



NOTICE OF MEETING

MEMBERS OF THE BOARD OF TRUSTEES

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

Wednesday, July 24th, 2024, at 6:15 p.m.,

at the Mainland Community Service Center (MCSC),
7510 FM 1765, Texas City, TX.



Thanks,

Rachel Griffiths

Rachel M. Griffiths
Secretary to the Board of Trustees

4352 Emmett F. Lowry
Expressway
Texas City, TX 77591
409.763.2373
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cc: July Board of Trustees File



"Better community healthcare promoting healthy living."

- 1. Call To Order**Jamie Travis, Board Chair
 - a. Announcements and Introductions
 - Appointment of the Nominating Committee members for the FY25 Board of Trustee officer elections.
 - Trailblazer in Suicide Care Award **(Pg. 8)**
- 2. Citizens' Comments**
- 3. Program Report:** Fy25 Benefit Plan Review..... Erin Roman, Executive Team Lead, Employee Health & Benefits
- 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
 - 2024 Election Process for Places 7, 8, and 9 of the TCRMF Board of Trustees **(Pg. 9-11)**
- 5. Operations Report:**..... Felicia Jeffery, CEO
 - a. Operational, Clinical, & Financial Excellence
 - Everything a board member should know/ CEO Highlights
 - Meadows Foundation Needs Assessment – Felicia Jeffery
 - IDD Hackathon – Devon Stanley
 - IDD Legislative Initiative – Rachel Griffiths
 - CCBHC Update – Felicia Jeffery
 - Beryl Disaster Update – Felicia Jeffery
 - 55th Gala Update – Felicia Jeffery
 - EOU Update – Felicia Jeffery
 - Same Day Next Day – Dr. Valdez
 - Staff Retention Incentive – Felicia Jeffery
 - b. Clinical Operations Dashboard
- 6. Budget, Finance and Admin Reports**.....Rick Elizondo, CFO
 - a. Financial & Operational Monthly Report & YTD Summary **(Pg. 12-15)**

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 March 27, 2024 Board Minutes. **(Pg. 16-24)**
 - b. Review and approval of the March, April, May and June 2024 Check Registers.
8. **Action Items**.....Linda Bell, JD, BSN, RN
- a. Consider approval of the FY2024 Audit Engagement Letter. **(Pg. 25-37)**
 - b. Consider approval of the Fund Balance Resolution 2024-1 to commit \$500,000 to Capital Projects – Facility. **(Pg. 38)**
 - c. Consider approval of FY 2024 Employee Retention and Recruiting Incentive.
 - d. Consider approval of the Center's FY25 Benefit Plan Coverage.
 - e. Consider approval of the FY25 Holiday Calendar. **(Pg. 39)**
 - f. Consider ratification of the new agreement with **The Meadows Mental Health Policy Institute for Texas** the Awardee of the Comprehensive Community Needs Assessment RFP.
Term: 6 months **Amount not to exceed:** \$87,000
 - g. Consider approval of Amendment #4 to the **HHSC Co-occurring Psychiatric and Substance Use Disorders (COPSD) contract #HHS000663700064**. This amendment adds \$480,000 for the remainder of FY24 and FY25. COPSD services emphasize integrated treatment for individuals diagnosed with both mental health and substance use disorders.
 - h. Consider approval of the **HHSC Multisystemic Therapy Grant #HHS001285300014**. This grant provides funding for the provision of in-home therapy services for youth as well as 24/7 access to licensed therapists. Grant expiration 8/31/25 with amount not to exceed \$1,384,090.
 - i. Consider approval of Amendment #1 to the **HHSC MH Performance Contract #HHS001324500035**. This amendment includes modifications to performance targets and reporting and adds additional funding for inpatient hospital capacity for the community mental health hospital, private psychiatric beds (CMHH/PBB), and crisis respite. Amount not to exceed \$13,055,230 through August 2025.
 - j. Consider approval of the **HHSC Mental Health Coordinated Specialty Care Grant Program (CSC) #HHS001329300026**. This program allows for the provision of psychotherapy, family education, peer support, and psychiatry services for individuals 15-30 years of age experiencing first episode psychosis. Amount not to exceed \$757,000 for FY24-25.
 - k. Consider approval of Amendment #2 to the **HHSC Projects for Assistance in Transition from Homelessness (PATH) contract #HHS000231500012**. The PATH program provides outreach and case management to persons who are homeless, or at imminent risk of becoming homeless and works to facilitate enrollment into mainstream mental health services. This amendment increases the contract by \$16,852 for FY25-26.

- I. Consider approval of the **HHSC Disaster Crisis Counseling Grant Program #HHS001453900035**. The contract describes the requirements of the Disaster Crisis Counseling Regular Services Program (RSP) and Immediate Services Program (ISP). These programs allow for the provision of counseling sessions and linkage to community resources for first responders, disaster workers, disaster survivors and their families who are residing in areas included in a State of Emergency and/or Federal Disaster Declaration.

Asset and Facility Management Services

- m. Consider approval of the revised Personal Property including Weapons Policy. Revisions include removal of Connect Transit information and prohibiting the ability to carry in compliance with the law. **(Pg. 40)**
- n. Consider approval of the purchase of two sedans from the Capital Internal Service Fund which will be leased back to the programs. Purchase to not exceed \$75,000.00
- o. Consider approval of the Declaration of Surplus vehicle for disposal of vehicle #8915 a 2011 Ford Fusion, VIN #3FAHP0GA8BR268915, License Plate 111-6854 with 93,082 miles and is no longer cost effective to maintain in the fleet. **(Pg. 41)**
- p. Consider ratification of the new agreement with **SSI Land Management** the procurement awardee for the concrete pads for storage sheds for the Center's Alvin and Angleton clinic locations for concrete pads for storage sheds. Amount not to exceed: \$4,400.00
- q. Consider ratification of the new agreement with **Cook Portable Warehouse LaMarque** the procurement awardee for the 10'x12' storage shed delivery and leveling for the Center's Alvin and Angleton clinic locations. Amount not to exceed: \$8,398.00

Behavioral Health Services

- r. Consider ratification of the New Memorandum of Understanding with **Veronica Gordon** for the purpose of collaborating to expand the number of personnel trained and certified in Mental Health First Aide ("MHFA") for adults and/or youth. The Center will fund the cost of the 3 Day MHFA training which is reimbursed through the grant.
- s. Consider approval of the FY25 Renewal Agreement with **Crystal Trahan** for Mental Health First Aide trainings in Galveston and Brazoria Counties. Reimbursement rate: \$45/hr for each training (not to exceed \$360/training)
- t. Consider ratification of the FY24 Amendment with **Sun Behavioral Houston** for Private Psychiatric Beds (PPB), the purchase of 'overflow' beds for the occasion the Gulf Coast Center's designated inpatient unit is at capacity. This amendment shall increase the FY24 do not exceed amount from \$643,000.00 to \$1,143,000.00; specifically, it adds an additional \$500,000 to be utilized during the FY24 contract duration.
- u. Consider ratification of the new FY24 Agreement with **Medical Behavioral Hospital of Clear Lake** for Private Psychiatric Beds (PPB), the purchase of 'overflow' beds for the occasion the Gulf Coast Center's designated inpatient unit is at capacity.
Term: July 2024 – August 31, 2024 **Amount not to exceed:** \$100,000
- v. Consider approval of the new FY25 Agreement with **Medical Behavioral Hospital of Clear Lake** for 10 contracted psychiatric beds within Galveston County.

Term: FY25

Amount not to exceed: is \$2,842,250 (\$765/bed day)

- w. Consider ratification of the below Interlocal Agreements for a pilot program to coordinate and enhance warm handoffs of 911 calls for mental health assistance that do not involve a public safety risk. The pilot project will coordinate telehealth crisis intervention services as well as de-escalation trainings for city police officers:
- **City of Alvin, Texas**
 - **City of Freeport, Texas**
- x. Consider approval of the renewal FY25 YES Waiver Provider Services Network Agreement with **Youth Advocate Programs**. (reimbursement based on the approved network service rates).
- y. Consider approval of the new agreement with **Consilium Staffing LLC** for behavioral health clinical coverage when needed at the rates indicated.
- Psychiatry-Outpatient average hourly rate at \$255-\$285/hr
 - Psychiatric NP/PA average hourly rate at \$165-\$190

Intellectual and Developmental Disabilities Services

- z. Consider approval of the 40 Renewal Agreements for the FY25 IDD Non-Traditional Provider Network Agreement. Reimbursement rate of \$10/hr for base level respite; \$13/hr. for community support services; \$18.00/hr for Independent Living Skills.

Galveston County	Brazoria County	Other County
Michael Brown	Isabel Cano	Jennifer Bertrand (Harris)
Angelina Coulter	Maria DeJulian	Ruth Burrell (Fort Bend)
Anjum Gilani	Adelina Enriquez	Martha Fuentes (Harris)
Norma Gonzales	Darla Hutchinson	Navin Gandhi (Harris)
Misty Gray	Joseph Pate	Yesenia Salmeron (Harris)
Michelle Hollins	Felicia Lee	Jennifer Vincent (Harris)
Dorothy Hughes	Kerry Marsh	Linda Walker (Harris)
Vanessa Kovacevich	Ruth "Ann" Robinson	
Ingrid Monsalvo	Vanessa Romero	
Katrina Moran	Eloisa Rodriguez	
Roylynn Nickerson	Amber Swanson	
Patricia Petteway	Michael Tupin	
Michelle Ruple	Shawn Weinkauff	
Jacell Sanchez	Hope Menard	
Claudia Saucedo		
Cynthia Scott		
Althea Thomas		
Vanessa Torres		
Deja Villarreal		

- aa. Consider approval of the 35 Renewal Agreements for the FY25 IDD Provider Services Family Agreement for the Voucher Respite. Reimbursement rate: \$10- \$15/hr.

Galveston County	Brazoria County	Other
Heather Burdeaux	Crystal Baird	
Brooke Camarata	Allison Briggs	
Mayra Corona-Moreno	Crystal Campbell	
Kathy Cruz	Erin Diaz	
Sheila Elrod	Stacey-Ann Foster	
Kirk Franck	Nikkeka Harris	
Lisa Grubbs-Marmon	Victoria Jones	

Elizabeth Hewatt	Melinda Morehouse	
Shani Johnson	Leslie Nokelby	
Heather Jones	Diane Phillips	
Marie Lopez	Amy Reynolds	
John Nguyen	Denise Roberts	
Megan Parker	Jennifer Taylor	
Jessica Scheer	Shannon White	
Megan Turner	Wyona Wyche	
Ana Maria Vidal	Holly Blaschke	
Celeste Watkins		
Sherry Wiedenfeld		
Pamela Wyatt		

Substance Use Disorder Services

bb. Consider approval of the FY24 Amendment to the identified Residential Services Network Agreements for Substance Use Services to reallocate \$175,000 of Intensive and 30,000 of Supportive SUD funds as distributed below.

Provider	TRA-Intensive	TRA-Supportive
Alcohol Drug Abuse Women's Center	\$100,000.00	\$20,000.00
Bay Area Recovery Center	\$75,000.00	\$10,000.00

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
June 17-19, 2024	TX Council Annual Conference	Grand Hyatt, San Antonio	
July 24, 2024	Board Meeting	MCSC	6:15 PM
August 28, 2024	Board Meeting	SBCSC	6:15 PM
September 9, 2024	Board Retreat	TBA	12:00pm
September 25, 2024	Board Meeting	MCSC	6:15pm
October 23, 2024	Board Meeting	SBCSC	6:15pm
December 11, 2024	Board Meeting	MCSC	6:15pm
January 22, 2025	Board Meeting	SBCSC	6:15pm
February 26, 2025	Board Meeting	MCSC	6:15pm
March 26, 2025	Board Meeting	SBCSC	6:15pm
April 23, 2025	Board Meeting	MCSC	6:15pm
May 28, 2025	Board Meeting	SBCSC	6:15pm
June 2025 TBA	TX Council Annual Conference	TBA	
July 23, 2025	Board Meeting	MCSC	6:15pm
August 27, 2025	Board Meeting	SBCSC	6:15pm
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

HHSC Announces Trailblazer in Suicide Care Award Winner....

Our very own Diane Manley is this year's recipient of the Trailblazer in Suicide Care Award.

This award celebrates the individual who has played a pivotal role in inspiring change, driving progress, and setting new standards of excellence in suicide care within their organization and community.

Diane received an outstanding **17** nominations from people and organizations within our community, demonstrating the impact she has made. Her visionary leadership and unwavering commitment serve as a beacon of inspiration for others.

Diane will be honored at the Texas Suicide Prevention Symposium on September 18, 2024 in Mesquite, TX. Her contributions to the field have been invaluable!

Congratulations Diane - we're all so proud of you

Thank you for your dedication to suicide care and prevention!



Diane Manley



July 11, 2024

MEMORANDUM

TO: Members, Texas Council Risk Management Fund (TCRMF) FROM: TCRMF Nominating Committee

SUBJECT: 2024 ELECTION PROCESS FOR PLACES 7, 8, and 9 OF THE TCRMF BOARD OF TRUSTEES

On Friday, November 15, 2024, the Annual Member Meeting of Texas Council Risk Management Fund (TCRMF) will take place. At that time, elections will be finalized to fill the positions of Trustees in Places 7, 8, and 9, whose terms will expire at 12:01 a.m., January 1, 2025.

The Board Places up for election are currently occupied as follows:

Place 7: Dianne Hickey

Place 8: Dr. Reggie Hall

Place 9: Jim Lykes

Member Participation

In accordance with the Fund Bylaws, TCRMF Members have two opportunities to participate in the election process, through: (1) nominating candidates; and (2) casting their vote in the Board Election once they receive the ballot.

Member Nominations

In addition to the incumbent trustees, Members have the opportunity to nominate a candidate of their own for an expiring Place on the Board of Trustees. The qualifications set out in the Fund Bylaws state that all nominees for the Board must be trustees of a Fund member community center. If your center would like to submit a nomination, please complete the attached form. Please also include a biographical sketch of your nominee.

TCRMF Board of Trustees Election Process Page 2

The nomination form and biographical sketch should be returned to the Texas Council Risk Management Fund by email to Jacey.GarzaRaines@sedgwick.com. These nominations must be received no later than Wednesday, **August 30, 2024**.

Preparation of the Ballot

Per the Fund Bylaws, all nominations made will be considered by the Nominating Committee for inclusion on the ballot; however, not all nominations will necessarily be included on the ballot. The Nominating Committee determines the final ballot and will present a slate of nominees for election by the members. A ballot will be compiled listing the nominees chosen by the Nominating Committee.

Member Voting by Ballot

The ballot determined by the Nominating Committee will be sent to each center in September so that ballots may be returned and tabulated prior to the annual meeting. Ballots are due by October 29, 2024, OR they may be submitted in person at the Annual Member Meeting on Friday, November 15th, 2024.

2024 TCRMF Trustee Election Timeline

- Request for Nominations – July 15, 2024
- Deadline for Member Nominations – August 30, 2024
- Nominating Committee will meet between - September 3 and September 6, 2024
- Ballots Distributed to Members – September 6, 2024
- Ballots Due from Members prior to the Annual Meeting – October 30, 2024
- Annual meeting of the Members – November 15, 2024

If you have any questions, please contact Greg Womack (512) 963-8192. Thank you for your attention to this matter.

cc: Board of Trustees, Texas Council Risk Management Fund Advisory Committee, Texas Council Risk Management Fund

Lee Johnson, Texas Council of Community Centers, Inc.



NOMINATION FORM

The undersigned Center would like to make the following nomination(s) for election to the Board of Trustees of the Texas Council Risk Management Fund:

NOMINATION

I understand that any submitted nominations received after Thursday, August 30, 2024, cannot be considered. In addition, I recognize that nominees for Trustee must meet the required qualification of being a Trustee of a community center that is also a member of the Fund, as stated in Article IV, Section 2 of the Fund Bylaws. I understand that the Fund's Nominating Committee might not elect to include all nominees on the ballot sent to members. I also understand that the Fund's Nominating Committee is responsible for determining the place for which each candidate will be considered and placed on the ballot.

Respectfully submitted, this ____ day of _____, 2024.

CENTER

Signature

Name

Title

Please return by August 30, 2024, to:

Texas Council Risk Management Fund Email: Jacey.GarzaRaines@sedgwick.com

The Gulf Coast Center**FY2024 Monthly Board Financial Review***Unaudited as of 6/30/2024***Fiscal Year 2024 Unaudited Centerwide General Fund Balance Status****Total General Fund Balance as of 08/31/2023 (Audited)..... \$ (11,444,499)****FY2024 Year-to-Date Reported Expense and Revenue Totals (Unaudited)**

	Expenditures	Operational	31,653,107		
		Non-Operational	-		
		Fund Balance	-	31,653,107	
	Revenues	Operational	32,530,610		
		Non-Operational	-	32,530,610	\$ (877,503)

Total General Fund Balance Year-to-Date (Unaudited)..... \$ (12,322,001)**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 (FY2011-2014)	(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 (FY2013) 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-fy2022 Expenditure		186,940.00		
fy2023 Expenditure		-		
			-	
Flexible Spending Supports (FY2004-2013)	(500,000)			
Flexible Spending Supports (FY2018)	(100,000)	(600,000.00)		
fy2005-fy2022Expenditure		517,663.44		
fy2023 Expenditure			(82,337)	
				(367,631)

Total General Fund Balance Year-to-Date (Unaudited)..... \$ (12,322,001)**Unrestricted Use General Fund Balance (Unaudited)..... \$ (11,954,371)**

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.

[illegible]

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MONTHLY BOARD REPORT - JUNE 2024

	<u>MONTHLY</u>		<u>MONTHLY</u>		<u>ANNUAL</u>		<u>YEAR TO DATE</u>		<u>YTD</u>	
	<u>FY2024</u>		<u>FY 2024</u>		<u>FY 2024</u>		<u>FY 2024</u>		<u>Percent</u>	
	<u>BUDGET</u>	<u>June</u>	<u>BUDGET</u>	<u>June</u>	<u>BUDGET</u>	<u>June</u>	<u>BUDGET</u>	<u>June</u>	<u>Dollar</u>	<u>Variance</u>
<u>EXPENSES</u>										
Salary and Wages	\$1,388,119.89	\$1,481,098.18	\$16,657,438.97	\$13,867,979.17					83.3%	\$2,789,459.80
Fringe Benefits	\$485,592.34	\$534,969.15	\$5,827,107.67	\$5,147,594.81					88.3%	\$679,512.86
Travel	\$20,045.76	\$28,826.53	\$240,549.00	\$177,087.43					73.6%	\$63,461.57
Consumables	\$37,883.36	\$25,121.12	\$454,601.16	\$334,036.38					73.5%	\$120,564.78
Pharmaceuticals/other	\$21,843.34	\$39,258.07	\$262,120.00	\$249,709.30					95.3%	\$12,410.70
Capital Improvements	\$0.00	\$0.00	\$0.00	\$8,398.00					00.0%	(\$8,398.00)
Furniture/Equip/Computer>\$5000	\$4,959.45	\$11,763.31	\$59,513.00	\$65,473.66					110.0%	(\$5,960.66)
Furniture/Equip/Computer<\$5000	\$29,240.21	\$16,026.67	\$350,882.53	\$170,475.12					48.6%	\$180,407.41
Facility Costs:	\$31,603.97	\$44,595.38	\$379,248.00	\$400,354.99					105.6%	(\$21,106.99)
Utilities	\$14,439.57	\$10,644.02	\$173,275.31	\$139,039.87					80.2%	\$34,235.44
Communications:	\$36,297.69	\$37,639.44	\$435,573.04	\$393,979.23					90.5%	\$41,593.81
Insurance	\$46,490.35	\$51,610.31	\$557,885.12	\$449,722.06					80.6%	\$108,163.06
Vehicle Operating	\$15,418.16	\$27,696.16	\$185,017.69	\$150,296.52					81.2%	\$34,721.17
Other Operating	\$14,489.70	\$14,102.61	\$173,876.74	\$159,355.86					91.7%	\$14,520.88
Client Support Cost	\$42,302.94	\$38,357.77	\$507,635.30	\$391,623.73					77.2%	\$116,011.57
Unallowable Costs	\$2,567.79	\$10,141.81	\$30,813.59	\$62,180.69					201.8%	(\$31,367.10)
Consultant/Professional - External	\$18,416.66	\$16,987.75	\$221,000.00	\$130,341.75					59.0%	\$90,658.25
Other Organizations - Internal	\$11,416.67	\$4,000.00	\$137,000.00	\$25,223.75					18.4%	\$111,776.25
Other Organizations - External	\$831,338.41	\$809,257.53	\$9,976,060.82	\$8,394,200.95					84.1%	\$1,581,859.87
Other Organizations - Non-Clinical	\$81,238.19	\$220,317.57	\$974,858.55	\$936,033.82					96.0%	\$38,824.73
<u>TOTAL EXPENSES:</u>	<u>\$3,133,704.45</u>	<u>\$3,422,411.38</u>	<u>\$37,604,456.49</u>	<u>\$31,653,107.09</u>					<u>84.2%</u>	<u>\$5,951,349.40</u>

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MONTHLY BOARD REPORT - JUNE 2024

	<u>MONTHLY</u>		<u>MONTHLY</u>		<u>ANNUAL</u>		<u>YEAR TO DATE</u>		<u>YTD</u>	
	<u>FY2024</u>		<u>FY 2024</u>		<u>FY 2024</u>		<u>FY 2024</u>		<u>Percent</u>	
	<u>BUDGET</u>	<u>June</u>	<u>FY 2024</u>	<u>June</u>	<u>BUDGET</u>	<u>June</u>	<u>June</u>	<u>June</u>	<u>Variance</u>	<u>Dollar</u>
<u>REVENUES</u>										
Brazoria County:	\$22,416.66	\$22,376.66	\$269,000.00	\$223,766.60					83.2%	\$45,233.40
Galveston County:	\$88,680.00	\$82,016.05	\$1,064,160.09	\$946,238.99					88.9%	\$117,921.10
Local Funds:	\$49,811.17	\$63,174.94	\$597,734.00	\$691,083.27					115.6%	(\$93,349.27)
Earned Income:	\$413,726.45	\$271,621.00	\$4,964,717.73	\$3,753,382.94					75.6%	\$1,211,334.79
State Funds Allocated:	\$1,538,673.39	\$1,481,471.91	\$18,464,080.76	\$14,818,525.95					80.3%	\$3,645,554.81
State Funds Grants-Cost Reimb:	\$239,491.98	\$431,186.55	\$2,873,903.54	\$2,986,089.96					103.2%	(\$92,186.42)
Federal Funds - Allocated	\$80,716.07	\$80,716.07	\$968,593.00	\$807,160.70					83.3%	\$161,432.30
Federal Funds -Grants Cost Reimb:	\$254,874.03	\$244,214.30	\$3,058,487.93	\$3,214,873.75					105.1%	(\$156,385.82)
Federal Funds - Misc.:	\$33,048.33	\$46,962.75	\$396,579.88	\$460,321.30					116.1%	(\$63,741.42)
Federal Funds -DPP:	\$100,000.02	\$163,250.02	\$1,200,000.00	\$1,126,500.02					93.9%	\$73,499.98
Federal Funds - CCP	\$312,266.64	\$412,266.62	\$3,747,199.63	\$3,522,666.44					94.0%	\$224,533.19
Total Revenue	\$3,133,704.72	\$3,299,256.87	\$37,604,456.56	\$32,530,609.92					86.5%	\$5,073,846.64
EXCESS OF REVENUE OVER EXPENSES	\$0.27	(\$123,154.51)	\$0.07	\$877,502.83					253575471.4%	(\$977,502.76)

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GULF COAST CENTER

"Better community healthcare promoting healthy living."

**MINUTES – Gulf Coast Center
Regular Meeting of the Board of Trustees
March 27th, 2024, at 6:15 p.m.
Southern Brazoria 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:** Jamie Travis, Chair of the Board of Trustees, convened the regular meeting on Wednesday, March 27th, 2024, at 6:13 p.m.

The following Board Members were present: Vivian Renfrow, Chris Cahill, Jamie Travis, Rick Price, Mary Lou Flynn-Dupart, Galveston County Sheriff Lt. Jaime Castro and Caroline Rickaway

The following Board Member(s) were absent: Galveston County Commissioner Stephen Holmes – excused, Brazoria County Sheriff Bo Stallman – excused.

Also present: Felicia Jeffery, CEO; Linda Bell, General Counsel; Sarah Holt, CNO; Dr. Renee Valdez, CMO and Rick Elizondo, CFO

Announcement(s):

2. **Citizen's Comments:** None
3. **Program Report:** Arielle Gray, Program Manager for the co-response team gave a high-level overview of the Brazoria County Crisis Co-Response Team.

The Brazoria County Sheriff/ Gulf Coast Center Crisis Co-Response Team is a new crisis response team for Brazoria County that partners a Gulf Coast Center clinician with the mental health deputy program for crisis response. Gulf Coast Center worked with the sheriff and his mental health division to bring the CCRT model to the county to address some response issues that come with clinician only or law enforcement only crisis response.



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Prior to the incorporation of the CCRT team. Mental Health deputies would respond to crisis calls. They were not equipped to do assessments like Gulf Coast Center clinicians. They would utilize hospitals or psychiatric facilities or jails.

The Crisis Co-Response Team comprises of:

Brazoria County Sheriff Department:
Deputy Joseph McCain
Deputy Henry Palacios
Sergeant Michael Vandergriff

Gulf Coast Center:
Arielle Gray, CCRT Team Program Manager
Brian Bigard, CCRT Team Care Navigator
Renee Lamberton, CCRT Team Care Navigator
Kristie Vasek, Crisis Relapse Prevention/ CCRT Reserve

Crisis Co-Response Team Roles and Responsibilities:

CCRT Peace Officers are in charge of scene management, victim assistance & EAD paperwork

CCRT Gulf Coast Center Care Navigators main responsibilities include mental health and risk assessments, crisis intervention, determination of least restrictive treatment (Outpatient or Inpatient), requests for EAD for involuntary inpatient, and links to GCC Crisis Stabilization Services including on demand psychiatry, medications, crisis respite, life skills, and case management, etc.

Gulf Coast Center Crisis Relapse/ CCRT Reserves rotate for CCRT full-time staff to ensure the team has coverage when a team member is out. They also assist in crisis follow up linkages.

Ancillary Support are Brazoria County dispatch and local EMS providers.

January 1, 2023 through December 31, 2023 data on Brazoria Mental Health Deputies

MHD's Calls with Evaluation	748
MHD's Calls without Evaluation	1741
MHD EDO's issued (Hospitalization)	382



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July 1, 2023 through December 31, 2023 data on Crisis Co-Response Team

CCRT Calls with Evaluation	149 Individuals
CCRT Calls without Evaluation	165 Individuals (Team called for Transports, Issuing EDO's, no assessment completed, Not a crisis)
# Resolved without Hospitalization	42
Hospitalizations (EDO's)	62

An individual can reach the CCRT by calling the sheriff's office. Brain Bigard, Crisis Co-Response Team (CCRT) Care Navigator/Team Lead noted the CCRT can be reached through Gulf Coast Center's crisis hotline also. Some jurisdictions will send the local police department first to ensure a quick response.

The CCRT works out of the Brazoria County Sheriff's office with the mental health deputies.

4. Board Member Reports:

a. Texas Council of Community Centers.....Jamie Travis Board Chair

Jamie Travis stated Texas Council's next Board Meeting and Executive Director Consortia will be April 25th through the 27th.

b. Texas Council Risk Management Fund.....Mary Lou Flynn-Dupart TCRMF Board

Mary Lou Flynn-Dupart stated that the Risk Management Fund has secured property insurance.

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

a. Operational, Clinical, & Financial Excellence

Felicia Jeffery, CEO formerly introduced Dr. Renee Valdez as the Chief Medical Officer. Dr. Valdez formerly worked for a FQHC, (Federal Qualified Health Clinic). She led their behavioral health team. Dr. Valdez noted the reason she came to Gulf Coast Center is because she has always wanted to work for an LMHA. She is very passionate about mental health. Felicia noted Dr. Valdez has a strong interest in data and systems.

CCBHC IA Climate



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Dr. Valdez presented on the CCBHC IA climate. This is the SAMSA related grant has some targets that we must meet. The state also has targets Gulf Coast Center needs to meet for the designation. The CCBHC IA Climate chart tracks how Gulf Coast Center is doing/measuring on the targets. There were six team members involved in the creation of this document. The team started by confirming we have the right metrics, then the team went line by line to see how we measure each metric or if we currently have a way to measure the metric. The deadline to have this done is July 1, 2024.

b. Clinical Operations Dashboard

CCBHC Metrics

Felicia Jeffery, CEO presented the clinical operations dashboard. First of all the bottom line is looking good. The tenants of excellence are Financial, Clinical and Operational excellence. Our strategic focus is access to services, provision of services, and expansion of services. For our budget margins the team is trying to make sure we are in the black. An increase in earned revenue by 10% is another financial goal. Last year we met the goal and far surpassed it. This year we are not meeting the metric and have room to grow. We set high goals for ourselves to strive to be better.

Introduction of Marketing Consultant.

Felicia Jeffery, CEO introduced Evan Nave, Gulf Coast Center's new marketing consultant whose contract was approved at the January 2024 Board of Trustees meeting. Evan Nave shared about himself and his experience. Evan stated he has 20 years of marketing experience.

Gulf Coast Center is planning a 55th Gala that is scheduled for October 18, 2024 at the Galveston County Convention Center.

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

a. Financial & Operational Monthly Report & YTD Summary

Rick Elizondo, CFO presented the Operational Report for February 2024. There is a total fund balance of \$11,682,834 (YTD), maintaining \$11,315,203 in unrestricted general fund balance and showing a fund balance of 116 days of operation, with 113 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 January 31st, 2024 Board Minutes.

On a motion by Mary Lou Flynn-Dupart, seconded by Jaime Castro the board approved the January 31st, 2024 Board Minutes. The motion carried with all members voting in favor. There was no public comment.

b. Review and approval of the January and February 2024 Check Register

On a motion by Mary Lou Flynn-Dupart, seconded by Jaime Castro the board approved the January and February 2024 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 Gulf Coast Center's FY23 Corporate Compliance Annual Report and board training.

On a motion by Mary Lou Flynn-Dupart, seconded by Caroline Rickaway, the board voted the approval of the Gulf Coast Center's FY23 Corporate Compliance Annual Report and board training. The motion carried with all members voting in favor. There was no public comment.

Linda Bell, Center's General Counsel presented and provided training on the FY23 Annual Compliance plan. The Center's compliance program was created in 2002. There is 100% compliance with the annual compliance training. In FY23, there were 4 investigations relating to a voicemail, email, form with PHI and meds being sent or given to an individual other than intended. There were no related paybacks. She discussed training staff on false claims act, upcoding, etc. She also shared that the Compliance Committee meets quarterly and reviews such things as audits, paybacks, QM activities, drug and alcohol testing, HR exclusion list. Lastly, she reminded the members that there were no audit findings presented by our auditors at the last board meeting.



- b. Consider approval of the CEO or her designee negotiating and entering into a contract with the successful respondent from the Invitation to Bid for a Comprehensive Community Needs Assessment.**

On a motion by Mary Lou Flynn-Dupart, seconded by Caroline Rickaway, the board voted the approval of the CEO or her designee negotiating and entering into a contract with the successful respondent from the Invitation to Bid for a Comprehensive Community Needs Assessment. The motion carried with all members voting in favor. There was no public comment.

- c. Consider approval of the 2024-2025 Harris County Department of Education, Records Management Fee Schedule Amendment reflecting a price increase in annual membership fee to \$7000.00 (increase of \$250). Due to the price increase in steel and corrugated supply boxes vendor the Centers rates will go up.**

On a motion by Mary Lou Flynn-Dupart, seconded by Vivian Renfrow, the board voted the approval of the 2024-2025 Harris County Department of Education, Records Management Fee Schedule Amendment reflecting a price increase in annual membership fee to \$7000.00 (increase of \$250). The motion carried with all members voting in favor. There was no public comment.

- d. Consider approval of the Resolution for the Office of the Governor - Byrne Justice State Crisis Intervention grant submission for a Gulf Coast Center Crisis Diversion Program for the Fiscal Year 2025. The Center is applying for Byrne funding specifically for the Galveston County Crisis Diversion Center first year of operations and a Brazoria County Crisis Diversion 10 bed unit.**

On a motion by Jaime Castro, seconded by Chris Cahill, the board voted the approval of the Resolution for the Office of the Governor - Byrne Justice State Crisis Intervention grant submission for a Gulf Coast Center Crisis Diversion Program for the Fiscal Year 2025. The motion carried with all members voting in favor. There was no public comment.

- e. Consider approval of the new FY24 YES Waiver Provider Services Network Agreements with Bridging Lives LLC for an Out-of-home respite camp located in Harris County.**

Term: March 1, 2024 – August 31, 2024

Amount not to exceed: \$35,804.00 (\$9.84/hr.)



On a motion by Jaime Castro, seconded by Mary Lou Flynn-Dupart the board voted the approval of the new FY24 YES Waiver Provider Services Network Agreements with Bridging Lives LLC for an Out-of-home respite camp located in Harris County. The motion carried with all members voting in favor. There was no public comment.

- f. Consider ratification of the FY24 new agreement with Southwest Key Programs, Inc. to support the delivery of services in an evidence-based intensive family-and community-based treatment program known as Multisystemic Therapy® services to at-risk youth with intensive needs and their families.**

Term: March 1, 2024 – August 31, 2024

Amount not to exceed: cost reimbursement \$656,444.00

On a motion by Mary Lou Flynn-Dupart, seconded by Caroline Rickaway, the board voted the ratification of the FY24 new agreement with Southwest Key Programs, Inc. to support the delivery of services in an evidence-based intensive family-and community-based treatment program known as Multisystemic Therapy® services to at-risk youth with intensive needs and their families. The motion carried with all members voting in favor. There was no public comment.

- g. Consider ratification of FY24 renewal agreement with TWG Investments, LTD dba The Wood Group for crisis respite services located at 5825 E.F. Lowry Expressway, Texas City, TX 77591.**

Amount not to exceed: \$406,736.00

Description: Community crisis respite services provide short-term, community-based residential, crisis treatment to persons who have no risk of harm to self or others and may have some functional impairment who require direct supervision and care but do not require hospitalization. This 10-bed facility has a recommended length of stay is 1-7 days.

On a motion by Jaime Castro, seconded by Mary Lou Flynn-Dupart, the board voted the ratification of FY24 renewal agreement with TWG Investments, LTD dba The Wood Group for crisis respite services located at 5825 E.F. Lowry Expressway, Texas City, TX 77591. The motion carried with all members voting in favor. There was no public comment.



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h. Consider ratification of the revised FY24 Agreement with Bay Area Recovery Center for substance use residential treatment services reflecting a rate increase in November 2023.

On a motion by Mary Lou Flynn-Dupart, seconded by Caroline Rickaway, the board voted the ratification of the revised FY24 Agreement with Bay Area Recovery Center for substance use residential treatment services reflecting a rate increase in November 2023. The motion carried with all members voting in favor. There was no public comment.

		TRA-INTENSIVE	TRA-SUPP
Rates 9/1/2023-10/31/2023		96.07	36.47
Rates 11/1/2023-08/31/2024		103.76	45.69
Bay Area Recovery Center	Original Amount	175,000.00	30,000.00
	Revised Agreement	154,000.00	71,000.00
BAY AREA	Final Contract Amount	329,000.00	101,000.00

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
March 27, 2024	Board Meeting	SBCSC	6:15 PM
April 24, 2024	Board Meeting	MCSC	6:15 PM
May 22, 2024	Board Meeting	SBCSC	6:15 PM
June 17-19, 2024	TX Council Annual Conference	Grand Hyatt, San Antonio	
July 24, 2024	Board Meeting	MCSC	6:15 PM
August 28, 2024	Board Meeting	SBCSC	6:15 PM
September 2024 TBA	Board Retreat	TBA	12:00pm
September 25, 2024	Board Meeting	MCSC	6:15pm
October 23, 2024	Board Meeting	SBCSC	6:15pm
December 11, 2024	Board Meeting	MCSC	6:15pm
January 22, 2025	Board Meeting	SBCSC	6:15pm
February 26, 2025	Board Meeting	MCSC	6:15pm



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March 26, 2025	Board Meeting	SBCSC	6:15pm
April 23, 2025	Board Meeting	MCSC	6:15pm
May 28, 2025	Board Meeting	SBCSC	6:15pm
June 2025 TBA	TX Council Annual Conference	TBA	
July 23, 2025	Board Meeting	MCSC	6:15pm
August 27, 2025	Board Meeting	SBCSC	6:15pm
MCSC location: 7510 FM 1765, Texas City, TX			
SBCSC location: 101 Tigner, Angleton, TX			

11. Executive Session. None.

- *As authorized by Chapter §551.071 of the Texas Government Code, the Board of Trustees reserves the right to adjourn into Executive Session at any time during this meeting to seek legal advice from its Attorney about any matters listed on the agenda.*

12. Adjourn 7:18 p.m.

There being no further business to bring before the Board of Trustees, the meeting was adjourned at 7:18 p.m.

Respectfully,

Approved as to Content and Form,

Rachel Griffiths
Secretary to the Board of Trustees

Jamie Travis
Board Chair



CPAs & BUSINESS ADVISORS

April 22, 2024

To the Board of Trustees of
The Gulf Coast Center
C/O Mr. Rick Elizondo,
CFO 4444 West Main
League City, Tx. 77573

You have requested that we audit the financial statements of the governmental activities, the major fund, and the aggregate remaining fund information of **The Gulf Coast Center (the Center)** as of August 31, 2024, and for the year then ended, and the related notes to the financial statements, which collectively comprise **the Center's** basic financial statements.

In addition, we will audit the entity's compliance over major federal and state award programs for the period ended August 31, 2024. We are pleased to confirm our acceptance and our understanding of this audit engagement by means of this letter.

Our audits will be conducted with the objectives of our expressing an opinion on each opinion unit and an opinion on compliance regarding the entity's major federal and state award programs. The objectives of our audit of the financial statements are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with auditing standards generally accepted in the United States of America (GAAS) and in accordance with *Government Auditing Standards*, and/or any state or regulatory audit requirements will always detect a material misstatement when it exists.

Misstatements, including omissions, can arise from fraud or error and are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

The objectives of our compliance audit are to obtain sufficient appropriate audit evidence to form an opinion and report at the level specified in the governmental audit requirement about whether the entity complied in all material respects with the applicable compliance requirements and identify audit and reporting requirements specified in the governmental audit requirement that are supplementary to GAAS and Government Auditing Standards, if any, and perform procedures to address those requirements.

Accounting principles generally accepted in the United States of America (U.S. GAAP), as promulgated by the Governmental Accounting Standards Board (GASB), require that supplementary information, such as management's discussion and analysis be presented to supplement the basic financial statements. Such

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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.

information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context.

As part of our engagement, we will apply certain limited procedures to the required supplementary information

(RSI) in accordance with auditing standards generally accepted in the United States of America. These limited procedures will consist primarily of inquiries of management regarding their methods of measurement and presentation and comparing the information for consistency with management's responses to our inquiries. We will not express an opinion or provide any form of assurance on the RSI. The following RSI is required by accounting principles generally accepted in the United States of America. This RSI will be subjected to certain limited procedures but will not be audited:

- Management's Discussion and Analysis

Also, the document we submit to you will include the following other additional information that will not be subjected to the auditing procedures applied in our audit of the financial statements:

- Introductory Section
- Statistical Section

Schedule of Expenditures of Federal and State Awards

We will subject the schedule of expenditures of federal and state awards to the auditing procedures applied in our audit of the basic financial statements and certain additional procedures, including comparing and reconciling the schedule to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and additional procedures in accordance with auditing standards generally accepted in the United States of America. We intend to provide an opinion on whether the schedule of expenditures of federal and state awards is presented fairly in all material respects in relation to the financial statements as a whole.

Data Collection Form

Prior to the completion of our engagement, we will complete the sections of the Data Collection Form that are our responsibility. The form will summarize our audit findings, amounts and conclusions. It is management's responsibility to submit a reporting package including financial statements, schedule of expenditure of federal awards, summary schedule of prior audit findings and corrective action plan along with the Data Collection Form to the federal audit clearinghouse. The financial reporting package must be text searchable, unencrypted, and unlocked. Otherwise, the reporting package will not be accepted by the federal audit clearinghouse. We will assist you in the electronic submission and certification. You may request from us copies of our report for you to include with the reporting package submitted to pass-through entities.

The Data Collection Form is required to be submitted within the *earlier* of 30 days after receipt of our auditors' reports or nine months after the end of the audit period, unless specifically waived by a federal cognizant or oversight agency for audits. Data Collection Forms submitted untimely are one of the factors in assessing programs at a higher risk.

Audit of the Financial Statements

We will conduct our audits in accordance with GAAS, the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States of America, the audit requirements of Title 2 U.S. Code of Federal Regulations (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance), the Texas Grant Management Standards (TxGMS) and the Guidelines for Annual Financial and Compliance Audits of Community MHMR Centers promulgated by THHSC.

As part of an audit of financial statements in accordance with GAAS and in accordance with Government Auditing Standards, Uniform Guidance and/or any state or regulatory audit requirements we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of controls.
- Obtain an understanding of the system of internal control in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. However, we will communicate to you in writing concerning any significant deficiencies or material weaknesses in internal control relevant to the audit of the financial statements that we have identified during the audit.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.
- Conclude, based on the audit evidence obtained, whether there are conditions or events, considered in the aggregate, that raise substantial doubt about **the Center's** ability to continue as a going concern for a reasonable period of time.

Because of the inherent limitations of an audit, together with the inherent limitations of internal control, an unavoidable risk that some material misstatements or noncompliance may not be detected exists, even though the audit is properly planned and performed in accordance with GAAS and *Government Auditing Standards* of the Comptroller General of the United States of America and/or state or regulatory audit requirements. Please note that the determination of abuse is subjective and *Government Auditing Standards* does not require auditors to detect abuse.

Our responsibility as auditors is limited to the period covered by our audit and does not extend to any other periods.

We will issue a written report upon completion of our audit of **the Center's** basic financial statements. Our report will be addressed to the governing body of **the Center**. Circumstances may arise in which our report may differ from its expected form and content based on the results of our audit. Depending on the nature of these circumstances, it may be necessary for us to modify our opinions, add an emphasis-of-matter or other-matter paragraph(s) to our auditor's report, or if necessary, withdraw from the engagement. If our opinions on the basic financial statements are other than unmodified, we will discuss the reasons with you in advance. If, for any reason, we are unable to complete the audit or are unable to form or have not formed opinions, we may decline to express opinions or to issue a report as a result of this engagement.

In accordance with the requirements of *Government Auditing Standards*, we will also issue a written report describing the scope of our testing over internal control over financial reporting and over compliance with laws, regulations, and provisions of grants and contracts, including the results of that testing. However, providing an opinion on internal control and compliance over financial reporting will not be an objective of the audit and, therefore, no such opinion will be expressed.

Audit of Major Program Compliance

Our audit of **the Center's** major federal and state award program(s) compliance will be conducted in accordance with the requirements of the Single Audit Act, as amended; and the Uniform Guidance and the TxGMS and will include tests of accounting records, a determination of major programs in accordance with the Uniform Guidance and TxGMS, and other procedures we consider necessary to enable us to express such an opinion on major federal and state award program compliance and to render the required reports. We cannot provide assurance that an unmodified opinion on compliance will be expressed. Circumstances may arise in which it is necessary for us to modify our opinion or withdraw from the engagement.

The Uniform Guidance requires that we also plan and perform the audit to obtain reasonable assurance about whether the material noncompliance with applicable laws and regulations, the provisions of contracts and grant agreements applicable to major federal award programs, and the applicable compliance requirements occurred, whether due to fraud or error, and express an opinion on the entity's compliance based on the audit.

Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

Noncompliance with the compliance requirements is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about the entity's compliance with the requirements of the federal programs as a whole.

As part of a compliance audit in accordance with GAAS and, if applicable, in accordance with *Government Auditing Standards*, and/or any state or regulatory audit requirements], we exercise professional judgment and maintain professional skepticism throughout the audit. We also identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks.

Our procedures will consist of determining major federal and state programs and performing the applicable procedures described in the U.S. Office of Management and Budget *OMB Compliance Supplement* for the types of compliance requirements that could have a direct and material effect on each of the entity's major programs, and performing such other procedures as we considers necessary in the circumstances The purpose of those procedures will be to express an opinion on the entity's compliance with requirements applicable to each of its major programs in our report on compliance issued pursuant to the Uniform Guidance and TxGMS.

Also, as required by the Uniform Guidance, we will obtain an understanding of the entity's internal control over compliance relevant to the audit in order to design and perform tests of controls to evaluate the effectiveness of the design and operation of controls that we consider relevant to preventing or detecting material noncompliance with compliance requirements applicable to each of the entity's major federal and

state award programs. Our tests will be less in scope than would be necessary to render an opinion on these controls and, accordingly, no opinion will be expressed in our report. However, we will communicate to you, regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we have identified during the audit.

We will issue a report on compliance that will include an opinion or disclaimer of opinion regarding the entity's major federal award programs, and a report on internal controls over compliance that will report any significant deficiencies and material weaknesses identified; however, such report will not express an opinion on internal control.

Management Responsibilities

Our audit will be conducted on the basis that management and, when appropriate, those charged with governance, acknowledge and understand that they have responsibility:

1. For the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America;
2. For the design, implementation, and maintenance of the system of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error;
3. For identifying, in its accounts, all federal and state awards received and expended during the period and the federal programs under which they were received;
4. For maintaining records that adequately identify the source and application of funds for federally funded activities;
5. For preparing the schedule of expenditures of federal and state awards (including notes and noncash assistance received) in accordance with the Uniform Guidance;
6. For designing, implementing, and maintaining effective internal control over federal and state awards that provides reasonable assurance that the entity is managing federal and state awards in compliance with federal statutes, regulations, and the terms and conditions of the federal and state awards;
7. For identifying and ensuring that the entity complies with federal laws, statutes, regulations, rules, provisions of contracts or grant agreements, and the terms and conditions of federal and state award programs and implementing systems designed to achieve compliance with applicable federal statutes, regulations, and the terms and conditions of federal and state award programs;
8. For disclosing accurately, currently, and completely, the financial results of each federal and state award in accordance with the requirements of the award;
9. For identifying and providing report copies of previous audits, attestation engagements, or other studies that directly relate to the objectives of the audit, including whether related recommendations have been implemented;
10. For taking prompt action when instances of noncompliance are identified;
11. For addressing the findings and recommendations of auditors, for establishing and maintaining a process to track the status of such findings and recommendations and taking corrective action on reported audit findings from prior periods and preparing a summary schedule of prior audit findings;
12. For following up and taking corrective action on current year audit findings and preparing a corrective action plan for such findings;
13. For submitting the reporting package and data collection form to the appropriate parties;
14. For making the auditor aware of any significant contractor relationships where the contractor is responsible for program compliance;

15. To provide us with:
 - a. Access to all information of which management is aware that is relevant to the preparation and fair presentation of the financial statements including disclosures, and relevant to federal and state award programs, such as records, documentation, and other matters;
 - b. Additional information that we may request from management for the purpose of the audit; and
 - c. Unrestricted access to persons within the entity and others from whom we determine it necessary to obtain audit evidence.
16. For adjusting the financial statements to correct material misstatements and confirming to us in the management representation letter that the effects of any uncorrected misstatements aggregated by us during the current engagement and pertaining to the current year period(s) under audit are immaterial, both individually and in the aggregate, to the financial statements as a whole;
17. For acceptance of nonattest services, including identifying the proper party to oversee nonattest work;
18. For maintaining adequate records, selecting and applying accounting principles, and safeguarding assets;
19. For informing us of any known or suspected fraud affecting the entity involving management, employees with significant role in the system of internal control and others where fraud could have a material effect on compliance;
20. For the accuracy and completeness of all information provided;
21. For taking reasonable measures to safeguard protected personally identifiable and other sensitive information; and
22. For confirming your understanding of your responsibilities as defined in this letter to us in your management representation letter.

With regard to the schedule of expenditures of federal and state awards referred to above, you acknowledge and understand your responsibility (a) for the preparation of the schedule of expenditures of federal and state awards in accordance with the Uniform Guidance, (b) to provide us with the appropriate written representations regarding the schedule of expenditures of federal and state awards, (c) to include our report on the schedule of expenditures of federal and state awards in any document that contains the schedule of expenditures of federal and state awards and that indicates that we have reported on such schedule, and (d) to present the schedule of expenditures of federal and state awards with the audited financial statements, or if the schedule will not be presented with the audited financial statements, to make the audited financial statements readily available to the intended users of the schedule of expenditures of federal and state awards no later than the date of issuance by you of the schedule and our report thereon.

As part of our audit process, we will request from management and, when appropriate, those charged with governance, written confirmation concerning representations made to us in connection with the audit.

We understand that your employees will prepare all confirmations we request and will locate any documents or invoices selected by us for testing.

The Center will be responsible for ensuring that the audit report is received by the Texas Health and Human Services Commission by February 1, 2025. The Center is further responsible for ensuring that

other appropriate governmental agencies receive copies of the audit report according to instructions in the current Guidelines for Annual Financial and Compliance Audits of Community MHMR Centers.

If you intend to publish or otherwise reproduce the financial statements and make reference to our firm, you agree to provide us with printers' proofs or masters for our review and approval before printing. You also agree to provide us with a copy of the final reproduced material for our approval before it is distributed.

Nonattest Services

With respect to any nonattest services we perform, we agree to perform the following:

- Assist with preparing the financial statements, schedule of expenditures of federal and state awards, and the related notes of the Center in conformity with U.S. generally accepted accounting principles and Uniform Guidance and the Texas Grant Management Standards based on information provided by you.
- Completion of the auditee's portion of the Data Collection Form.
- Preparing GASB 34 adjusting journal entries.
- Maintaining lease information and SBITA in Lease Query

We will not assume management responsibilities on behalf of **the Center**. **The Center's** management understands and agrees that any advice or recommendation we may provide in connection with our audit engagement are solely to assist management in performing its responsibilities.

The Center's management is responsible for (a) making all management decisions and performing all management functions; (b) assigning a competent individual to oversee the services; (c) evaluating the adequacy of the designing, implementing, and maintaining the system of internal control, including the process used to monitor the system of internal control.

Our responsibilities and limitations of the nonattest services are as follows:

- We will perform the services in accordance with applicable professional standards.
- The nonattest services are limited to the services previously outlined above. Our firm, in its sole professional judgment, reserves the right to refuse to do any procedure or take any action that could be construed as making management decisions or assuming management responsibilities.

Fees and Timing

Rebekah Scott is the engagement partner for the audit services specified in this letter. The engagement partner's responsibilities include supervising services performed as part of this engagement and signing or authorizing another qualified firm representative to sign the audit report.

Our fees are based on the amount of time required at various levels of responsibility, inclusive of actual out-of-pocket expenses, including administrative charges and a technology fee. Invoices are payable upon presentation. We estimate that our fee for the audit will be \$74,000. Our fee includes Single Audit procedures for 2 state and 2 federal major programs. Should your audit require additional major programs,

our fee for each program will be \$6,000. We will determine major programs based on risk as required by the Uniform Guidance and TxGMS.

Out of scope or additional work caused by delays in receiving items on the Prepared by Client (PBC) list will be billed tracked and billed at our hourly rates. If all items are not provided in a timely manner (including the trial balance) as requested in the PBC list, we will track and bill the additional time it takes our team to perform this work. Further, we will track time it takes to reaudit schedules if incorrect or incomplete information is initially provided.

In addition the fee to house leases and SBITAs on lease query is \$175 per lease or SBITA per year (recurring fee per lease/SBITA each year). The fee to input any new leases or SBITAs in the current year is \$200 per lease or SBITA.

The ability to perform and complete our engagement consistent with the estimated fee included above depends upon the quality of your underlying accounting records and the timeliness of your personnel in providing information and responding to our requests. To assist with this process, we will provide you with an itemized request list that identifies the information you will need to prepare and provide in preparation for our engagement, as well as the requested delivery date for those items. A lack of preparation, including not providing this information in an accurate and timely manner, unanticipated audit adjustments, and/or untimely assistance by your personnel may result in an increase in our fees and/or a delay in the completion of our engagement.

We may be requested to make certain audit documentation available to outside parties, including regulators, pursuant to authority provided by law or regulation or applicable professional standards. If requested, access to such audit documentation will be provided under the supervision of Eide Bailly LLP's personnel. Furthermore, upon request, we may provide copies of selected audit documentation to the outside party, who may intend, or decide, to distribute the copies of information contained therein to others, including other governmental agencies. We will be compensated for any time and expenses, including time and expenses of legal counsel, we may incur in making such audit documentation available or in conducting or responding to discovery requests or participating as a witness or otherwise in any legal, regulatory, or other proceedings as a result of our Firm's performance of these services. You and your attorney will receive, if lawful, a copy of every subpoena we are asked to respond to on your behalf and will have the ability to control the extent of the discovery process to control the costs you may incur.

Should our relationship terminate before our audit procedures are completed and a report issued, you will be billed for services to the date of termination. All bills are payable upon receipt. A service charge of 1% per month, which is an annual rate of 12%, will be added to all accounts unpaid 30 days after billing date. If collection action is necessary, expenses and reasonable attorney's fees will be added to the amount due.

Other Matters

During the course of the engagement, we will only provide confidential engagement documentation to you via Eide Bailly's secure portal or other secure methods, and request that you use the same or similar tools in providing information to us. Should you choose not to utilize secure communication applications, you acknowledge that such communication contains a risk of the information being made available to unintended third parties. Similarly, we may communicate with you or your personnel via e-mail or other electronic methods, and you acknowledge that communication in those mediums contains a risk of misdirected or intercepted communications.

Should you provide us with remote access to your information technology environment, including but not limited to your financial reporting system, you agree to (1) assign unique usernames and passwords for use by our personnel in accessing the system and to provide this information in a secure manner; (2) limit access to “read only” to prevent any unintentional deletion or alteration of your data; (3) limit access to the areas of your technology environment necessary to perform the procedures agreed upon; and (4) disable all usernames and passwords provided to us upon the completion of procedures for which access was provided. We agree to only access your technology environment to the extent necessary to perform the identified procedures.

Regarding the electronic dissemination of audited financial statements, including financial statements published electronically on your website or elsewhere, you understand that electronic sites are a means to distribute information and, therefore, we are not required to read the information contained in these sites or to consider the consistency of other information in the electronic site with the original document.

Professional standards prohibit us from being the sole host and/or the sole storage for your financial and non-financial data. As such, it is your responsibility to maintain your original data and records and we cannot be responsible to maintain such original information. By signing this engagement letter, you affirm that you have all the data and records required to make your books and records complete.

We may use third party service providers and/or affiliated entities (including Eide Bailly Shared Services Private Limited) (collectively, “service providers”) in order to facilitate delivering our services to you. Our use of service providers may require access to client information by the service provider. We will take reasonable precautions to determine that they have the appropriate procedures in place to prevent the unauthorized release of confidential information to others.

We will remain responsible for the confidentiality of client information accessed by such service provider and any work performed by such service provider. You acknowledge that your information may be disclosed to such service providers, including those outside the United States.

Neither of us may use or disclose the other’s confidential information for any purpose except as permitted under this engagement letter or as otherwise necessary for Eide Bailly to provide the services. Your confidential information is defined as any information you provide to us that is not available to the public. Eide Bailly’s confidential information includes our audit documentation for this engagement. Our audit documentation shall at all times remain the property of Eide Bailly LLP. The confidentiality obligations described in this paragraph shall supersede and replace any and all prior confidentiality and/or nondisclosure agreements (NDAs) between us.

We agree to retain our audit documentation or work papers for a period of at least eight years from the date of our report.

Further, we will be available during the year to consult with you on financial management and accounting matters of a routine nature.

You agree to share all facts that may affect your financial statements, even if you first become aware of those facts after the date of the auditor’s report but before the date your financial statements are issued.

At the conclusion of our audit engagement, we will communicate to the Board of Trustees the following significant findings from the audit:

- Our view about the qualitative aspects of the entity's significant accounting practices;
- Significant difficulties, if any, encountered during the audit;
- Uncorrected misstatements, other than those we believe are trivial, if any;
- Disagreements with management, if any;
- Other findings or issues, if any, arising from the audit that are, in our professional judgment, significant and relevant to those charged with governance regarding their oversight of the financial reporting process;
- Material, corrected misstatements that were brought to the attention of management as a result of our audit procedures;
- Representations we requested from management;
- Management's consultations with other accountants, if any; and
- Significant issues, if any, arising from the audit that were discussed, or the subject of correspondence, with management.

Government Auditing Standards require that we provide, upon request, a copy of our most recent external peer review report and any subsequent review reports to the party contracting for the audit. Accordingly, we have provided a copy of our most recent peer review report.

Eide Bailly LLP is a member of HLB International, a worldwide organization of accounting firms and business advisors, ("HLB"). Each member firm of HLB, including Eide Bailly LLP is a separate and independent legal entity and is not owned or controlled by any other member of HLB. Each member firm of HLB is solely responsible for its own acts and omissions and no other member assumes any liability for such acts or omissions. Neither Eide Bailly LLP, nor any of its affiliates, are responsible or liable for any acts or omission of HLB or any other member firm of HLB and hereby specifically disclaim any and all responsibility, even if Eide Bailly LLP, or any of its affiliates are aware of such acts or omissions of another member of HLB.

Eide Bailly LLP formed The Eide Bailly Alliance Network, a network for small to mid-sized CPA firms across the nation. Each member firm of The Eide Bailly Alliance, including Eide Bailly LLP, is a separate and independent legal entity and is not owned or controlled by any other member of The Eide Bailly Alliance. Each member firm of The Eide Bailly Alliance is solely responsible for its own acts and omissions and no other member assumes any liability for such acts or omissions. Neither Eide Bailly LLP, nor any of its affiliates, are responsible or liable for any acts or omission of The Eide Bailly Alliance or any other member firm of The Eide Bailly Alliance and hereby specifically disclaim any and all responsibility, even if Eide Bailly LLP, or any of its affiliates are aware of such acts or omissions of another member of The Eide Bailly Alliance.

MEDIATION

Any disagreement, controversy or claim arising out of or related to any aspect of our services or relationship with you (hereafter a "Dispute") shall, as a precondition to litigation in court, first be submitted to mediation. In mediation, the parties attempt to reach an amicable resolution of the Dispute with the aid of an impartial mediator. Mediation shall begin by service of a written demand. The mediator will be selected by mutual agreement. If we cannot agree on a mediator, one shall be designated by the American Arbitration Association ("AAA"). Mediation shall be conducted with the parties in person in Abilene, Texas. Each party

will bear its own costs in the mediation. The fees and expenses of the mediator will be shared equally by the parties. Neither party may commence a lawsuit until the mediator declares an impasse.

LIMITED INDEMNITY

Eide Bailly LLP and its partners, affiliates, officers and employees (collectively "Eide Bailly") shall not be responsible for any misstatements in your financial statements that we may fail to detect as a result of misrepresentations or concealment of information by any of your owners, directors, officers or employees. You shall indemnify and hold Eide Bailly harmless from any claims, losses, settlements, judgments, awards, damages and attorneys' fees arising from any such misstatement or concealment of information.

If through no fault of Eide Bailly we are named as a party to a dispute between you and a third party, you shall indemnify and hold Eide Bailly harmless against any losses, damages, settlements, judgments, awards, and the costs of litigation (including attorneys' fees) we incur in connection with the dispute.

Eide Bailly shall not be entitled to indemnification under this agreement unless the services were performed in accordance with professional standards in all material respects.

LIMITATION OF LIABILITY

The exclusive remedy available to you for any alleged loss or damages arising from or related to Eide Bailly's services or relationship with you shall be the right to pursue claims for actual damages that are directly caused by Eide Bailly's breach of this agreement or Eide Bailly's violation of applicable professional standards. In no event shall Eide Bailly's aggregate liability to you exceed two times fees paid under this agreement, nor shall Eide Bailly ever be liable to you for incidental, consequential, punitive or exemplary damages, or attorneys' fees.

TIME LIMITATION

You may not bring any legal proceeding against Eide Bailly unless it is commenced within twenty-four (24) months ("Limitation Period") after the date when we delivered our report, return, or other deliverable under this agreement to you, regardless of whether we do other services for you or that may relate to the audit. The Limitation Period applies and begins to run even if you have not suffered any damage or loss, or have not become aware of a possible Dispute.

GOVERNING LAW AND VENUE

Any Dispute between us, including any Dispute related to the engagement contemplated by this agreement, shall be governed by Minnesota law. Any unresolved Dispute shall be submitted to a federal or state court located in Minneapolis, Minnesota.

ASSIGNMENTS PROHIBITED

You shall not assign, sell, barter or transfer any legal rights, causes of actions, claims or Disputes you may have against Eide Bailly to any person.

Please sign and return the attached copy of this letter to indicate your acknowledgment of, and agreement with, the arrangements for our audit of the financial statements including our respective responsibilities. We appreciate the opportunity to be your certified public accountants and look forward to working with you and your staff.

Respectfully,



Rebekah Scott Partner

RESPONSE:

This letter correctly sets forth our understanding.

Acknowledged and agreed on behalf of management of **The Gulf Coast Center** by: Name:

Title:

Date:

Acknowledged and agreed on behalf of the Board of Trustees of **The Gulf Coast Center** by: Name:

Title:

Date:

Report on the Firm's System of Quality Control

January 20, 2021

To the Partners of Eide Bailly LLP and
the National Peer Review Committee

We have reviewed the system of quality control for the accounting and auditing practice of Eide Bailly LLP (the firm) applicable to engagements not subject to PCAOB permanent inspection in effect for the year ended July 31, 2020. Our peer review was conducted in accordance with the Standards for Performing and Reporting on Peer Reviews established by the Peer Review Board of the American Institute of Certified Public Accountants (Standards).

A summary of the nature, objectives, scope, limitations of, and the procedures performed in a System Review as described in the Standards may be found at www.aicpa.org/prsummary. The summary also includes an explanation of how engagements identified as not performed or reported in conformity with applicable professional standards, if any, are evaluated by a peer reviewer to determine a peer review rating.

Firm's Responsibility

The firm is responsible for designing a system of quality control and complying with it to provide the firm with reasonable assurance of performing and reporting in conformity with applicable professional standards in all material respects. The firm is also responsible for evaluating actions to promptly remediate engagements deemed as not performed or reported in conformity with professional standards, when appropriate, and for remediating weaknesses in its system of quality control, if any.

Peer Reviewer's Responsibility

Our responsibility is to express an opinion on the design of the system of quality control and the firm's compliance therewith based on our review.

Required Selections and Considerations

Engagements selected for review included engagements performed under *Government Auditing Standards*, including compliance audits under the Single Audit Act; audits of employee benefit plans, audits performed under FDICIA, an audit of a broker dealer, and examinations of service organizations [SOC 1 and SOC 2 engagements].

As a part of our peer review, we considered reviews by regulatory entities as communicated by the firm, if applicable, in determining the nature and extent of our procedures.

Opinion

In our opinion, the system of quality control for the accounting and auditing practice of Eide Bailly LLP applicable to engagements not subject to PCAOB permanent inspection in effect for the year ended July 31, 2020, has been suitably designed and complied with to provide the firm with reasonable assurance of performing and reporting in conformity with applicable professional standards in all material respects. Firms can receive a rating of *pass*, *pass with deficiency(ies)* or *fail*. Eide Bailly LLP has received a peer review rating of *pass*.



Cherry Bekaert LLP



**THE GULF COAST CENTER
BOARD OF TRUSTEE'S
R E S O L U T I O N #2024-1**

At their regularly scheduled Board of Trustees meeting of July 24th, 2024; that the Board of Trustees of The Gulf Coast Center ("Center"), a community-based mental health, intellectual and developmental disabilities Center, unanimously approved the adoption of the following resolution:

BE IT RESOLVED

That the Board of Trustees of the Gulf Coast Center has formally approved the transfer the stated amount of cash reserves identified in the table below. The designated staff will report on the status of each of these amounts at the Board of Trustees' monthly meetings as a part of the Center's financial report. The effective date of the Committed Cash Balance amounts will be effective August 1st, 2024.

Committed Use	Original Commitment Date	Balance as of 6/30/2024	Additional Funds to be Added	Adjusted Balance as of 07/31/2024
Capital Projects - Facility	FY2008	\$ 110,846.00	\$ 500,000.00	\$ 610,846.00

Utilization of the Committed Amounts shown above will be in accordance with Center established procedures for the funds; with use oversight provided by Board of Trustees' authorized Staff Signatures - Executive Director, Chief Financial Officer, and/or Director HR/MIS Services.

The above resolution was passed by a majority of those present and voting in accordance with the Bylaws of the Gulf Coast Center; and is a true and correct copy of a portion of the minutes of the regular Board of Trustees' meeting of the Gulf Coast Center held July 24, 2024.

Approved:



Jamie Travis – Chair – Board of Trustees

Date: _____

Attest:

Secretary – Board of Trustees

Date: _____

4444 West Main St
League City, TX
77573
409.763.2373
Toll Free- 1-800-643-8967
FAX 409.978-2401
www.GulfCoastCenter.org

Better community healthcare promoting healthy living.



FY25 Holiday Calendar

HOLIDAY	DAY OBSERVED	DAY OF WEEK
Labor Day	9/2/2024	Monday
Thanksgiving	11/28/2024	Thursday
Day after Thanksgiving	11/29/2024	Friday
Christmas Eve	12/24/2024	Tuesday
Christmas Day	12/25/2024	Wednesday
New Year's Day	1/1/2025	Wednesday
Martin Luther King Jr. Day	1/20/2025	Monday
President's Day	2/17/2025	Monday
Good Friday	4/18/2025	Friday
Memorial Day	5/26/2025	Monday
Juneteenth	6/19/2025	Thursday
Independence Day	7/4/2025	Friday



Handbook of Operating Procedures Policy 3.6	
Section: Health, Safety, and Emergency Management	Responsibility and Oversight: General Counsel
Subject: Safety Management: Personal Property including Weapons	Origination Date: January 2016 Last Revision/Review: 7/24/2024, 3/11/2021

I. **Title:** Personal Property including Weapons Policy

II. **Applicability:** All Center employees, contractors, volunteers, and visitors.

III. **Policy:**

It is the policy of The Gulf Coast Center (“Center”) to exclude all weapons, illegal drugs, and tobacco products from the premises of all Center facilities and authorized program locations to the maximum extent allowable by law. Items including legal drugs and prescription medications are allowable based on regulations and laws governing transport and storage. The Center will post appropriate signage excluding weapons, tobacco products and illegal drugs in a visible location in all facilities.

Excluded items include:

- A. “Weapon(s)” include handguns, firearms, clubs, location-restricted knives, “prohibited weapons” defined in §46.05 of the Texas Penal Code, and all items or objects that have no specific purpose or relationship to the treatment of a patient and (i) may be presented as a weapon; or (ii) may be reasonably foreseen or expected to be used as a weapon.
- B. “Illegal drugs” include street drugs, alcohol (if under the legal drinking age), and drug paraphernalia.
- C. “Tobacco products” include cigarettes, cigars, chewing tobacco, and electronic cigarettes.

Allowable items include:

- A. “Legal drugs” include prescription medications, over-the-counter drugs, vitamins, and herbs.

IV. **REFERENCES:** Rules, Regulation and Standards

- Texas Penal Code – Sections 46.01, 46.02, 46.03, 46.05, 46.15, 30.06, and 30.07.
- License to Carry a Handgun, Texas Government Code -- Chapter 411, Subchapter H
- Restrictions on Prohibiting Employee Transportation or Storage of Certain Firearms or Ammunition Texas Labor Code – Chapter 52, Sub-chapter G
- Texas Controlled Substances ACT- Title 6, Subtitle C, Chapter 481, Sub-chapter A.
- 25 Texas Administrative Code 448.505



The Gulf Coast Center
4352 E.F. Lowry Expressway
Texas City, Texas 77591
(281) 229-2469
(409) 948-1411 FAX
SamuelT@GulfCoastCenter.org

MEMORANDUM

Apr, 03, 2024

To: Board of Trustees

From : Samuel Tingle, Director of Fixed Assets and Purchasing

Re: Declaration of Surplus Vehicle

Approval is requested to declare Vehicle #8915 surplus and authorized for disposal. This vehicle is a 2011 Ford Fusion, VIN. #3FAHP0GA8BR268915, License Plate #111-6854, has 93,082 miles, and is no longer cost effective to maintain in the fleet. As a result it is requested that this vehicle be considered surplus and be sent to auction.

Thank you for your consideration.

4352 EMMETT F. LOWRY EXPRESSWAY, TEXAS CITY, TX 77591
281.229.2469 • 800.643.0967 • Fax 409.948.1411 • gulfcoastcenter.org