		
				(82,337)	(367,631)
Total General Fund Balance Year-to-Date (Unaudited)				\$ 9,913,904	
Unrestricted Use General Fund Balance (Unaudited)				\$ 9,546,274	

If you need additional assistance to effectively participate in or observe this meeting, please contact (409) 763-2373 at least 24 hours prior to the meeting so that reasonable accommodations can be made to assist you.

The Gulf Coast Center												
FY2023 Monthly Fund Balance Report						<i>Unaudited as of 01/31/2023</i>						
Fiscal Year 2023 Unaudited Centerwide General Fund Balance Status												
Total General Fund Balance as of 08/31/22 (Audited).....											\$ (9,374,633)	
FY2023 Monthly Reported Expense and Revenue Totals (Unaudited)												
	September	October	November	December	January	February	March	April	May	June	July	August
<i>Operational Expenses:</i>	2,433,929	2,588,534	2,600,290	2,723,758	2,606,033							
<i>Non-Operational Expenses:</i>												
<i>Fund Balance Expenses:</i>	-											
<i>Total Expenses:</i>	2,433,929	2,588,534	2,600,290	2,723,758	2,606,033	-	-	-	-	-	-	-
<i>Operational Revenues:</i>	2,429,421	2,653,494	2,789,300	2,718,085	2,902,106							
<i>Non-Operational Revenues:</i>												
<i>Fund Balance Revenues:</i>												
<i>Total Revenues:</i>	2,429,421	2,653,494	2,789,300	2,718,085	2,902,106	-	-	-	-	-	-	-
<i>Net increase/decrease to Fund Balance</i>	(4,508)	64,959	189,010	(5,673)	296,073	-	-	-	-	-	-	-
<i>Total General Fund Balance:</i>	(9,370,125)	(9,435,085)	(9,624,094)	(9,618,422)	(9,914,495)	(9,914,495)	(9,914,495)	(9,914,495)	(9,914,495)	(9,914,495)	(9,914,495)	(9,914,495)
<i>Total Unrestricted Fund Balance</i>	(8,937,733)	(9,067,454)	(9,211,821)	(9,206,148)	(9,546,274)							
<i>Total Restricted Fund Balance</i>	(367,631)	(367,631)	(367,631)	(367,631)	(367,631)							
<i>Avg. Cost per day:</i>	81,131	82,335	83,767	84,807	84,657							
<i>DAYS OF OPERATION OF TOTAL FUND BALANCE</i>	115	115	115	113	117	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	-
<i>DAYS OF OPERATION OF UNRESTRICTED FUND BALANCE</i>	110	110	110	109	113	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	-
<i>DAYS OF OPERATION OF RESTRICTED FUND BALANCE</i>	5	4	4	4	4	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	-

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MONTHLY BOARD FINANCIALS

JANUARY 2023

	<u>MONTHLY</u> <u>FY2023</u> <u>BUDGET</u>	<u>MONTHLY</u> <u>FY 2023</u> <u>January</u>	<u>ANNUAL</u> <u>FY 2023</u> <u>BUDGET</u>	<u>YEAR TO DATE</u> <u>FY 2023</u> <u>January</u>	<u>YTD</u> <u>Percent</u> <u>Variance</u>	<u>YTD</u> <u>Dollar</u> <u>Variance</u>
<u>EXPENSES</u>						
Salary and Wages	\$1,254,997.93	\$1,239,618.41	\$15,059,974.84	\$6,181,669.51	41.1%	\$8,878,305.33
Fringe Benefits	\$446,286.77	\$469,019.28	\$5,355,437.92	\$2,285,291.44	42.7%	\$3,070,146.48
Travel	\$4,881.84	\$9,514.03	\$58,581.66	\$74,638.64	127.4%	(\$16,056.98)
Consumables	\$26,367.34	\$45,732.43	\$316,405.49	\$158,260.32	50.0%	\$158,145.17
Pharmaceuticals/other	\$26,384.25	\$19,462.19	\$316,610.91	\$91,930.29	29.0%	\$224,680.62
Furniture/Equip/Computer>\$5000	\$9,422.89	\$55,249.76	\$113,073.86	\$97,005.33	85.8%	\$16,068.53
Furniture/Equip/Computer<\$5000	\$16,098.57	\$19,794.25	\$193,181.82	\$67,915.92	35.2%	\$125,265.90
Facility Costs:	\$35,703.89	\$52,423.99	\$428,446.25	\$249,910.68	58.3%	\$178,535.57
Utilities	\$10,273.42	\$13,958.87	\$123,279.81	\$67,692.61	54.9%	\$55,587.20
Communications:	\$32,122.51	\$40,218.07	\$385,468.35	\$187,097.73	48.5%	\$198,370.62
Insurance	\$37,162.05	\$35,884.08	\$445,943.25	\$170,356.29	38.2%	\$275,586.96
Vehicle Operating	\$10,440.28	\$14,753.79	\$125,283.14	\$75,503.22	60.3%	\$49,779.92
Other Operating	\$13,625.08	(\$1,615.16)	\$163,500.97	\$37,072.66	22.7%	\$126,428.31
Client Support Cost	\$32,730.11	\$19,620.57	\$392,760.67	\$92,989.34	23.7%	\$299,771.33
Unallowable Costs	\$10,877.01	\$582.10	\$130,524.10	\$742.29	00.6%	\$129,781.81
Consultant/Professional - External	\$9,138.91	\$8,944.00	\$109,666.89	\$52,799.64	48.2%	\$56,867.25
Other Organizations - Internal	\$10,466.25	\$11,120.00	\$125,595.00	\$49,610.00	39.5%	\$75,985.00
Other Organizations - External	\$554,330.49	\$509,271.92	\$6,651,965.61	\$2,821,549.39	42.4%	\$3,830,416.22
Other Organizations - Non-Clinical	\$31,382.61	\$42,480.53	\$376,591.00	\$191,378.57	50.8%	\$185,212.43
<u>TOTAL EXPENSES:</u>	<u>\$2,572,692.20</u>	<u>\$2,606,033.11</u>	<u>\$30,872,291.54</u>	<u>\$12,953,413.87</u>	<u>42.0%</u>	<u>\$17,918,877.67</u>

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MONTHLY BOARD FINANCIALS

JANUARY 2023

	<u>MONTHLY</u> <u>FY2023</u> <u>BUDGET</u>	<u>MONTHLY</u> <u>FY 2023</u> <u>January</u>	<u>ANNUAL</u> <u>FY 2023</u> <u>BUDGET</u>	<u>YEAR TO DATE</u> <u>FY 2023</u> <u>January</u>	<u>YTD</u> <u>Percent</u> <u>Variance</u>	<u>YTD</u> <u>Dollar</u> <u>Variance</u>
REVENUES						
Local Funds:	\$128,051.93	\$168,900.33	\$1,536,623.00	\$627,178.06	40.8%	\$909,444.94
Earned Income:	\$311,462.70	\$409,752.01	\$3,737,552.44	\$1,787,911.99	47.8%	\$1,949,640.45
State Funds Allocated:	\$1,216,533.25	\$1,216,533.27	\$14,598,398.88	\$6,082,666.35	41.7%	\$8,515,732.53
StateFunds Grants-Cost Reimb:	\$244,093.81	\$182,346.16	\$2,929,125.53	\$1,027,316.71	35.1%	\$1,901,808.82
Federal Funds - Allocated	\$80,716.07	\$80,716.07	\$968,593.00	\$403,580.35	41.7%	\$565,012.65
Federal Funds -Grants Cost Reimb:	\$290,618.35	\$249,197.18	\$3,487,420.15	\$1,038,036.36	29.8%	\$2,449,383.79
Federal Funds - Misc.:	\$28,333.60	\$81,055.60	\$340,003.00	\$220,390.00	64.8%	\$119,613.00
Federal Funds -DPP:	\$83,333.21	\$88,499.99	\$999,998.44	\$380,499.98	38.1%	\$619,498.46
Federal Funds - CCP	\$189,547.96	\$425,105.00	\$2,274,575.60	\$1,925,104.98	84.6%	\$349,470.62
Total Revenue	\$2,572,690.88	\$2,902,105.61	\$30,872,290.04	\$13,492,684.78	43.7%	\$17,379,605.26
EXCESS OF REVENUE OVER EXPENSES	(\$1.32)	\$296,072.50	(\$1.50)	\$539,270.91	15954994.8%	(\$2,292,411)

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Gulf Coast Center

Corporate Compliance Annual Report

Fiscal Year 2022

Submitted by:
Cindy Kegg, Corporate Compliance Officer
Gulf Coast Center
February 2023

Gulf Coast Center
Corporate Compliance Annual Report
Fiscal Year 2022

Gulf Coast Center’s Corporate Compliance Program, implemented in FY 2002, continues to serve as the foundation for the compliance efforts within the organization. The Compliance Plan and Business Code of Conduct convey the Center’s clear commitment to honest and responsible conduct, and reinforces the expectation of lawful and ethical behavior throughout the organization. This report reflects key components of the Center’s compliance program with corresponding activities of FY 2022, as well as comparison figures from FY 2002 through FY 2022 where indicated. The report also includes a summary of accomplishments from the Federal fiscal year (October 2021 – September 2022) as reported by the Office of Inspector General (OIG) and the Department of Justice (DOJ).

Corporate Compliance Training

Providing education on the procedures, laws and expectations associated with compliance is an essential component of Gulf Coast Center’s overall compliance strategy and is achieved through mandatory compliance training. During FY 2022, training for new hires and existing staff was accomplished utilizing the Corporate Compliance & Rights Protection video developed by the Compliance Officer and General Counsel. Additionally, an accompanying post-test/final exam was developed and implemented in Relias in FY 2022 to help ensure that staff have attained a basic level of competency on the subject matter. The post-test replaced the annual Compliance Survey and, like other Center required trainings in Relias, now affords the opportunity for automated scoring and tracking. One hundred seventy-eight (178) individuals completed the compliance training video during FY 2022. Ninety (90) eligible staff¹ opted to complete the *Corporate Compliance and Rights Protection Exemption Test* with a passing score of 80 percent or better. Confirmation of training/test completion is maintained by both Human Resources and the Compliance Officer.

Compliance Reports / Investigations

The Center’s Compliance Officer investigated two (2) compliance concerns impacting twenty-two (22) individuals during FY 2022. Both incidents were related to unauthorized disclosures; one pertained to staff utilizing outside email accounts to transmit client information, the other was related to information being released to the incorrect person.

The following table denotes the number and type of reported compliance concerns investigated by the Compliance Officer since the initiation of the compliance program in FY 2002.

(Numbers in parenthesis represent incidents resulting in a refund. For example: 2 (1) reads 2 investigations, 1 of which resulted in a refund. Similarly, the *Medicaid Refund* column denotes in parenthesis the number of incidents responsible for the refund for that fiscal year).

¹ 1) have been employed with the Center at least 5 years (60 months); 2) have not been the subject of a compliance investigation; and 3) have not caused a payback of greater than \$50.

FY	Confidentiality	Billing/ Documentation	Credentials	Fraud Allegations Unconf. / Conf.		Contract/ Other	TOTAL	Medicaid Refund
2002	0	2 (1)	2 (1)	0		2	6	\$9,821.31 (2)
2003	1	3 (1)	3 (1)	0		1	8	\$3,654.20 (2)
2004	11	2 (1)	0	3 (1)	1 (1)	0	17	\$15,437.36 (3)
2005	14	2	0		1 (1)	0	17	\$17,699.55 (1)
2006	8	3 (1)	0	1 (1)		0	12	\$12,471.46 (2)
2007	11	3 (2)	0	0		0	14	\$14,994.83 (2)
2008	5	0	0		2	0	7	(0)
2009	5	2	0		3 (3)	0	10	\$27,672.28 (3)
2010	4	0	0	3 (3)	1 (1)	0	8	\$22,168.46 (4)
2011	7	0	0	0		1	8	(0)
2012	22	2 (1)	0	1		1	26	\$46.76 (1)
2013	18	1	0		1 (1)	2	22	\$275.22 (1)
2014	22	0	0	0	0	0	22	(0)
2015	18	2	0	0	0	0	20	(0)
2016	111	1	0	0	0	0	112	\$2,585.28 (1)
2017	25	0	0	0	0	0	25	(0)
2018	18	0	0	0	0	0	18	(0)
2019	16	0	0	1	0	0	17	(0)
2020	4	0	0	0	0	0	4	(0)
2021	14	0	0	0	0	0	14	(0)
2022	2	0	0	0	0	0	2	(0)
Total	336	23	5	9	9	7	389	\$126,826.71 (22)

Corporate Compliance Committee

The Corporate Compliance Committee meets regularly and continues to advise and assist the Compliance Officer with monitoring the compliance program and ensuring that the Center’s compliance efforts are both effective and responsive to the needs of the organization. The committee convened quarterly during FY 2022 with meetings on September 21, 2021; December 16, 2021; March 15, 2022; and June 21, 2022.

Committee membership remained fairly constant, with only Chief Information Officer Reggie Brumfield leaving the committee when he exited the Center in March 2022.

Membership during FY 2022 included the following individuals and is reflective of the major service areas:

- Amy McMahon, Director of Behavioral Health Services, Brazoria County
- Casey Duty, Manager of Utilization Services
- Cindy Kegg, Corporate Compliance Officer
- Jerry Freshour, Director of Crisis & Community Outreach
- Mary Mallini, Director of Reimbursement Services
- Melissa Hollman, Contract Manager/QM Supervisor
- Reggie Brumfield, Chief Information Officer
- Sandy Patterson, Director of Behavioral Health Services, Galveston County
- Timothy Ornelas, IDD Crisis Intervention Specialist

In addition to addressing and responding to any specific concerns identified during the quarterly meetings, the committee routinely reviews the following:

- Compliance reports and incidents
- Compliance investigations
- Business Code of Conduct Violations
- Overpayments / refunds / fee collection
- Audit findings
- Quality Management activities
- Drug and alcohol testing
- Licensure / website verifications / exclusion lists / background check issues
- HITECH Breach Notification issues
- The Compliance Plan, Compliance Procedures and Business Code of Conduct
- Risk and Compliance Annual Assessment
- MIS Security Risk Assessment

Fiscal Audit

The Center’s annual Financial and Compliance Audit for the year ending August 31, 2022, was completed by Eide Bailley in January 2023. Per Chief Financial Officer Rick Elizondo, there were no Federal or State compliance findings. The audit was reviewed and approved by the Center’s Board of Trustees at the January 25, 2023 Board Meeting.

Compliance – A Federal Perspective

On December 5, 2022, the Health and Human Services Office of Inspector General posted the OIG’s Semi-Annual Report to Congress covering April 1, 2022 – September 30, 2022. The report highlighted the achievements of the 2022 Federal fiscal year (October 1, 2021 through September 30, 2022) and included the below accomplishments:

- nearly \$4 billion in expected recoveries resulting from HHS-OIG audits and investigations;
- 710 criminal enforcement actions against individuals or entities that engaged in crimes that affected HHS programs;
- exclusion of 2,332 individuals and entities; and
- civil actions against 736 individuals or entities which include false claims and unjust-enrichment lawsuits filed in Federal district court, civil monetary penalty settlements, and administrative recoveries related to provider self-disclosure matters.

On February 7, 2023, a press release from the *Office of Public Affairs* reported that the Department of Justice recovered over \$2 billion in settlements and judgments from civil cases involving fraud and false claims against the government in the fiscal year ending Sept. 30, 2022. According to the release, recoveries since 1986, when Congress substantially strengthened the civil False Claims Act, now total more than \$72 billion. Accomplishments highlighted in the DOJ report include:

- Of the \$2.2 billion in settlements and judgments, over \$1.7 billion involved the health care industry, including drug and medical device manufacturers, durable medical equipment, home health and managed care providers, hospitals, pharmacies, hospice organizations, and physicians.
- Recoveries reflected new enforcement priorities, including fraud in pandemic relief programs and alleged violations of cybersecurity requirements in government contracts and grants.

- The government and whistleblowers were a party to 351 settlements and judgements, the second-highest number of settlements and judgments in a single year.
- Whistleblowers filed 652 qui tam² suits with settlements and judgements exceeding \$1.9 billion. The government paid out over \$488 million to those who exposed fraud and false claims by filing these actions. The number of lawsuits has grown significantly since 1986, with an average of more than 12 new cases every week during fiscal year 2022.

Conclusion

Gulf Coast Center recognizes the importance of an effective compliance program and understands that all healthcare providers are expected to establish and maintain a compliance strategy that reduces the organization’s risk of improper, unethical or unlawful conduct. The Center’s Compliance Plan and Business Code of Conduct, now in place over twenty years, continues to serve as the cornerstone of the Center’s compliance program and demonstrates the agency’s well established commitment to honest and responsible corporate conduct. The Compliance Officer, Compliance Committee, General Counsel and Executive Leadership/Management will continue to work collaboratively to ensure that the Center’s commitment to ethical and compliant conduct remains both a high priority and a clear expectation within the organization.

² *Qui tam* provisions of the False Claims Act allow private citizens to file suits alleging false claims on behalf of the government. If the United States prevails in the action, the whistleblower, known as a relator, receives up to 30 percent of the recovery.

If you need additional assistance to effectively participate in or observe this meeting, please contact (409) 763-2373 at least 24 hours prior to the meeting so that reasonable accommodations can be made to assist you.



GULF COAST CENTER

"Better community healthcare promoting healthy living."

**MINUTES – Gulf Coast Center
Regular Meeting of the Board of Trustees
January 25th, 2023, at 6:15 p.m.
Mainland Community Service Center**

Join the meeting by phone (audio only):

Phone Number: +1 (646) 749-3112

Access Code: 745-266-421

1. **Call To Order:** Rick Price, Vice Chair of the Board of Trustees, convened the regular meeting on Wednesday, January 25th, 2023, at 6:18 p.m.

The following Board Members were present: Rick Price, Galveston County Sheriff Lt. Jaime Castro, Galveston County Commissioner Stephen Holmes, Mary Lou Flynn-Dupart, Vivian Renfrow, Chris Cahill and Brazoria County Sheriff Bo Stallman

The following Board Member(s) were absent: Jamie Travis - excused and Caroline Rickaway - excused

Also present: Felicia Jeffery, CEO; Linda Bell, General Counsel; Sandy Patterson, Director of Behavioral Health Services; Jerry Freshour, Director of Crisis and Community Outreach; Diane Terrell, Audit Partner, Eide Bailly LLP.

Announcement(s): None.

2. **Citizen’s Comments:** None.
3. **Program Report:** Diane Terrell, audit partner for Eide Bailly LLP gave a high-level report of Gulf Coast Center’s revenue and expenses for the 12 months prior to the end of a fiscal year 2022. She referred to the balance sheet for the general fund. The total fund balance in the general fund balance 9.3 million dollars. Diane reported that the audit found no disagreements or difficulties and no compliance concerns. Diane wanted to share with the board how much she enjoyed working with Rick Elizondo, CFO and his team.
4. **Board Member Reports:**
 - a. **Texas Council of Community Centers**.....Jamie Travis Board Chair

Rick Price, vice chair stated the last Texas Council meeting was last week. The Texas Council Board Report was emailed to all Center board members.

- b. **Texas Council Risk Management Fund.....**Mary Lou Flynn-Dupart TCRMF Board
Linda Bell, General Council noted the next meeting will take place on the 2nd and 3rd of February.

5. **Operations Report.....**Felicia Jeffery, CEO

a. **Operational, Clinical, & Financial Excellence**

BJEDI-A (Belonging, Justice, Equity, Diversity, Inclusion, Access)- Felicia Jeffery stated the BJEDI-A will be deferred.

Status of Galveston Island Community Service Center relocation.

Sandy Patterson Director of Behavioral Health Services reported the Galveston Clinic has relocated and collocated with Coastal Health and Wellness. The move went well and now they are working with Coastal Health and Wellness staff to share services. The services that are located there are our outpatient mental health clinic, outpatient substance use services, Crisis services, OSHAR team integrated health care with Coastal health and Wellness. We also will have our COAST team which is our crisis services with law enforcement team. The team has the goal of making this work.

Pam Mescall, Nurse Manager-Integrated Healthcare Services recalled a medical emergency they had two weeks after moving into the new location. Nurse May and Pam were called to an exam room where a patient was seizing. Coastal Health and Wellness's nurse and a provider came into assist. Coastal's physician was able to administer oxygen to the seizing patient.

Drug Court and DWI Court Update

Jerry Freshour, Director of Crisis & Community Outreach presented on the Galveston County HOPE or Helping Ourselves with Positive Efforts Drug Court. Drug Court is a special program within the Galveston County Criminal Justice System. It is a court-supervised treatment program for participants with nonviolent criminal charges who also have a drug or alcohol addiction.

The program is voluntary and is the personal choice of participants. The Drug Court Team is present to guide and assist, but the final responsibility lays with the participants who must be motivated to make the necessary changes and commitments to drug-free lives.

GCC OSAR Priority Access Licensed Chemical Dependency Counselor Rita McGee is on the HOPE Court team to screen applicants for the specialty court to determine their diagnostic eligibility. Rita also makes treatment recommendations and service linkages for SUD residential, COPSD, and outpatient intensive outpatient counseling depending on the diagnosed need.

Jerry Freshour, GCC stated services, case management, counseling, rehab and anything else they may need.

HOPE Drug Court Served in FY22

OSAR Screenings:

2,559 total screenings

2420 adults and 139 youth

153 with opioid disorders

COPSD Services:

86 served

Residential Services:

272 served

Intensive Outpatient Counseling

366 served

The Power of Advocacy Webinar

Rachel Griffiths, Secretary to the Board of trustees, stated Gulf Coast Center is partnering with NAMI Gulf Coast on an Advocacy Webinar with the goal of connecting attendees with Advocacy resources. She referred to the list of speakers on the flyer. We have a panel of speakers who will be speaking on how they use advocacy. Gulf Coast Center is pleased to announce Representative Greg Bonnen, M.D. will be the Key Note speaker.

b. Clinical Operations Dashboard

Felicia Jeffery gave a status update of the clinical operations dashboard. She is still working on getting all the data needed.

6. Budget, Finance and Admin Reports.....Felicia Jeffery, CEO

Financial & Operational Monthly Report & YTD Summary

Felicia Jeffery, CEO, presented the Operational Report for December 2022, There is a total fund balance of \$ 9.5 million (YTD), maintaining \$ 9.2 million in unrestricted general fund balance and showing a fund balance of 110 days of operation, with 106 unrestricted days of operation.

7. Consent Agenda.....Linda Bell, JD, BSN, RN

Consideration and Approval of Recommendations and Acceptance of Consent Agenda Items. *(Consent agenda items may be pulled from this consideration for individual action or presentation.)*

a. Review and approval of December 7, 2022, Board Minutes.

On a motion by Mary Lou Flynn-Dupart, seconded by Commissioner Stephen Holmes, the board approved the December 7, 2022, Board Minutes. The motion carried with all members voting in favor. There was no public comment.

b. Review and approval of the 2022 December Check Register

On a motion by Mary Lou Flynn-Dupart, seconded by Commissioner Stephen Holmes, the board approved the December 2022 Check Register. The motion carried with all members voting in favor. There was no public comment.

8. **Action Items**..... .Linda Bell, JD BSN, RN

a. Consider approval of the FY 2022 Financial and Compliance Audit.

On a motion by Commissioner Stephen Holmes, seconded by Jaime Castro, the board voted the approval of the FY 2022 Financial Compliance Audit as presented by Eide Bailly LLP. The motion carried with all members voting in favor. There was no public comment.

b. Consider approval of the FY 2023 contract with Total Ranch Maintenance for lawn services at Gulf Coast Center facilities. Amount to not exceed: \$43,160.00 for base contract amount, increase of \$3,320 from the FY21/FY22 contract.

On a motion by Mary Lou Flynn-Dupart, seconded by Vivian Renfrow, the board voted the approval of the FY 2023 contract with Total Ranch Maintenance for lawn services at Gulf Coast Center facilities. The motion carried with all members voting in favor. There was no public comment.

c. Consider approval of the FY 2023 contract with Killum Pest Control for pest control services to Gulf Coast Center facilities. Amount to not exceed: \$7,751.00 for base contract amount, decrease of \$1,241 from the FY21/FY22 contract.

On a motion by Mary Lou Flynn-Dupart, seconded by Jaime Castro, the board voted the approval of the FY 2023 contract with Killum Pest Control for pest control services to Gulf Coast Center facilities. The motion carried with all members voting in favor. There was no public comment.

d. Consider approval of the 2024 VOCA Resolution wherein the Gulf Coast Center’s Board of Trustees approves the submission and receipt of the grant for the GCC Crime Victims Counseling through the Office of the Governor.

On a motion by Mary Lou Flynn-Dupart, seconded by Commissioner Stephen Holmes, the board voted the approval of the 2024 VOCA Resolution wherein the Gulf Coast Center’s Board of Trustees approves the submission and receipt of the grant for the GCC Crime Victims Counseling through the Office of the Governor. The motion carried with all members voting in favor. There was no public comment.

e. Consider approval of the revised Educational Leave Policy 2.40.

Employees requesting leave must demonstrate pursuit of additional education, higher education and/or degrees in fields that fulfill the Gulf Coast Center strategic plan and benefit the operations of the Center.

CURRENT WORDING: Staff become eligible at 5 years to utilize 8 hours of paid educational leave per week. At 10 years, they are eligible to take off an entire semester, paid. This program is not commonly taken advantage of.

PROPOSED CHANGE: Staff become eligible at 90 days to utilize 4 hours of paid educational leave per week. At 1 year, they are eligible to utilize 8 hours per week.

On a motion by Mary Lou Flynn-Dupart, seconded by Commissioner Stephen Holmes, the board voted the approval of the revised Educational Leave Policy 2.40. The motion carried with all members voting in favor. There was no public comment.

- f. **Consider the approval to declare surplus and dispose of two Ford F350 Dually trucks as they are no longer cost effective to maintain.**

Center Vehicle #3247, a 2008 Ford F350, VIN.#1FTWW32R88EC53247 with 165,094 miles

Center Vehicle #4840, a 2009 Ford F350, VIN.#1FTWW32R39EA84840 with 156,492 miles

On a motion by Jaime Castro, seconded by Mary Lou Flynn-Dupart, the board voted the approval to declare surplus and dispose of two Ford F350 Dually trucks as they are no longer cost effective to maintain. The motion carried with all members voting in favor. There was no public comment.

- g. **Consider approval of the purchase of 2 vehicles (replacements) purchased thru GoodBuy Purchasing Cooperative to be utilized by administrative staff.**

2023 Ford F150 Pick-up Truck at a total price not to exceed \$54,443.75.

2023 Toyota 4Runner at a total price not to exceed \$50,014.35.

On a motion by Mary Lou Flynn-Dupart, seconded by Sheriff Bo Stallman, the board voted the approval of the purchase of 2 vehicles (replacements) purchased thru GoodBuy Purchasing Cooperative to be utilized by administrative staff. The motion carried with all members voting in favor. There was no public comment.

- h. **Consider approval of the new Lease Agreement between the Center and the Housing Authority of the City of Galveston, Texas for 1,126 sq.ft. of office space (suite F103) located at 4700 Broadway, Galveston TX 77551 for additional space for the Center's substance use disorder and mental health staff and services.**

Term: January 2, 2023, and ending on December 31, 2026

Amount not to exceed: (\$1,520.00/month)

On a motion by Mary Lou Flynn-Dupart, seconded by Vivian Renfrow, the board voted the approval of the new Lease Agreement between the Center and the Housing Authority of the City of Galveston, Texas for 1,126 sq.ft. of office space (suite F103) located at 4700 Broadway, Galveston TX 77551 for additional space for the Center's

substance use disorder and mental health staff and services. The motion carried with all members voting in favor. There was no public comment.

- i. Consider approval of the renewal agreement with THE UNIVERSITY OF TEXAS MEDICAL BRANCH AT GALVESTON d/b/a UTMB Health to provide for an additional five (5) overflow beds that may be made available, on an as-needed basis, to support the inpatient care needs of referred individuals at St. Joseph Medical Center.**

Term: through August 31, 2023.

Amount not to exceed: \$75,000.00 (\$75 per bed day (no change in rate from FY22)).

On a motion by Jaime Castro, seconded by Commissioner Stephen Holmes, the board voted the approval of the renewal agreement with THE UNIVERSITY OF TEXAS MEDICAL BRANCH AT GALVESTON d/b/a UTMB Health to provide for an additional five (5) overflow beds that may be made available, on an as-needed basis, to support the inpatient care needs of referred individuals at St. Joseph Medical Center. Mary Lou Flynn-Dupart abstained. The motion carried with all members voting in favor. There was no public comment.

- j. Consider approval of Amendment 3 to the HHSC FY23 COVID-19 Supplemental Grant Program #HHS001108400035. This amendment updates budgeting procedures and reporting requirements specific to the Outpatient Capacity Expansion statement of work (SOW). This SOW allows for an increase in admissions for adult and youth behavioral health services to help meet the growing demand for outpatient services precipitated by the COVID-19 pandemic.**

On a motion by Mary Lou Flynn-Dupart, seconded by Commissioner Stephen Holmes, the board voted the approval of Amendment 3 to the HHSC FY23 COVID-19 Supplemental Grant Program #HHS001108400035. The motion carried with all members voting in favor. There was no public comment.

- k. Consider approval of Amendment 3 to the HHSC FY23 Treatment Adult Services (TRA) contract #HHS000663700142. This amendment adds \$205,525 in funding for the provision of adult outpatient substance use disorder services for Brazoria and Galveston counties.**

On a motion by Mary Lou Flynn-Dupart, seconded by Vivian Renfrow, the board voted the approval of Amendment 3 to the HHSC FY23 Treatment Adult Services (TRA) contract #HHS000663700142. The motion carried with all members voting in favor. There was no public comment.

9. Pending or revised Action Items.....Linda Bell, JD,BSN, RN

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.

10. Calendar.....Jamie Travis, Board Chair

Date	Event	Location	Time
FY23 Preliminary Board Meeting Dates			
September 20, 2022	Board Retreat	Tremont Hotel	12 PM – 5 PM
September 28, 2022	Board Meeting	SBCSC	6:15 PM
October 26, 2022	Board Meeting	MCSC	6:15 PM
December 7, 2022	Board Meeting	SBCSC	6:15 PM
January 25, 2023	Board Meeting	MCSC	6:15 PM
February 22, 2023	Board Meeting	SBCSC	6:15 PM
March 22, 2023	Board Meeting	MCSC	6:15 PM
April 26, 2023	Board Meeting	SBCSC	6:15 PM
May 24, 2023	Board Meeting	MCSC	6:15 PM
June 21-23, 2023	TX Council Annual Conference	Westin Galleria Houston	
July 26, 2023	Board Meeting	SBCSC	6:15 PM
August 23, 2023	Board Meeting	MCSC	6:15 PM
MCSC location: 7510 FM 1765, Texas City, TX			
SBCSC location: 101 Tigner, Angleton, TX			

11. Executive Session. The Board of Trustees went into 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 replacing the Chief Executive Officer position.*

12. Reconvene to Open Session

13. Adjourn 7:20 p.m.

There being no further business to bring before the Board of Trustees, the meeting was adjourned at 7:20 p.m.

Respectfully,

Approved as to Content and Form,




 Rachel Griffitts
 Secretary to the Board of Trustees

 Rick Price
 Board Vice Chair



ADA SELF-EVALUATION
AND
TRANSITION PLAN
FY2023

For more information, questions, or concerns, please contact:
Raymond Lopez, ADA Coordinator (409) 944-4469 * RaymondL@gulfcoastcenter.org; or
Linda Bell, General Counsel (409) 944-4314 * LindaB@gulfcoastcenter.org

I. LEGAL PURPOSE.

The Americans with Disabilities Act (ADA) is a civil rights law that mandates equal opportunity for individuals with disabilities. The ADA prohibits discrimination in access to jobs, public accommodations, government services, public transportation, and telecommunications. Title II of the ADA also requires that all Programs, Services, and Activities (PSAs) of public entities provide equal access for individuals with disabilities. The Gulf Coast Center (GCC) has undertaken a comprehensive evaluation of its PSAs to determine the extent to which individuals with disabilities may be restricted in their access.

GCC has initiated a comprehensive self-evaluation of its policies, programs, and facilities to determine the extent to which individuals with disabilities may be restricted in their access to GCC services, activities and facilities. The ADA Transition Plan is significant in that it establishes the GCC’s ongoing commitment to the development and maintenance of policies, programs and facilities that include all of the residents of Galveston and Brazoria Counties.

The development of a Transition Plan is a requirement of the Federal Regulations implementing the Rehabilitation Act of 1973, which requires that all organizations receiving federal funds make their programs available without discrimination to persons with disabilities. The Act, which has become known as the “civil rights act” of persons with disabilities, states,

No otherwise qualified individual with a disability in the United States shall, solely by reason of his or her disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance. (Section 504)

Subsequent to the enactment of the Rehabilitation Act of 1973, Congress passed the Americans with Disabilities Act on July 26, 1990. The Department of Justice’s Title II regulation adopts the general prohibitions of discrimination established under Section 504 and incorporates specific prohibitions of discrimination for the ADA. Title II provides protections to individuals with disabilities that are at least equal to those provided by the nondiscrimination provisions of Title V of the Rehabilitation Act. This legislative mandate, therefore, prohibits GCC from, either directly or indirectly through contractual arrangements:

- Denying persons with disabilities the opportunity to participate in services, programs, or activities that are not separate or different from those offered others, even if the City offers permissibly separate or different activities.
- Selecting facility locations that have the effect of excluding or discriminating against persons with disabilities.

Included in Title II are administrative requirements for all government entities employing more than fifty (50) people. These administrative requirements are:

- Designation of a person who is responsible for overseeing Title II compliance;
- Development of an ADA grievance procedure;
- Completion of a self-evaluation; and
- Development of a Transition Plan if the self-evaluation identifies any structural modifications necessary for compliance. The Transition Plan must be retained for three years.

II. NOTED REQUIREMENTS

1. **Notice under the Americans with Disabilities Act.** In accordance with the requirements of Title II of the ADA, GCC will not discriminate against qualified individuals with disabilities on the basis of disability in its services, programs, or activities.

2. **Employment.** GCC does not discriminate on the basis of disability in its hiring or employment practices and complies with all regulations promulgated by the U.S. Equal Employment Opportunity Commission under Title I of the ADA.
3. **Effective Communication.** GCC will generally, upon request, provide appropriate aids and services leading to effective communication for qualified persons with disabilities so they may participate equally in the programs, services, and activities, including but not limited to, qualified sign language interpreters, documents in Braille, and other ways of making information and communications accessible to people who have speech, hearing, or vision impairments.
4. **Modifications to Policies and Procedures.** GCC will make all reasonable modifications to policies and programs to ensure that people with disabilities have an equal opportunity to enjoy all of its programs, services, and activities.

Anyone who requires an auxiliary aid or service for effective communication, or a modification of policies or procedures to participate in a program, service, or activity of GCC, should contact ADA Coordinator:

Raymond Lopez, Asset Specialist & Safety Services

Direct: 409-944-4469

Email: raymondl@gulfcoastcenter.org

To ensure accommodations, please make contact as soon as possible but no later than 48 hours before the scheduled event.

The ADA does not require GCC to take any action that would fundamentally alter the nature of its programs or services or impose an undue financial or administrative burden. Decisions on the nature of this alteration will be made by GCC’s ADA Coordinator on a case-by-case basis.

5. Complaints and Grievances.

- a. Complaints that a program, service, or activity of the GCC is not accessible to persons with disabilities should be directed to:

Linda P. Bell, JD, BSN, RN | General Counsel
 4444 W. Main, League City, Texas 77573
 Office: 409.944.4314 | Main Line: 409.763.2373
 Lindab@gulfcoastcenter.org

- b. ADA Grievance Procedure (**Attachment B**). A grievance procedure has been established to meet the requirements of the ADA and may be used by anyone who wishes to file a complaint alleging discrimination on the basis of disability in the provision of services, activities, or programs by GCC. GCC's ADA Employment Policy governs employment-related complaints of disability discrimination.

Complaints shall be submitted in writing to the office of the ADA Coordinator. The written documentation shall include:

1. The name, address, and telephone number of the complainant;
 2. A narrative and/or statement, in sufficient written detail including date and time of the incident to fully define and explain an alleged violation of the ADA regulations;
 3. A narrative and/or statement, in sufficient written detail, identifying proposed recommendations, from the complainant's viewpoint, to adequately resolve an alleged violation;
- and

4. Any other written information or documentation to more fully explain or identify an alleged violation.

An alternative means of filing complaints, such as personal interviews or a tape recording of the complaint will be made available for persons with disabilities upon request.

The complaint should be submitted as soon as possible but no later than 60 calendar days after an alleged violation to: ADA Coordinator.

Within 15 calendar days after receipt of a complaint, the ADA Coordinator will acknowledge receipt of the complaint and may, at his discretion, meet with the complainant to discuss an alleged violation and possible resolutions. Within 30 calendar days after receipt of a complaint, the ADA Coordinator will respond in writing or, if requested, in an alternative format accessible to the complainant, such as large print or audio tape. The response will explain the position of the GCC and offer options for substantive resolution of the complaint.

If the response by the ADA Coordinator does not satisfactorily resolve the issue, the complainant may file an appeal within 15 calendar days after receipt of the response. The appeal should be in writing and addressed to:

Linda Bell, General Counsel
4444 W. Main
League City, TX 77573

Within 15 calendar days after receipt of the appeal, General Counsel, or designee, will acknowledge receipt of the appeal and may, at her discretion, meet with the complainant to discuss the complaint and possible resolutions. Within 30 calendar days after receipt of the appeal, General Counsel or designee will respond in writing, or if requested, in an alternative format accessible to the complainant, with a final resolution of the complaint.

Complaints related to facility accessibility issues will be elevated to a higher priority status for resolution. All written complaints received by the ADA Coordinator, appeals to General Counsel, and responses from these offices will be retained by the GCC for a period of at least three years from the date of final resolution.

III. ADA SELF-EVALUATION AND TRANSITION PLAN CHECKLIST

This document describes the process developed to complete the evaluation of the GCC's PSAs and facilities, provides recommendations to remove programmatic barriers, and presents a Transition Plan for the modification of facilities and access ways to improve accessibility, which will guide the planning and implementation of necessary program and facility modifications over the next several years. The ADA Self-Evaluation and Transition Plan is significant in that it establishes the GCC's ongoing commitment to the development and maintenance of PSAs and facilities that accommodate all individuals in service.

Person completing this form: Linda Bell, JD, BSN, RN, General Counsel
4444 W Main
League City, TX 77573
409-944-4314

James Rollens III, ADA Coordinator (retired 12/31/2022)
101 Tigner
Angleton, TX 77515
Fax: (979) 848-0937 or (979) 848-8977

Raymond Lopez, ADA Coordinator

Asset Specialist & Safety Officer
4352 Emmett F. Lowry Expressway
Texas City, TX 77591
Direct: 409-944-4469
Email: raymond1@gulfcoastcenter.org

Program, Activity or Service: The Gulf Coast Center (GCC)

A. List of People Consulted

1. Planning:

- a. Felicia Jeffery – Chief Executive Officer
- b. Amy McMahon – Director of Behavioral Health Services
- c. Jamie White – Director of IDD Services
- d. Sarah Holt, RN – Chief Nursing Officer
- e. Sam Tingle – Fleet Manager and Asset Specialist
- f. Cindy Keggs – Corporate Compliance and Rights Officer
- g. Melissa Hollman - Quality Management Supervisor
- h. James Rollens - Manager, Facility & Transportation Safety Services; ADA Coordinator (retired 12/31/2022)
- i. Raymond Lopez, ADA Coordinator, Asset Specialist and Safety Officer
- j. Rick Elizondo, Chief Financial Officer
- k. Kelsey Hoosier, HR Director

2. Site Inspection:

- a. Raymond Lopez – designated Center-wide Safety Officer who initiates site visits upon request of Facility Safety Leader or a member of management or to follow up on reported concerns.
- b. Assigned Facility Safety Leaders – conduct site inspections at his/her assigned facility at least quarterly prior to Safety Committee meetings.

Note: Each GCC facility has at least one assigned Safety Leader (Attachment C: Safety Leader List)

B. Document Preparation:

Linda Bell, JD, BSN, RN, General Counsel
4444 W. Main
League City, TX 77573
409-944-4314

James Rollens III, ADA Coordinator
Manager, Facility & Transportation Safety Services
101 Tigner, Angleton, TX 77515
Fax: (979) 848-0937 or (979) 848-8977

Raymond Lopez, ADA Coordinator
Asset Specialist & Safety Officer
4352 Emmett F. Lowry Expressway
Texas City, TX 77591
Direct: 409-944-4469
Email: raymond1@gulfcoastcenter.org

C. Implementation:

James Rollens III, ADA Coordinator (retired 12/31/2022)
Raymond Lopez, ADA Coordinator

D. Participation of Disabled Persons:

List steps taken to ensure that disabled persons (or their representatives) participate in the completion of this self-evaluation.

The GCC utilizes two methods of obtaining customer satisfaction information and input (please note: All persons receiving services have a disability as defined by ADA) related to services and accessibility. Individuals in services are all provided a “Consumer Rights” handbook at intake/admission and are informed of the accessibility of the Rights Officer. The Rights Officer notifies the Facility Safety Services (who is the ADA Coordinator) of any complaints regarding accessibility immediately. There have been no complaints made to the rights office in the past 5 years.

The 2019 plan was also submitted to the Regional Planning and Network Advisory Committee and/or an adhoc advisory committee, which is a group made up of stakeholders (consumers, family members and community members) for review and approval, prior to submission to the Board of Trustees. Review by advisory committee(s) will be sought for any substantive revisions to the plan.

E. Nature of Program

Describe, in general, the nature of the program, including its purpose, scope, general activities and participants.

The Gulf Coast Center provides services to persons residing in the Galveston County and Brazoria County geographic service area. The primary consumers of Mental Health Services are those persons identified as priority and target population by the Health and Human Services Commission (HHSC). The primary consumers of Intellectual and Developmental Disability Services (IDD) are persons identified as having a diagnosis of Intellectual and Developmental Disability as defined by DADS (Texas Department of Aging and Disability Services). For details, refer to the HHSC performance contracts for details and eligibility criteria.

Mental Health Services include:

**Adult and Youth Intake and Assessment
Adult and Youth Outpatient Behavioral Health Services
Crisis Hotline, Assessments, & Stabilization
Disaster Response
Mental Health First Aid (MHFA)
Adult and Youth Crisis Services
Crisis Respite
Adult Inpatient Psychiatric Services
Youth Inpatient Psychiatric Services
Texas Correctional Office on Offenders with Mental Impairments Program (TCOOMMI)
Adult Justice-Involved Intensive Case Management
Military Veteran Peer Network Program (MVPN)
Co-Occurring Psychiatric and Substance Use Disorder (COPSD)
Projects for Assistance in Transitioning from Homelessness (PATH)
Permanent Housing Services
Home and Community Based Services (HCBS)
Pre-Admission Screening and Resident Review (PASRR)
Youth Empowerment Services (YES Waiver)
Integrated Healthcare**

Intellectual and Developmental Disability Services include:

**Intake & Assessment
Service Coordination (General Revenue, TxHmL, HCS)
Community First Choice (CFC)
Nursing Services Speech/Language**

Psychological Services
Crisis Intervention and Respite Services
Community Respite Services
Pre-Admission Screening and Resident Review (PASRR)
Enhanced Community Coordination (ECC)

Substance Use Recovery Services include:
Outreach, Screening, and Assessment (OSAR)
Outpatient Services
Intensive and Supportive Residential
Residential Detoxification
HIV Testing and Case Management
Specialized Female Outpatient Services
Specialized Female Intensive and Supportive Residential
Co-Occurring Psychiatric and Substance Use Disorder (COPSD)
Adolescents in Recovery (AIR)

F. Recruitment and Advertisement

1. Does the public entity engage in any of the following activities to recruit program participants or otherwise inform persons of the program’s existence? If no, proceed to Item E.

The GCC is prohibited from advertising for the purpose of soliciting additional external customers. The Center does engage in a public service and educational campaigns designed to inform the general public of the Center’s services and to provide a medium for first contact. The Center utilizes a multi-media approach to negate the impact of single sensory impairment.

Describe briefly activities involved and materials used.

Type of Activity	Steps take to ensure full participation of people with disabilities
Governance meetings	Board meetings are conducted in public buildings, primarily Center owned buildings, which meet ADA accessibility requirements.
Brochure/Pamphlets	Statements regarding non-discrimination policy were added to the Center’s primary brochure. This includes information regarding assistance through Texas Relay (TTY Services) for people with hearing impairments. The majority of the agency pamphlets, brochures and informational material are also published in Spanish.
Public Service Announcements (PSA)	PSA’s are televised with closed caption option for hearing impaired.
Direct staff contact (face to face contacts)	Staff are trained to provide information about services in the language that the person understands. This includes reading materials for people who are unable to read; utilizing interpreters, as needed; assistance in completion of required documentation (including application for services); use of TTY; and home visits as needed. The Center also employs several bilingual staff who assist in translation when necessary if interpreter services are unavailable.

2. Turn to section “H” (Outside Persons and Organizations) of this checklist. List there any “outside” persons and organizations involved in these recruitment, advertising, or information efforts.

See: A through E of Section H

3. Turn to section "I" (Facilities Used). List there all facilities, and parts of facilities, used during recruitment and advertising efforts, including those not owned and/or operated by the public entity (e.g., leased or otherwise used). Are these facilities accessible? IF not, is information available in an accessible location?

All facility sites are accessible. See list Section I.

G. Program Eligibility Requirements and Admission

1. Are any criteria or tests used in the admission process? **Yes**
If no, proceed to "7" below. If yes, list and briefly describe all criteria (e.g., good health, residency requirements, letters of recommendation) and all tests (including the skill, level of achievement, or other factors being tested, whether they are written or oral tests, the method of administration) used in the admissions process, and indicate how they relate to the program.

To qualify for IDD services, persons must:

- (1) **Demonstrate onset of symptoms prior to 18th birthday unless otherwise specified in the contract (e.g., autism spectrum disorders have specific age criteria).**
- (2) **Have full scale IQ below 70 or demonstrate significant deficiencies in adaptive living (3) DIDD - to establish eligibility**

To qualify for MH services, persons must:

- (1) **Member of priority population (as defined by DSMV and/or HHSC)**
- (2) **GAF score of 50 or lower**

NOTE: For details on what the specific requirements for "priority population" refer to the Center's Performance Contracts established by HHSC.

2. List all criteria and tests from "1" above that have (or could have) a disproportionate, adverse impact on disabled program applicants. Discuss briefly the (potential) negative impact for each.

Note: This criterion is utilized to establish disability and does not have a disparate effect.

3. For each criterion or test listed in "2" above that you design and administer, discuss briefly alternative criteria or tests that will be used to ensure nondiscrimination. This could include, in limited instances, not using a criterion or test.

N/A

4. For each item listed in "3" above that is designed and/or administered by an "outside" person or organization, list steps to modify any criterion or test that has a (potential) disproportionate, adverse impact on disabled persons, or class(es) of disabled persons (possibly including, in limited instances, not using a criterion or test).

N/A

5. List steps to make potential program participants, including those with hearing and vision impairments and learning disabilities, aware of alternative testing and criteria.

Assessments are conducted by trained/licensed staff, which negates the negative impact of disabilities. As previously stated, these assessments are conducted to establish disability which then qualifies individuals for services. Intake staff is trained to utilize alternative testing/assessment tools to accommodate various disabilities (and to utilize interpretive services necessary to obtain information).

6. Is an interview required before an applicant enters the program? **Yes**
If no, proceed to “7” below. If yes, briefly discuss the interview process and list steps to be taken (including the provision of auxiliary aids, as required) to ensure non-discrimination in interviewing.

Interviews are for the purpose of assessment to include identification of disabilities as a justification for program services. Assistance is available for the purpose of providing interpretive services and accommodations.

7. Are any forms required for admission in the program testing or submission or other admissions criteria? **Yes**
If no, proceed to “10” below. If yes, what are the forms, and are any available in alternative formats (e.g., taped, Braille, reader)?

Staff completes all forms or assist the person seeking services with completing the forms.

8. List steps to provide admission forms in alternative formats.

Staff are available as reader. Staff completes applications for consumers.

9. Do the forms listed in “7” above contain a notice of your organization’s compliance with the ADA? **Yes**
If no, proceed to “10” below. If yes, list steps to ensure the inclusion of notices of your compliance with the ADA in all materials.

Intake staff give advisory statements which make potential consumers aware that specialized services are available for disabled persons to facilitate program entry (this is done when an individual is being informed of his/her rights).

10. List steps to ensure applicants are not asked pre-admission inquires as to the nature and extent of a disability and that no forms or other written materials make mandatory inquiries related to disability.

This question is not applicable, as persons must demonstrate a disability to qualify for services. Persons who cannot demonstrate disabilities do not typically meet service requirements except for crisis services.

11. Turn to section “J.” List there any “outside” persons and organizations involved in testing, collecting, or evaluating admissions criteria. **NONE**

12. Turn to section “K.” List there all facilities and parts of facilities used for testing, collecting, or submitting forms and admissions criteria and other activities related to program eligibility requirements, including facilities not owned or operated by the public entity (e.g., leased or otherwise used).

See section K for detailed description of compliance issues by facility location.

H. Participation in the Program

1. Are post-admission inquires made regarding disabled status to make accommodations for disabled persons? **Yes**
If no, proceed to “2” below. If yes, list steps to ensure that information is gathered voluntarily, not used to affect any disabled person adversely and kept confidential.

(1) Employment: Information obtained during post hire inquiries or disclosure is obtained to determine if applicant requires accommodations. This information is maintained in confidential personnel medical record.

(2) Services: All post-admission inquiries are designed to facilitate acquisition of services and eliminate barriers. This information is maintained in confidential client files.

2. Is there an orientation for new participants? **Yes**
If no, proceed to “3” below. If yes, briefly describe the orientation and materials used, and list steps to ensure effective communications and usable materials (in alternative formats) for all participants.

Staff provide program orientation. Multilingual and American Sign Language interpreters are available.

3. List below all written materials, tools, equipment or other aids or devices used for the program.

The programs assess consumer’s needs utilizing standardized assessment protocols such as: uniform assessments/TRRs, standardized psychological tests, GAF assessment, etc.

An application for service is completed which includes intake forms, financial statements, consent forms, medical and psychiatric histories, case management assessment, etc.

4. For each item in “3” above, list steps (e.g., the provision of auxiliary aids, equipment modification) to ensure that program materials and equipment are accessible and usable.

Alternate modalities are utilized for written and visual materials to include readers. Staff are available to make home visits thus negating any transportation needs.

5. Would any steps pose an undue financial or administrative burden? **NO**
If yes, list alternative methods of providing accessibility that would not impose an undue financial or administrative burden.
6. What elements or activities are included in the program (e.g., vocational services, music therapy, retirement services, activities of daily living, leisure skills training, supported housing, supported employment, structured recreational and leisure outings, etc.)?

All of the above.

7. For each element in “6” above, which ones are, or have the potential to be, inaccessible to disabled participants. Describe steps to make them accessible and usable (e.g., the provision of auxiliary aids, use of alternative materials or formats).

- (1) Specialized transportation (wheelchair accessible vans with lifts and tie down straps).
(2) Specialized services based upon Individual Plans of Care (e.g., nursing, dietitian, psychological services, etc.)

8. Are any of the following services or benefits provided to program participants (unless already covered in “6” above)? If none is provided, proceed to “9”.

<input checked="" type="checkbox"/> Transportation Services	<input checked="" type="checkbox"/> Counseling Services
<input checked="" type="checkbox"/> Employment Services	<input checked="" type="checkbox"/> Health Services and Insurance/Benefits
<input checked="" type="checkbox"/> Housing	<input type="checkbox"/> Food Services
<input type="checkbox"/> Financial Aid	<input checked="" type="checkbox"/> Social, Recreational or Athletic Activities

List other services provided to program participants:

- **Medication Services**
- **Nursing Services**
- **Psychiatric Services**
- **Case Management**
- **Physician Services**
- **Peer Support**
- **Counseling**
- **Psychosocial Rehab**

List Steps to ensure that: Service/benefit is equally effective for and usable by disabled persons; Administration of service/benefit will be free from discrimination based on disability; Communications will reach all persons (including those with hearing and sight impairments); and Effective application procedures to receive the services exist for disabled persons (including those with hearing vision impairments).

It is the function of the interdisciplinary team to determine any specialized accommodations, which are required to maximize service utilization and assess each person’s needs. The function of the service coordination/case management unit is to eliminate barriers to services for all recipients both internal and external to the GCC. Where needed, readers and language interpretive services are available from a speech therapist.

9. List steps to ensure that information concerning program schedules and activities are effectively communicated to all program participants, including those with impaired vision and hearing.

The facility aggressively pursues program participation as this provides the basis of reimbursable services by:

- (1) Providing transportation to and from program sites.**
- (2) Providing case management to include linkage services.**
- (3) Conducting service satisfaction questionnaires designed to improve participant satisfaction.**
- (4) Ensuring that notification of scheduled services is provided both orally and in writing**

10. Are there boards, councils or similar bodies on which program participants sit? **Yes**
If no, proceed to “11” below. If yes, list steps to ensure equal opportunities for selection to, and participation in such boards by disabled persons.

Representation within these governing bodies requires consumer/disabled participants or family members/guardians which represent the disabled persons.

11. Turn to section “H”. List there any “outside” persons or organizations involved in any aspect of the program.

12. Turn to section “I”. List there all facilities, and parts of facilities, used during the program, including those not owned and/or operated by the recipient (e.g., leased or otherwise used).

13. Are each of these facilities accessible to people with disabilities, including people who use wheelchairs? If not, is the program, “when viewed in its entirety, “accessible”? **Yes**

If no, what steps will be taken to make it accessible? (If structural changes are necessary for building the public entity owns or operates, this should be documented in the transition plan.)

See transition plan.

I. Staff Information

List steps to ensure that all staff involved in this program (e.g., recruitment, admission, testing, the conduct of the program, the provision of any services or benefits) will be informed periodically of, and understand fully, your policy of nondiscrimination based on disability.

(1) Staff are informed at the time of employment of the agency’s policy regarding ADA accommodation.

(2) Staff receive periodic (annual and biannual) training which reaffirms the agency’s participation.

(3) Contracts with providers include the requirement not to discriminate as required by law.

J. “Outside” Persons and Organizations

1. List below all “outside” persons and organizations that are involved in the provision of any aid, benefit, or service for the program (as discussed in sections C - E above).

Alcohol & Drug Abuse Women's Center (ADA)

Ellie Hanley
201 1st Street,
Galveston, TX 77550
(409) 763-5516

All The Little Things Country

Erin Marks
201 FM 2917
Alvin, TX 77511

The ARC of The Gulf Coast

ADAPT Foundation, Inc.

DBA Brazos Place

1103 N. Ave H. - P.O. Box 2470
Freeport, TX 77541
(979) 233-3826

BARC Medically Indigent Care

Joe Shipley, CEO
4316 Washington Street
Dickinson, TX 77539
(281) 337-1343

Behavioral Health Management, LLC

PO Box 3215
Bellaire, TX 77402-9998

Brazoria County Juvenile Justice Dept

Brazoria County Detention Center

Brazoria County Work Activity Center

Children's Center, Inc.

Terry Keel, President, CEO
P.O. Box 2600
Galveston, TX 77553
(409) 765-5212

DRIGGERS, TERRY, DDS

505 Dance Dr
West Columbia, TX 77486

Dreyfus Printing

101 W. Sealy
Charlie Dreyfus
Alvin, TX 77511

East Texas Behavioral Healthcare Network

4101 So. Medford Dr.
Lufkin, TX 75901

Exodus Consulting and Psychological Services

1501 N. Amburn Road Ste. 12
Texas City, Texas 77591-2466
409-797-4174

Galveston County Juvenile Justice Department

6101 Attwater
Dickinson, TX 77539

Golden Rule

3801 Liberty Drive
Danny Armond
Pearland, TX 77581

The Harmony Place Community Care, LLC

306 W. Edgewood Drive
Friendswood, Texas 77546
(281) 996-4160

**The Harris Center for MH & IDD - Crisis Hotline
of Harris County**

P.O. Box 25381
Houston, TX 25381

If you need additional assistance to effectively participate in or observe this meeting, please contact (409) 763-2373 at least 24 hours prior to the meeting so that reasonable accommodations can be made to assist you.

Houston Behavioral Healthcare Hospital

ICE Care Group

J Allen & Associates of Texas, Inc.

P.O. Box 989
Friendswood, TX 77549
John Allen

Killum Pest Control, Inc.

Eric Melass
209 Plantation
Lake Jackson, TX 77566

Kleen Supply Company

Lifetime Homecare Services, Inc.

8611 Hillsboro Place
Sugarland, TX 77476
Ruth K. Katto

Medical Doctors Association

145 Technology Parkway NW
Norcross, GA 30092
(800) 780-3500

Mental Health Deputies Program

M&R Elite Janitorial Solutions

3526 W. Creek Club Dr
Missouri City, TX 77459

Modern Psychological & Allied Services

Dr. Devon Superville
3339 Kempwood Drive
Sugarland, TX 77479

NAMI Gulf Coast

319 E. South St.
Alvin, TX 77512

NorTek Medical Staffing

Hilda Roper
2313 Timber Shadows Dr.
Kingwood, TX 77339

NAO Global Health

St. Joseph's Medical Center, LLC

Phillip D. Robinson
1401 St. Joseph Parkway
Houston, TX 77002

Sun Behavioral Houston Hospital

Sunshine Center, Inc.

TWG Investments, LTD dba The Wood Group

Jerry Parker
3610 Barnett Road
Wichita Falls, TX 76310
(940) 767-0463

UTMB at Galveston - Dept of Psychiatry

Child Psych Services; Professional Psych Services
Paulette Guilick
3.604 Rebecca Sealy Hospital/301 University Blvd.
Galveston, TX 77555

- 2. List steps to inform those listed in “1” above of your organization’s commitment to non-discrimination based on disability. Remember that the non-discrimination mandate extends to the awarding of procurement contracts.

Each contract includes the statements that require the contractor not to discriminate based on disability as required by law.

- 3. List those persons and organizations from “1” above that receive “significant assistance” from your organization in the provision of aids, benefits, or services to your program participants. (For example, list organizations which rent or otherwise use your facilities; that depend on your organization for informing its participants of the aid, benefit, or service; that have employees of your organization spending time to assist in or coordinate the provision of the aid, benefit or service; and so forth.)

NONE

4. List steps to ensure that persons or organizations listed in “3” above do not discriminate based on disability in the provision of any aid, benefit, or service to your program participants. (Such steps may include changes in the program, facility alternation, and/or changes in or discontinuation of the relationship.)

N/A

K. Facilities Used

(NOTE: The definition of “facility” under the ADA includes all or any portion of buildings, structures, equipment, roads, walks, parking lots or other real or personal property or interest in such property, owned, operated, or leased.)

1. List below all facilities, or portions of facilities, used for the activities covered in sections “D” through “F” above, designating for each the activity for which it is used. (NOTE: Facilities leased or otherwise used from another person or organization should be included.)

Galveston County		Brazoria County
<u>Galveston Island Community Service Center</u> (Adult Mental Health & Recovery Clinic Services) 4700 Broadway Galveston, TX 77550 <u>Administration</u> 4444 W. Main League City, TX 77573 <u>Galveston County Youth Clinic</u> (Youth Mental Health & Recovery Clinic Services) 3201 FM 2004 Texas City, TX 77592	<u>Mainland Community Service Center</u> <i>(Adult Mental Health & Recovery Clinic Services)</i> 7510 FM 1765 Texas City, TX 77591 <u>Mackey Building</u> <u>IDD Provider Services</u> <i>(Asset Management, Medical Records Management, MIS, IDD Intake and Assessment, Preadmission Screening and Resident Review (PASRR), Continuity of Services, General Revenue, Service Coordination, Community First Choice, TxHmL & HCS Service Coordination)</i> 4352 Emmett F Lowry Texas City, TX 77591	<u>Southern Brazoria Community Service Center</u> (Adult Mental Health & Recovery Clinic Services) 101 Tigner Angleton, TX 77515 <u>Angleton Youth Behavioral Health Clinic</u> (Youth Mental Health & Recovery Clinic Services) 2352 East Highway 35 Angleton, TX 77515 <u>Northern Brazoria Community Service Center</u> <i>(Adult Mental Health & Recovery Clinic Services)</i> 101 Brennen Alvin, TX 77511

2. (A) Using the Texas Accessibility Standards and the ADA Accessibility Guidelines, list below for each facility (or portion thereof) inaccessible feature that limits program accessibility but which can be addressed by means other than structural changes. For each feature, list non-structural measures that will be taken to ensure accessibility when the program is “viewed in its entirety,” including:

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- Relocating the activity to accessible space,
- Being able to relocate the activity to accessible space, upon notice of the needs of a qualified disabled person,
- Revising the structure or format of the activity so the space is not needed,
- Modifying or redesigning equipment;
- Making home visits or other alternative delivery services; or
- Otherwise achieving program accessibility; and

Site	Accessibility Issue	Action to take	Estimated Completion Date	Actual Completion Date

- The time frame for compilations of each correction.

(B) If non-structural changes cannot achieve program accessibility, place the feature on your transition plan for necessary structural changes (see Section “L”). **Responsible parties: Felicia Jeffery, CEO, Sam Tingle, Asset Manager and Raymond Lopez, ADA Coordinator and Facility Safety Officer.**

Plan of Action/Plan of Correction – by Site

Site #	Site	Accessibility Issue	Action to take	Estimated Completion Date	Actual Completion Date
1					
2					
3					
4					

- List steps to ensure that all future construction and renovation work will comply with the architectural and accessibility standards (exclude projects managed by Central Office Maintenance and Construction).

All contracts for facilities will refer to the “Texas Accessibility Standards” as the construction standard for ADA reference.

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4. List steps to ensure periodic communications with (potential) disabled program participants concerning accessible and inaccessible facilities.

All program participants by definition are disabled. Service Coordinators and other staff make participants aware of accessibility issues to include accessible restroom (toilet) facilities.

5. Is the facility in question considered “historic” (e.g., is it either on the National Register of Historic Places or on a state or local list of historic places)? **No**
 If yes, list steps to ensure program accessibility, including any structural changes.
 If structural changes would compromise the historic value, list alternative methods to ensure program accessibility. (Note: Only those programs that uniquely concern the preservation and experience of the historic property itself are covered by this exemption. If the program held at a historic facility is not a “historic preservation” program, it must be relocated if structural accessibility is not possible.)

L. Employment

1. List safeguards in place to ensure that all employment decisions are made without discrimination based on disability, and that such decisions do not limit, segregate or classify applicants or employees based on disability in a way that adversely affects their employment opportunities or status.

(a) All position vacancies are posted and advertised in countywide publication, job phone line for non-sighted potential applicants.

(b) Interviews conducted with prepared questions, which are reviewed by HR prior to interviews for EEO issues.

(c) Staff are trained in proper interview techniques to include ADA issues involving selection process.

2. Are you participating in a contractual or other arrangement or relationship that subjects qualified applicants or employees with a disability to discrimination (i.e., relationships with employment or referral agencies, labor unions, or organizations that provide fringe benefits, training, or apprenticeship programs)? **No**
 If yes, list steps to be taken to ensure non-discrimination in the future.

3. Analyze the following aspects of employment to make certain that no discrimination based on disability exists (including discrimination which occurs due to an inaccessible facility):

Aspects of Employment	Determination
Recruiting, advertising, and processing applications for employment	No discrimination
Hiring, upgrading, promotion, award of tenure, demotion, transfer, layoff, termination, right of return from layoff, and rehiring	No discrimination

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Rates of pay or another form of compensation and changes in compensation	No discrimination
Job assignments, job classifications, organizational structures, position descriptions, lines of progression, and seniority lists	No discrimination
All forms of leave	No discrimination
Equal benefits and privileges available by virtue of employment, whether or not administered by the recipient	No discrimination
Selection and financial support for training, including apprenticeship, professional meetings, conferences and other related activities, and selection for leaves of absence to pursue training;	No discrimination
Employer-sponsored activities, including social and recreational programs	No discrimination
Any other term, condition, or privilege of employment	No discrimination

4. Do you have a policy concerning “reasonable accommodation” that specifies the decision-making process for identifying, arranging for and/or paying for, and determining undue hardship for reasonable accommodation? **Yes**
If no, list steps to be taken to establish a reasonable accommodation policy.

The Gulf Coast Center shall abide by guidelines and rules as established by the Texas Administrative Code and HHSC's policy regarding accommodations for disabled employees.

5. What employment tests or criteria are used for evaluating potential employees? Describe procedures to ensure that these criteria or tests do not discriminate against disabled persons unless they are shown to be consistent with job necessity and are directly related to the essential functions of the position.

Employment Test or Criteria	Impact
Criminal records	No adverse impact
Drug screening	No adverse impact
Interview and selection process consistent with HHSC (DADS/DSHS) methodology	No adverse impact

If you need additional assistance to effectively participate in or observe this meeting, please contact (409) 763-2373 at least 24 hours prior to the meeting so that reasonable accommodations can be made to assist you.

CANRS	No adverse impact
Driving History - job necessity	
Employer and Nurse aid Misconduct Registry	No adverse impact
OIG Exclusion Database	No adverse impact

6. Describe methods to identify the job-related characteristics of tests and criteria used in employment decisions.

(a) Job analysis identifies essential and non-essential job tasks.

(b) Test and interview methodology related directly to position description and identified essential elements.

7. Describe steps to ensure that no pre-employment inquiries are made as to whether ran applicant is a disabled person or as to the nature or severity of a disability. (Inquires related to one’s ability to perform the essential functions of a job effectively and safely are permitted.)

(a) Application contains no pre-offer inquiries.

(b) All interrogatories approved by Human Resources EEO officer.

(c) All interrogatories related specifically to essential elements of position description.

8. Does your organization conduct or require any medical exams or physical capacity assessments prior to making final offers of employment? **Yes, Tuberculosis testing for new employees. Results are stored in a confidential file.**

If yes, describe procedures to ensure that a) all entering employees are subject to medical exams, b) all offers of employment are conditional based on the results of the exams, c) the medical results gathered are not used in a discriminatory manner, and d) all information gathered is kept confidential. Pre-employment medical examination before conditional job offers are not permitted.

9. Review job application forms and interview questions to ensure that applicants are not asked about the existence of (or nature of severity of) a disability. You are allowed to inquire about the candidate’s ability to perform job functions. Ensure that applicants are not asked about their relationship or association with a disabled individual.

Such review is conducted by Human Resources EEO officer prior to interview by hiring authority.

10. Review the essential and marginal functions of existing positions descriptions for each position in your organization for use in determining what makes applicants “qualified” and what job accommodations can be made when necessary for an applicant or employee.

Each position description is based on job analysis, which identifies essential and non-essential functions of the position. Requests for accommodations are reviewed on an individual basis with determinations made based on reasonableness, cost, and facility's ability to provide the requested accommodation.

11. Describe the process used to determine the essential and marginal tasks of positions descriptions in your organization and the process for ensuring that position descriptions are kept current.

Each job posting requires a review by the hiring authority. New positions require job analysis. Positions are updated as functions are modified or changed.

M. Communications

1. Provision of Auxiliary Aids List auxiliary aids that are available (or sources where they can be obtained) for individuals with speech, vision, or hearing impairments. This can include qualified readers and interpreters, taped, brailled or large-print materials, or closed-captioned video programs.
 - a) **Readers**
 - b) **Interpreters**
 - c) **Phone access for vision impaired**
 - d) **Written materials**
 - e) **Specialized communication devices such as light talkers, etc.**
 - f) **Sign Language services for people with hearing impairments.**
2. Are auxiliary aids provided to individuals with hearing, speech or vision impairments when needed to ensure effective participation in a program or activity? If no, list steps to ensure that auxiliary aids are provided to overcome communication barriers.

Yes - Specialized therapy providers assess individual needs to ameliorate disabilities.

3. Telecommunication Devices for the Deaf Does the public entity provide services or information to the general public over the telephone? **Yes**

If yes, is a telecommunication device for the deaf (TDD) or other equally effective system available so that public entities can communicate with hearing-impaired and speech-impaired individuals? **Yes**

If no, list steps to ensure effective communications with hearing-impaired and speech-impaired individuals. This can include providing a TDD or relying on a third-party relay service. Note: The Justice Department encourages entities that have extensive phone contact with the public to have TDDs to assure more immediate access.

- a) **The Center utilizes the TDD services available through Southwestern Bell Telephone.**
- b) **GCC has access to a website, which will provide list of services, sites, and accessibility information.**

4. Information and Signage

Is information provided concerning the following? **Yes**

Information and Signage	GCC Response
Signage at inaccessible entrances directing people to an accessible entrance or a location with information about an accessible entrance.	All sites have been reviewed for accessibility signage and individual site plans have been implemented to post accessibility signage. GCC will continue to use the ADA inspection tool on a yearly basis to ensure signage remains posted.
Signage directing people to elevators and stairways	There are no GCC Facility sites with an elevator and/or stairways.
Signage concerning the availability and location of TDD equipped pay phones or portable TDD's.	GCC is posting Information Brochures providing user information about "Relay Texas" services. Also, we have completed an employee awareness training to address needs of hearing-impaired persons.
Signage should comply with 4.30 of the Texas Accessibility Standards and the ADA Accessibility Guidelines.	In compliance

Jamie Travis, Board Chair
Board of Trustees

Date

Rachel Griffitts
Secretary to the Board of Trustees

Date

Adopted: May 22, 2019
Review and Revised: July 2021, February 2023

If you need additional assistance to effectively participate in or observe this meeting, please contact (409) 763-2373 at least 24 hours prior to the meeting so that reasonable accommodations can be made to assist you.

ATTACHMENT A

NOTICE UNDER THE AMERICANS WITH DISABILITIES ACT

In accordance with the requirements of title II of the Americans with Disabilities Act of 1990 ("ADA"), the Gulf Coast Center will not discriminate against qualified individuals with disabilities on the basis of disability in its services, programs, or activities.

Employment: Gulf Coast Center does not discriminate on the basis of disability in its hiring or employment practices and complies with all regulations promulgated by the U.S. Equal Employment Opportunity Commission under title I of the ADA.

Effective Communication: Gulf Coast Center will generally, upon request, provide appropriate aids and services leading to effective communication for qualified persons with disabilities so they can participate equally in mental health, intellectual and developmental disability, and substance abuse programs, services, and activities, including qualified sign language interpreters, documents in Braille, and other ways of making information and communications accessible to people who have speech, hearing, or vision impairments.

Modifications to Policies and Procedures: Gulf Coast Center will make all reasonable modifications to policies and programs to ensure that people with disabilities have an equal opportunity to enjoy all of its programs, services, and activities. For example, individuals with service animals are welcomed in Gulf Coast Center offices, even where pets are generally prohibited.

Anyone who requires an auxiliary aid or service for effective communication, or a modification of policies or procedures to participate in a program, service, or activity of Gulf Coast Center, should contact Raymond Lopez, ADA Coordinator Raymond Lopez, 4352 Emmett F. Lowry Expressway, Texas City, TX 77591; Direct: 409-944-4469; Email: raymondl@gulfcoastcenter.org as soon as possible but no later than 48 hours before the scheduled event.

The ADA does not require the Gulf Coast Center to take any action that would fundamentally alter the nature of its programs or services or impose an undue financial or administrative burden.

Complaints that a program, service, or activity of the Gulf Coast Center is not accessible to persons with disabilities should be directed to Cindy Kegg, Client Rights Officer at Cindyk@gulfcoastcenter.org.

Gulf Coast Center will not place a surcharge on a particular individual with a disability or any group of individuals with disabilities to cover the cost of providing auxiliary aids/services or reasonable modifications of policy, such as retrieving items from locations that are open to the public but are not accessible to persons who use wheelchairs.

For ADA questions/concerns, contact Raymond Lopez, ADA Coordinator at (979) 944-4469

ATTACHMENT B

**The Gulf Coast Center
Grievance Procedure under
The Americans with Disabilities Act**

If you need additional assistance to effectively participate in or observe this meeting, please contact (409) 763-2373 at least 24 hours prior to the meeting so that reasonable accommodations can be made to assist you.

This Grievance Procedure is established to meet the requirements of the Americans with Disabilities Act of 1990 ("ADA"). It may be used by anyone who wishes to file a complaint alleging discrimination on the basis of disability in the provision of services, activities, programs, or benefits by the Gulf Coast Center. Its Personnel Policy governs employment-related complaints of disability discrimination.

The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of complainant and location, date, and description of the problem. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint, will be made available for persons with disabilities upon request.

The complaint should be submitted by the grievant and/or his/her designee as soon as possible but no later than 60 calendar days after the alleged violation to:

Raymond Lopez, ADA Coordinator
4352 Emmett F. Lowry Expressway, Texas City, TX 77591
Direct: 409-944-4469 Ext 11191
Email: raymondl@gulfcoastcenter.org

Within 15 calendar days after receipt of the complaint, James Rollens III, ADA Coordinator or his designee will meet with the complainant to discuss the complaint and the possible resolutions. Within 15 calendar days of the meeting, James Rollens III, ADA Coordinator or his designee will respond in writing, and where appropriate, in a format accessible to the complainant, such as large print, Braille, or audio tape. The response will explain the position of the Gulf Coast Center and offer options for substantive resolution of the complaint.

If the response by Raymond Lopez, ADA Coordinator or his designee does not satisfactorily resolve the issue, the complainant and/or his/her designee may appeal the decision within 15 calendar days after receipt of the response to the Gulf Coast Center's General Counsel, Linda Bell.

Within 15 calendar days after receipt of the appeal, the General Counsel will meet with the complainant to discuss the complaint and possible resolutions. Within 15 calendar days after the meeting, the General Counsel will respond in writing, and, where appropriate, in a format accessible to the complainant, with a final resolution of the complaint.

All written complaints received by Raymond Lopez, ADA Coordinator, or his designee, appeals to the General Counsel, and responses from these two offices will be retained by the Gulf Coast Center for at least three years.

ATTACHMENT C
Gulf Coast Center
FY23 SAFETY LEADERS

<u>FACILITY</u>	<u>Card Reader</u>	<u>COMMITTEE MEMBERS</u>	<u>CONTACT NUMBER</u>	<u>Ext.</u>	<u>Fax</u>
Anchor Point	409-739-9940	Patty Knutson	409-944-4383	19544	409-986-6500
Bayou House	***	Lori Thompson	O: 281-585-7448 c: 281-910-9000	19900	***
Boat House	281-979-3365	Patty Knutson	281-585-7481	19604	281-585-7474
Brazoria County CSC Bldg. 1 & 2	409-739-3147 409-739-9967	Joanne Martin	281-585-7325	11132	979-848-0937
Galveston Island CSC	346-287-2553	Angela Lewis	409-944-4337 cell (832) 340-4382	19353	409-765-5267
League City	****	**Kimberly Thomas**	409-944-4529	19337	409-978-2401
Mackey Building A	932-340-4045	Christine Armand	409-944-4450	10995	409-944-4696
Mainland CSC Building 1	409-795-1960	Juanita Nolley	409-935-6083	19534	409-935-0818
Mainland CSC Building 2	281-910-5721	Alison Anderson	409-944-4416	11318	409-935-0127
Northern Brazoria CSC	*****	Eric Dean	281-585-7300	11341	281-585-7302
League City		Rick Elizondo Chief Financial Officer	409-944-4451	19734	409-728-2401
Mackey Building		Dr. Devon Stanley Chief Information Officer	757-438-9636	10041	409-948-1411
Mackey Building A		Samuel Tingle Director of Fixed Assets and Purchasing	409-944-4448 cell: 281-229-2469	19431	409-948-1411
Mackey Building A		Raymond Lopez Asset Specialist and Safety Officer	409-944-4469 346-266-4868	11191	409-948-1411

If you need additional assistance to effectively participate in or observe this meeting, please contact (409) 763-2373 at least 24 hours prior to the meeting so that reasonable accommodations can be made to assist you.



Handbook of Operating Procedures	
Policy 8.20	
Section: Management Information Systems	Responsibility and Oversight: Chief Information Officer and General Counsel
Subject: Prohibited Technologies Security Policy	Origination Date: 2/8/2023 Board approval: 2/22/2023

I. Title: Prohibited Technologies Security Policy

II. Purpose

On December 7, 2022, Governor Greg Abbott required all state agencies and state contractors to ban the video-sharing application TikTok from all state-owned and state-issued devices and networks over the Chinese Communist Party’s ability to use the application for surveilling Texans. Governor Abbott also directed the Texas Department of Public Safety (DPS) and the Texas Department of Information Resources (DIR) to develop a plan providing state agencies and state contractors guidance on managing personal devices used to conduct business.

In addition to TikTok, the Center may add other software and hardware products with security concerns to this policy and will be required to remove prohibited technologies which are on the DIR prohibited technology list. Throughout this Policy, "Prohibited Technologies" shall refer to TikTok and any additional hardware or software products added to this Policy.

III. Scope

This policy applies to all Center full and part-time employees including contractors, paid or unpaid interns, and users of Center’s or State of Texas networks. All Center employees are responsible for complying with the terms and conditions of this policy.

IV. Policy

4.1 CENTER-OWNED DEVICES

Except where approved exceptions apply, the use or download of prohibited applications or websites is prohibited on all Center-owned devices, including cell phones, tablets, desktop and laptop computers, and other internet capable devices.

The Center shall identify, track, and control Center-owned devices to prohibit the installation of or access to all prohibited applications. This includes the various prohibited applications for mobile, desktop, or other internet capable devices.

The Center shall manage all Center-issued mobile devices by implementing the security controls listed below:

- a. Maintain the ability to remotely wipe non-compliant or compromised mobile devices.
- b. Maintain the ability to remotely uninstall un-authorized software from mobile devices.

- c. Deploy secure baseline configurations, for mobile devices, as determined by the Center.

4.2 PERSONAL DEVICES USED FOR STATE BUSINESS

Employees and contractors may not install or operate prohibited applications or technologies on any personal device that is used to conduct Center business. Center business includes accessing any Center-owned data/state-owned data, applications, email accounts, non-public facing communications, Center email, VoIP, SMS, video conferencing, TEAMS, CAPPS, Texas.gov, and any other state databases or applications.

If an employee or contractor has a justifiable need to allow the use of personal devices to conduct state business, they may request approval from the CIO or his designee. The request must include the rationale for the personal device use.

4.3 IDENTIFICATION OF SENSITIVE LOCATIONS

Sensitive locations must be identified, cataloged, and labeled by the Center. A sensitive location is any location, physical, or logical (such as video conferencing, or electronic meeting rooms) that is used to discuss confidential or sensitive information, including information technology configurations, criminal justice information, financial data, personally identifiable data, sensitive personal information, or any data protected by federal or state law.

Unauthorized devices such as personal cell phones, tablets, or laptops may not enter sensitive locations, which includes any electronic meeting labeled as a sensitive location.

Visitors granted access to secure locations are subject to the same limitations as contractors and employees on unauthorized personal devices when entering secure locations.

4.4 NETWORK RESTRICTIONS

DIR has blocked access to prohibited technologies on the state network. To ensure multiple layers of protection, the Center will also implement additional network-based restrictions to include:

- a. Configure Center firewalls to block access to statewide prohibited services on all Center technology infrastructures, including local networks, WAN, and VPN connections.
- b. Prohibit personal devices with prohibited technologies installed from connecting to Center or state technology infrastructure or state data.

4.5 ONGOING AND EMERGING TECHNOLOGY THREATS

To provide protection against ongoing and emerging technological threats to the state’s sensitive information and critical infrastructure, DPS and DIR will regularly monitor and evaluate additional technologies posing concerns for inclusion in this policy.

DIR will host a site that lists all prohibited technologies including apps, software, hardware, or technology providers. The prohibited technologies list current as of January 23, 2023 and can be found in Section VII of this policy. New technologies will be added to the list after consultation between DIR and DPS.

The Center will implement the removal and prohibition of any listed technology.
The Center may prohibit technology threats in addition to those identified by DIR and DPS.

V. Policy Compliance

All employees shall sign a document annually confirming their understanding of this policy.

Compliance with this policy will be verified through various methods, including but not limited to, IT/security system reports and feedback to agency leadership.

An employee found to have violated this policy may be subject to disciplinary action, including termination of employment.

VI. Exceptions

Exceptions to the ban on prohibited technologies may only be approved by the Chief Information Officer. This authority may not be delegated. All approved exceptions to the TikTok prohibition or other statewide prohibited technology must be reported to DIR.

Exceptions to the policy will only be considered when the use of prohibited technologies is required for a specific business need, such as enabling criminal or civil investigations or for sharing of information to the public during an emergency. For personal devices used for Center business, exceptions should be limited to extenuating circumstances and only granted for a pre-defined period of time. To the extent practicable, exception-based use should only be performed on devices that are not used for other Center/state business and on non-Center/non-state networks. Cameras and microphones should be disabled on devices for exception-based use.

VII. Prohibited Technologies

The up-to-date list of prohibited technologies is published at <https://dir.texas.gov/information-security/prohibited-technologies>. The following list is current as of January 23, 2023.

Prohibited Software/Applications/Developers

- TikTok
- Kaspersky
- ByteDance Ltd.
- Tencent Holdings Ltd.
- Alipay
- CamScanner
- QQ Wallet
- SHAREit
- VMate
- WeChat
- WeChat Pay
- WPS Office
- Any subsidiary or affiliate an entity listed above.

Prohibited Hardware/Equipment/Manufacturers

- Huawei Technologies Company
- ZTE Corporation
- Hangzhou Hikvision Digital Technology Company
- Dahua Technology Company
- SZ DJI Technology Company
- Hytera Communications Corporation
- Any subsidiary or affiliate an entity listed above.

VIII. VERSION HISTORY

This table summarizes the major edits, i.e., edits affecting transition points, process changes, system changes, and/or role changes.

	Date	Responsible	Revision Summary
	February 8, 2023	General Counsel	Document Creation

IX. Attachments:

- None

X. Related Policies and Procedures

- Policy 8.5 IT Security Monitoring
- Policy 8.16 Computer Security Incident Response
- Policy 8.18 Securing Public Websites

XI. Additional References

- Governor Greg Abbott’s December 7, 2022 State Agency Letter (https://gov.texas.gov/uploads/files/press/State_Agencies_Letter_1.pdf)