

THE GULF COAST CENTER

Regular Board of Trustees Meeting
Southern Brazoria County Service Center
101 Tigner St, Angleton, TX
Wednesday, October 22, 2025
6:15 pm



"Better community healthcare promoting healthy living."

1. **Call To Order** Jamie Travis, Board Chair
 - a. Announcements and Introductions
2. **Citizens' Comments**
3. **Program Report:**
 - a. Safer Suicide Care Diane Manley
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
 - Deinisha Tryals
 - Strategic Plan Update
 - EOU
6. **Budget, Finance and Admin Reports** Rick Elizondo, CFO
 - a. Financial & Operational Monthly Report & YTD Summary & Federal Funding Analysis **(Pg.4)**
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 September 24, 2025 Board Minutes. **(Pg. 31)**
 - b. Review and approval of September 2025 Check Registers.
 - c. Annual review of Mission, Vision & Values (tabled from last month) **(Pg. 16)**
8. **Action Items**..... Linda Bell, JD, BSN, RN

GCC Administration Agreements

- a. Review and approval of Investment Policies **(Pg. 7)**

HHSC Agreements

- b. Consider approval of the **FY26-30 HHSC IDD Money Follows the Person Demonstration** (MFPD) contract #HHS00169500035. This contract provides funding for nursing facility residents to receive services in the community by transitioning to long-term services and supports (LTSS). FY26 not to exceed amount \$97,947.

Procurement Awardees

- c. Consider approval of the 5 procurement awardees for the identified services listed:

1. **5e Analytics** - awardee shall provide Data Reporting and Analytics (DataScience Resource)
Term: FY26 **Amount not to exceed:** \$84,000 (\$175/hr)
2. **MTM Consulting Services** - awardee shall provide Data Measurement and Management Consultation (SPQM Data)
Term: FY26 **Amount not to exceed:** \$33,000 (\$2,750/Month)
3. **Alina Telehealth** - awardee shall provide after hours Telepsychiatry/Psychiatry services for EOU
Term: FY26 **Amount not to exceed:** \$480,000 (\$225/patient for initial evals)
4. **PSYRIN** – awardee shall provide AI Assistant for Behavioral Health Intakes both virtual and in-person.
Term: FY26-27 **Amount not to exceed:** \$33,000 (\$65,000 annually)
5. **SHI** : awardee shall provide observation smart wearables for the EOU clients.
Term: FY26 **Amount not to exceed:** \$25,000

Asset Management & Facility Services

- d. Consider approval of the FY26 renewal Facility Use Agreement with **Coastal Health and Wellness** for use of space for the Galveston Island Community Service Center location at an amount not to exceed \$3,600/mo.
- e. Consider the approval of the acquisition/purchase of the 12 below identified vehicles for the utilization by Center programs each through the best value set-aside opportunity through TXSmartbuy cooperative purchasing program. (**Pg. 17**) **Funding source:** various see below
 1. One 15 passenger Chevrolet van for RU# 5907 (EOU). Not to exceed \$50,000. – *State Crisis Intervention Grant*
 2. One Toyota Camry sedan for RU# 0950. Not to exceed \$35,000. – *Capital Project Fund-Lease back to General Fund*
 3. Ten Toyota Camry sedans for fleet replenishment. Not to exceed \$340,000. - *Capital Project Fund-Lease back to General Fund*

Behavioral Health Services

- f. Consider ratification of the new FY26 Hospital and Professional Services Agreement with **Medical Behavioral Hospital Of Clear Lake** for Private Psychiatric Beds to be used when the Center Guaranteed Beds/Unit is at capacity. **Rate:** \$750/bed day **Not to exceed:** \$500,000.00 (no change)
- g. Consider ratification of the FY26 renewal Hospital and Professional Agreement with **SUN Behavioral Houston** for the purchase of 'overflow' beds for the occasion the Gulf Coast Center's designated unit is at capacity
Rate: \$750/bed day **Not to exceed:** **\$593,680** (increase of \$93,680 from FY25)
- h. Consider ratification of the FY26 renewal Consultation Agreement with **MICHELLE WASHBURN** to provide consultation on implementation and evaluation of Gulf Coast Center's Assisted Outpatient Treatment Program (AOT Program). **Term:** 9/30/25 - 9/29/26 **Not to Exceed:** \$10,000 (\$200/hr.) grant funded
- i. Consider ratification of the New FY26 Professional Services Agreement with **DR. ROBIN GEARING**, a designated subcontractor of MT-RITES to provide con-investigation on implementation and evaluation of Gulf Coast Center's Assisted Outpatient Treatment Program (AOT Program).
Term: 9/30/24 - 9/29/26 **Not to Exceed:** \$10,025 annually; **grant funded:** University of Houston (MH-RITES)
Description: Dr. Robin Gearing who will be providing co-investigator services for the AOT program in the area of Evaluation Activities.
- j. Consider approval of the amended Interlocal Agreement with **East Texas Behavioral Healthcare Network** for the provision of Child/MD Adolescent/MD, to include compensation of \$195 per hour for Dr. Grace Kang, D.O.
- k. Consider approval of the amendment to the Interlocal Agreement with **Brazoria County** for a working collaboration for the *Brazoria County Crisis Co-Response (CCRT) Team*. The amendment clarifies the correct in-kind match the Center will provide.

IDD Services

- I. Consider approval of the FY26-27 LIDDA Local Provider Network Development Plan. **(Pg. 18)**

SUD Agreements

- m. Consider approval of the below 2 solicitation awards (Revenue Contracts) with The United States Probation Office for the Southern District of Texas for treatment services for federal defendants and persons under supervision: Term: October 1, 2025, through September 30, 2026
1. Solicitation Number 0541-26-04 for Galveston County
 2. Solicitation Number 0541-26-05 for Brazoria County

Reimbursement Rates	
1010 – Urine Collection	\$15.00
2022 – Manualized CBT Group	\$15.05
2010 – Individual Counseling (includes assessment)	\$67.38
2030 – Family Counseling	\$15.05
1501- Administrative Fees	5% of Fees collected by Vendor

9. **Pending or Revised Action Items** Linda Bell, JD, BSN, RN
Pending or revised items are those items that 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

October 22, 2025	Board Meeting	SBCSC	6:15pm
November	No Meeting		
December 10, 2025	Board Meeting	MCSC	6:15pm
January 28, 2026	Board Meeting	SBCSC or NBCSC (tbd)	6:15pm
February 25, 2026	Board Meeting	MCSC	6:15pm
March 25, 2026	Board Meeting	SBCSC or NBCSC (tbd)	6:15pm
April 29, 2026	Board Meeting	MCSC	6:15pm
May 27, 2026	Board Meeting	SBCSC	6:15pm
June 10-12, 2026	Annual Texas Council Conference	San Antonio, TX	
July 22, 2026	Board Meeting	MCSC	6:15pm
August 19, 2026	Board Meeting	SBCSC	6:15pm

SBCSC location: 101 Tigner, Angleton, TX | **NBCSC location:** 101 Brennan, Alvin, TX

MCSC location: 7510 FM 1765, Texas City, 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							
FY2026 Monthly Board Financial Review							<i>Unaudited as of 08/31/2025</i>
Fiscal Year 2026 Unaudited Centerwide General Fund Balance Status							
Total General Fund Balance as of 08/31/2025 (UnAudited).....							\$ (10,944,259)
FY2026 Year-to-Date Reported Expense and Revenue Totals (Unaudited)							
	Expenditures	Operational	3,536,306				
		Non-Operational	-				
		Fund Balance	-		3,536,306		
	Revenues	Operational	3,514,724				
		Non-Operational	-		3,514,724		\$ 21,582
Total General Fund Balance Year-to-Date (Unaudited).....							\$ (10,922,676)
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)					
	Capital Projects - Facility (FY2024)	(500,000)					
	Capital Projects - Facility (FY2025)	(1,033,379)	(2,083,379.00)				
	fy2008-fy2024 Expenditure		439,153.86				
	fy2025 Expenditure		\$ 1,344,225.31				
			-				
					(300,000)		
	Capital Projects - IT (FY2003-FY2014)	(600,000)					
	Capital Projects - IT (FY2015)	(150,000)					
	Capital Projects - IT (FY2017)	(140,000)	(890,000.00)				
	fy2008-fy2024 Expenditure		744,020.18				
	fy2025 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)				
	fy2008-fy2024 Expenditure		471,531.85				
	fy2025 Expenditure		-				
					(28,468)		
	Major Facility Repairs (FY2014)	(186,940)	(186,940.00)				
	fy2008-fy2024 Expenditure		186,940.00				
	fy2025 Expenditure		-				
					-		
	Flexible Spending Supports (FY2004-2013)	(500,000)					
	Flexible Spending Supports (FY2018)	(100,000)	(600,000.00)				
	fy2008-fy2024 Expenditure		517,663.44				
	fy2025 Expenditure						
					(82,337)		
						(556,784)	
Total General Fund Balance Year-to-Date (Unaudited)							\$ (10,922,676)
Unrestricted Use General Fund Balance (Unaudited)							\$ (10,365,892)

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 FY2026 Monthly Fund Balance Report												
Unaudited as of 08/31/2025												
Fiscal Year 2026 Unaudited Centerwide General Fund Balance Status												
Total General Fund Balance as of 08/31/25 (UnAudited)..... \$ (10,944,259)												
FY2026 Monthly Reported Expense and Revenue Totals (Unaudited)												
	September	October	November	December	January	February	March	April	May	June	July	August
Operational Expenses:	3,536,306											
Non-Operational Expenses:												
Fund Balance Expenses:	-											
Total Expenses:	3,536,306	-	-	-	-	-	-	-	-	-	-	-
Operational Revenues:	3,514,724											
Non-Operational Revenues:												
Fund Balance Revenues:												
Total Revenues:	3,514,724	-	-	-	-	-	-	-	-	-	-	-
Net increase/decrease to Fund Balance	(21,582)	-	-	-	-	-	-	-	-	-	-	-
Total General Fund Balance:	(10,922,676)	(10,922,676)	(10,922,676)	(11,015,357)	(11,064,635)	(10,990,675)	(10,532,718)	(10,586,758)	(10,661,222)	(10,664,055)	(10,666,888)	
Total Unrestricted Fund Balance	(10,365,892)											
Total Restricted Fund Balance	(556,784)											
Avg. Operational Cost per day:	117,877											
	September	October	November	December	January	February	March	April	May	June	July	Aug
DAYS OF OPERATION OF TOTAL FUND BALANCE	93	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
DAYS OF OPERATION OF UNRESTRICTED FUND BALANCE	88	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
DAYS OF OPERATION OF RESTRICTED FUND BALANCE	5	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

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MONTHLY BOARD FINANCE REPORT-SEPT 2025

	<u>MONTHLY</u> <u>FY2026</u> <u>BUDGET</u>	<u>MONTHLY</u> <u>FY 2026</u> <u>September</u>	<u>ANNUAL</u> <u>FY 2026</u> <u>BUDGET</u>	<u>YEAR TO DATE</u> <u>FY 2026</u> <u>September</u>	<u>YTD</u> <u>Percent</u> <u>Variance</u>	<u>YTD</u> <u>Dollar</u> <u>Variance</u>
EXPENSES						
Salary and Wages	\$1,909,197.45	\$1,569,833.57	\$22,910,369.10	\$1,569,833.57	06.9%	\$21,340,535.53
Fringe Benefits	\$608,728.29	\$556,205.55	\$7,304,739.30	\$556,205.55	07.6%	\$6,748,533.75
Travel	\$27,491.14	\$5,187.84	\$329,893.73	\$5,187.84	01.6%	\$324,705.89
Consumables	\$27,383.58	\$33,412.92	\$328,602.21	\$33,412.92	10.2%	\$295,189.29
Pharmaceuticals/other	\$27,173.73	\$848.83	\$326,084.83	\$848.83	00.3%	\$325,236.00
Furniture/Equip/Computer>\$5000	\$13,950.32	\$1,800.60	\$167,403.56	\$1,800.60	01.1%	\$165,602.96
Furniture/Equip/Computer<\$5000	\$6,891.07	\$0.00	\$82,692.11	\$0.00	00.0%	\$82,692.11
Facility Costs:	\$45,366.54	\$23,513.08	\$544,396.89	\$23,513.08	04.3%	\$520,883.81
Utilities	\$12,661.20	\$13,807.46	\$151,934.63	\$13,807.46	09.1%	\$138,127.17
Communications:	\$39,939.67	\$37,703.28	\$479,275.81	\$37,703.28	07.9%	\$441,572.53
Insurance	\$45,322.26	\$45,649.15	\$543,865.82	\$45,649.15	08.4%	\$498,216.67
Vehicle Operating	\$15,705.43	\$10,866.59	\$188,463.78	\$10,866.59	05.8%	\$177,597.19
Other Operating	\$30,981.74	\$9,030.16	\$371,781.01	\$9,030.16	02.4%	\$362,750.85
Client Support Cost	\$44,024.75	\$24,495.71	\$528,296.83	\$24,495.71	04.6%	\$503,801.12
Unallowable Costs	\$5,620.44	\$1,162.81	\$67,445.11	\$1,162.81	01.7%	\$66,282.30
Consultant/Professional - External	\$23,274.82	\$2,465.00	\$279,297.78	\$2,465.00	00.9%	\$276,832.78
Other Organizations - Internal	\$500.00	\$0.00	\$6,000.00	\$0.00	00.0%	\$6,000.00
Other Organizations - External	\$1,029,844.10	\$933,154.70	\$12,358,129.04	\$933,154.70	07.6%	\$11,424,974.34
Other Organizations - Non-Clinical	\$519,177.26	\$267,168.59	\$6,230,127.27	\$267,168.59	04.3%	\$5,962,958.68
TOTAL EXPENSES:	\$4,433,233.79	\$3,536,305.84	\$53,198,798.81	\$3,536,305.84	06.7%	\$49,662,492.97

MONTHLY BOARD FINANCE REPORT-SEPT 2025

	<u>MONTHLY</u> <u>FY2026</u> <u>BUDGET</u>	<u>MONTHLY</u> <u>FY 2026</u> <u>September</u>	<u>ANNUAL</u> <u>FY 2026</u> <u>BUDGET</u>	<u>YEAR TO DATE</u> <u>FY 2026</u> <u>September</u>	<u>YTD</u> <u>Percent</u> <u>Variance</u>	<u>YTD</u> <u>Dollar</u> <u>Variance</u>
REVENUES						
Brazoria County:	\$22,543.33	\$20,916.66	\$270,520.00	\$20,916.66	07.7%	\$249,603.34
Galveston County:	\$71,157.27	\$58,564.48	\$853,887.00	\$58,564.48	06.9%	\$795,322.52
Local Funds:	\$180,603.24	\$54,195.61	\$2,167,238.85	\$54,195.61	02.5%	\$2,113,043.24
Earned Income:	\$496,652.25	\$515,023.66	\$5,959,827.19	\$515,023.66	08.6%	\$5,444,803.53
State Funds Allocated:	\$1,756,841.01	\$1,647,697.93	\$21,082,092.39	\$1,647,697.93	07.8%	\$19,434,394.46
State Funds Grants-Cost Reimb:	\$1,077,927.20	\$534,719.71	\$12,935,126.06	\$534,719.71	04.1%	\$12,400,406.35
Federal Funds - Allocated	\$80,716.07	\$80,716.07	\$968,592.84	\$80,716.07	08.3%	\$887,876.77
Federal Funds -Grants Cost Reimb:	\$225,673.36	\$151,416.67	\$2,708,080.29	\$151,416.67	05.6%	\$2,556,663.62
Federal Funds - Misc.:	\$96,960.78	\$62,833.33	\$1,163,529.35	\$62,833.33	05.4%	\$1,100,696.02
Federal Funds -DPP:	\$118,852.46	\$83,333.32	\$1,426,229.39	\$83,333.32	05.8%	\$1,342,896.07
Federal Funds - CCP	\$305,306.27	\$305,306.27	\$3,663,675.19	\$305,306.27	08.3%	\$3,358,368.92
Total Revenue	\$4,433,233.24	\$3,514,723.71	\$53,198,798.55	\$3,514,723.71	06.6%	\$49,684,074.84
EXCESS OF REVENUE OVER EXPENSES	(\$0.55)	(\$21,582.13)	(\$0.26)	(\$21,582.13)	8300819.2%	\$21,581.87
NET OPERATING SURPLUS/DEFICIT:	(\$0.55)	(\$21,582.13)	(\$0.26)	(\$21,582.13)	8300819.2%	\$21,581.87

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.

Policy Reference: 14.1 Deposits and Investments
Origin: Administration
Oversight: Chief Financial Officer
Original effective date: 06/01/1999
Revision Date: 7/1/2011, 9/1/22, 10/22/25
Reviewed by: Rick Elizondo

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14.1.11 Attachments

14.1.1 Purpose

The Center's investment/cash management procedures are guided by the Public Funds Investment Act, a Texas state law which governs the investment of public funds. The investment/cash management procedures will outline and establish the types of investments authorized and the principles and criteria by which the funds of the Center are to be invested and secured to, in order of priority:

- Preservation and safety of the principal
- Provide liquidity to facilitate the prompt payment of expenses of the Center and its operations
- Provide yield

Additionally, the procedures will address:

- Internal Controls
- Investment Strategies
- Monitoring
- Designation of Authority
- Investment Activities
- Investment Allocation
- Safekeeping and Custody
- Standard of Care
- Annual Review

14.1.2 Definitions

Public Funds Investment Act - First adopted in 1987 and then amended by the 1995 Legislature, the Public Funds Investment Act (Chapter 2256 of the Texas Government Code) is a Texas state law which governs the investment of public funds. Referred to as the "Act".

Funds - Refers to the monies received by the Center (local, earned, grant, and state/federal revenues) in support of its operations. Unless specifically restricted or prohibited, all funds are considered available for investment.

Depository Account - Refers to the Center's primary bank account where receipts and cash are deposited. Only transfers to Center operating accounts and disbursements to approved investment options are made from this account.

Operating Account - Refers to the Center's primary bank account from which approved Center expenditures and payables are disbursed.

Primary Bank Accounts - Refers to the Center's depository, operating, and payroll accounts. These accounts are the primary bank accounts of the Center at a Board approved banking establishment. Other bank accounts at program level – Expense Bank Accounts or Program Deposit Accounts – may be authorized to facilitate program operations at the community level. The same standards and procedures as the primary bank accounts govern these accounts.

Cash - Refers to cash, coins, checks, direct deposits, or other forms of Center fund transfers.

14.1.3 Responsibility

It is the responsibility of the Center's Board of Trustees to annually review its investment procedures. The annual review will be clearly documented in the Board minutes.

It is the responsibility of the Center's Board of Trustees to annually designate individual(s) having authority to make investment decisions. At a minimum, the Board will designate two individuals, with one to act as the primary responsible person and the second to act as an alternate. Designations will be clearly documented in the Board minutes. Only those authorized by the Board may withdraw, invest, transfer, or manage the funds of the Center.

Authority granted under this section is effective until rescinded by the Board or until termination of the individual(s) employment or association with the Center.

Designated individual(s), identified as Investment Officer(s), will sign an assignment responsibility statement identifying primary responsibilities and authority. The primary Investment Officer may delegate responsibilities of executing electronic transfers for payments or transfers to Center accounts. This designation must be in writing and the Board of Trustees notified.

The primary responsibilities of the Investment Officer(s) are:

- Obtain and review competitive rates
- Make or authorize the making of investments on behalf on the Center
- Authorize or confirm wire transfers of money
- Maintain custody of all records and supporting documentation relating to investments and the management of the Center's funds
- Provide quarterly reports to the Center's Executive Staff on investments and the management of the Center's funds
- Provide quarterly reports to the Center's Board of Trustees on investments and the management of the Center's funds
- Assure, as outlined in these procedures, that adequate securities are maintained
- Assures that the duties and requirements outlined in these procedures are implemented as instructed
- Perform other duties as appropriate to implement these procedures
- Annually, assist the Center's selected auditors in preparing their annual review and evaluation

Each individual designated by the Center's Board of Trustees as an Investment Officer must disclose in writing any and all conflicts of interest.

To assure a continuing understand and knowledge of the laws, options, and risk of investments, investment officer(s) shall attend at least one (1) training session relating to the investment officer(s) responsibilities

within twelve (12) months after designation by the Board of Trustees. Training should include education in investment controls, compliance with the Act, and/or risks.

14.1.4 Internal Controls

In order to facilitate appropriate internal controls around investments and cash management, the following shall be maintained:

Cash Receipts:

- The Center shall be the primary party receiving cash, depositing cash, and making disbursements on behalf of the Center.
- All cash received by the Center shall be receipted in a pre-numbered receipt book. The receipt number will be placed at the top right corner of the cash document.
- Deposits will be made daily.
- Deposits will be made as collected or received.
- Copies of all items making up a deposit will be made and the deposit receipt attached. This deposit will be reconciled daily to the receipt book to assure that all funds receipted are deposited and accounted for. The individual preparing and making the deposit will not be the same individual receipting the cash or reconciling to the receipt book.
- The Chief Financial Officer will assure that the deposits have been made correctly and posted to the Center's general ledger accordingly.
- The Chief Financial Officer will be responsible for monitoring and reconciling account receivables and cash on a monthly basis.

Bank Reconciliation:

- All bank accounts will be reconciled monthly to the bank statement and the Center's general ledger. All supporting documentation will be maintained accordingly.
- All bank reconciliation will be performed at the Center's central office.
- Any individual having signatory authority on the account or a conflict of interest will not perform bank reconciliation.
- The Chief Financial Officer will monitor and review all of the reconciliation.
- All outstanding items will be reconciled within ninety (90) days following disbursement.

Signature Requirements:

- At the beginning of each fiscal year, the Board will designate and approve authorized signatures for the Center's primary bank accounts.
- The Board will authorize a maximum of four (4) Board members and Five (5) Center staff.
- Original signatures are required, with the exception of the payroll checks, where a computer-generated facsimile is accepted.
- Single Board approved authorized Employee signature for checks \$15,000 (fifteen thousand dollars) or less.
- Two (2) Board approved authorized Employee signatures for checks greater than \$15,001 (fifteen thousand and one dollars).
- Single signature for Center payroll checks.
- Single signature for the transfer of funds from the Center's Depository Account to the Center's Operating Account or Payroll Account.
- Single signature for transfer of funds from the Program Depository Accounts to the Center's Depository Account.
- Single signature for wire/electronic transfer of funds related to approved vendor payables; including payroll taxes, bond fund, insurance, gasoline, contract payments and general operating expenses.
- Checks presented to Board members for signature must have attached all approved payment requisitions and attachments for their review when signing.
- A copy of the authorized signatures and signature guidelines will be forwarded to the Center's primary banking establishment for their files annually at the beginning of each fiscal year.

- At each monthly Board meeting, a complete copy of the previous month's operating and depository check register will be routed to attending Board members for their review and signature.
- Neither Board members nor Center staff shall sign on any disbursement payable to themselves or in which they may have or appear to have an interest in or party to.

14.1.5 Investment Strategies

The primary objective of the Center's investment decisions is safety of principal and liquidity. Except as prohibited by policy, law, or otherwise, the following are authorized investments:

Preferred Investment Option

Certificates of deposit if issued by a state, bank, national bank, or savings and loan association domiciled in Texas and is:

- guaranteed or insured by the Federal Deposit Insurance Corporation or its successor
- secured by obligations which are otherwise authorized with a market value of not less than the principal amount of the certificates
- secured in any other manner and amount provided by law for deposits of the Center

Other Investment Options

- Obligations of the United States or its agencies and instrumentalities.
- Direct obligations of the State of Texas or its agencies and instrumentalities.
- Other obligations, the principal and interest which are unconditionally guaranteed or insured by, or backed by the full faith and credit of, the State of Texas or United States or respective agencies and instrumentalities.
- Obligations of states, agencies, counties, cities, and other political subdivision of any state rated as to investment quality by a nationally recognized investment firm not less than A or its equivalent.
- Repurchase agreements as defined in Section 2256.011 of the Public Funds Investment Act.
- Mutual Funds as defined in Section 2256.014 of the Public Funds Investment Act.
- Investment Pools as defined in Section 2256.016 of the Public Funds Investment Act.

Unallowable Investments

No investments may be made in:

- Obligations whose payment represents the coupon payments on the outstanding principal balance of the underlying mortgage-backed security collateral and pays no principal
- Obligations whose payment represents the principal stream of cash flow from the underlying mortgage-backed security collateral and bears no interest

An investment that requires a minimum rating does not qualify as an authorized investment during the period the investment does not have the minimum rating. The Center shall take all prudent measures that are consistent with its investment procedures to liquidate an investment that does not have the minimum rating.

14.1.6 Investment Objectives

The investment objectives of the Center are:

- Preserve and maintain the safety of the investment principal
- Maintain adequate liquidity to assure the Center's ability to meet its obligations
- Enhance yield
- Retain marketability for each investment, should the need arise to liquidate if prior to maturity

14.1.7 Investment Management Philosophy

The Center's investment management philosophy will be managed as a "buy and hold" approach. That is, investments will be purchased with the intent to hold them until their maturity. The Center will not be an active trader of investments; it is not intended that the Center attempt to enhance investment income with realized market value gains.

14.1.8 Monitoring

Quarterly the primary Investment Officer will be responsible for the preparation and presentation to the Center's Executive Staff and Board of Trustees of a written review of the Center's year to date investment activities. All designated investment officers must sign the report. The report will include all pertinent information detailing investment activities, security collaterals, and ending period status. During the regular annual financial audit, the auditors will provide an additional review and comment accordingly.

14.1.9 Investment Allocations

The allocation of the Center's cash and investments shall be made considering maturity duration and cash flow timings. The available cash shall be placed in a manner sufficient to meet the anticipated cash flow needs of the Center and its operations. The maximum final stated maturity date for any single investment should not exceed one (1) year.

At all times, the Center's cash and investments shall be secured by FDIC insurance or by collateral pledged to the extent of the fair market value of the amount not so insured. Acceptable collateral shall include all securities in the Public Funds Collateral Act (Art. 2529d. V.T.C.S.).

14.1.10 Standard of Care

Investments shall be made with judgement and care, under prevailing circumstances, that a person of prudence, discretion and intelligence would exercise in the management of the person's own affairs, not for speculation, but for investment, considering the probable income to be derived.

In determining whether an investment officer(s) has exercised prudence with respect to an investment decision, the determination shall be made taking into consideration:

- The investment of all cash and cash under the Center's control, over which the investment officer(s) had responsibility rather than a consideration as to the prudence of a single investment; and
- Whether the investment decision was consistent with the written investment procedure of the Center.

14.1.11 Attachments

1. Assignment Responsibility – Investment Officer

The Gulf Coast Center Investment Officer Assignment Responsibility

Designation: Primary X Secondary

_____ Designated Investment Officer	_____ Date
--	---------------

_____ Executive Director	_____ Date
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_____ Board of Trustees, Chairperson	_____ Date
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ATTACHMENT #1 (14.1)

**The Gulf Coast Center
Investment Officer
Assignment Responsibility**

Name: Weidong Lin

Center Relationship:

 Member - Board of Trustees
 X Center Employee
 Other: _____

Date of Board of Trustee's Approval: _____

Begin Date of Designation: 10/22/2025

Designation: Primary Secondary X

The primary responsibilities as an Investment Officer are:

1. Obtain and review competitive rates
2. Make or authorize the making of investments on behalf on the Center
3. Authorize or confirm wire transfers of money
4. Maintain custody of all records and supporting documentation relating to investments and the management of the Center's funds
5. Provide quarterly reports to the Center's Executive Staff on investments and the management of the Center's funds
6. Provide quarterly reports to the Center's Board of Trustees on investments and the management of the Center's funds
7. Assure, as outlined in these procedures, that adequate securities are maintained
8. Assures that the duties and requirements outlined in these procedures are implemented as instructed.
9. Perform other duties as appropriate to implement these procedures

Authority granted is effective until rescinded by the Board or until termination of my relationship with the Center.

I have disclosed in a separate writing, any and all conflicts of interest that may exist.

To assure a continuing understand and knowledge of the laws, options, and risk of investments, I agree to attend at least one (1) training session relating to the investment officer(s) responsibilities within twelve (12) months of the above noted appointment date by the Board. Training will include education in investment controls, compliance with the Act, and/or risks.

As an investment officer I agree to exercise prudence with respect to all investment decisions. Investments shall be made with judgement and care, under prevailing circumstances, that a person of prudence, discretion and intelligence would exercise in the management of the person's own affairs, not for speculation, but for investment, considering the probable income to be derived.

Signatures:

_____ Designated Investment Officer	_____ Date
--	---------------

_____ Executive Director	_____ Date
-----------------------------	---------------

_____ Board of Trustees, Chairperson	_____ Date
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Mission, Vision and Values

MISSION STATEMENT

The Gulf Coast Center's mission is to provide accessible, efficient and quality services to support the independent and healthy living of those we serve.

VISION

The Gulf Coast Center's vision is to create better community healthcare while promoting healthy living. We are committed to this continuous improvement by staying rooted in our values: *Humanity, Excellence, Accountability, Loyalty, Teamwork, Honor, and You.*

GUIDING VALUES

- Humanity: We value people by serving individuals and families with care and compassion.
- Excellence: We value the pursuit of operational excellence by striving to gain efficiencies, decrease costs, and enhance service delivery through innovation.
- Accountability: We value achievement of an exemplary standard of accountability for our individual and collective performance.
- Loyalty: We value the crucial role which family members and other natural supports play in effective treatment.
- Teamwork: We value collaboration to efficiently maximize resources and improve outcomes of care.
- Honor: We value united and uncompromising resolve as we steadfastly safeguard and evolve our work environment to uphold education, responsible self-direction, and collaborative coaching.
- You: We value commitment to build and strengthen partnerships that benefit the needs and values of our community as a whole.



MEMORANDUM

January 25, 2023

To: Board of Trustees
From: Sam Tingle, Director of Asset Management
Re: GCC vehicle acquisition request

Approval is requested to purchase the following vehicles through TXSmartbuy purchasing co-op.

One 15 passenger Chevrolet van for RU# 5907 (EOU). Not to exceed \$50,000.
One Toyota Camry sedan for RU# 0950. Not to exceed \$35,000.
Ten Toyota Camry sedans for fleet replenishment. Not to exceed \$340,000.

Thank you for your consideration.

|

Sam Tingle
Director, Asset Management
The Gulf Coast Center
4352 E.F. Lowry Expressway
Texas City, Texas 77591
(409) 944-4448
(409) 948-1411 fax
samuelt@gulfcoastcenter.org

4352 EMMETT F. LOWRY EXPRESSWAY, TEXAS CITY, TX 77591
409.763.2373 • 800.643.0967 • Fax 409.948.1411 • gulfcoastcenter.org



LIDDA Local Provider Network Development Plan FY26-27



Developmental Disability Services Overview

History

Prior to the 1960s, state institutions were the only source of support and treatment available to citizens who suffered from serious mental disabilities. In 1963, President John F. Kennedy proposed a broad new program that included community mental health centers and signed the Community Mental Health Center Act into law. In 1965, the Texas Legislature passed the Texas Mental Health and Mental Retardation Act, now known as the Texas Mental Health and Intellectual Disabilities Act. It authorized the creation of community centers to serve local agencies that would work in partnership with the state and federal government to develop community-based services as alternatives to institutional care.

The doors of Gulf Coast Center's first facility opened on December 1, 1969, to provide mental retardation services in La Marque. By October 1971, services had been expanded to include mental health. The Gulf Coast Center has evolved into the suite of integrated, whole-person services we provide today as a Certified Community Behavioral Health Clinic (CCBHC). To achieve CCBHC status, Gulf Coast Center has distinguished itself as efficiently reducing healthcare disparities for our community. This design demonstrates a commitment to an accountable, culturally competent framework that broadens access to care services for anyone seeking Mental Health, Intellectual and Developmental Disabilities (IDD), and Substance Use Disorder (SUD) services, regardless of their ability to pay. Integrated transitions between service agencies, especially for co-occurring and complex diagnoses, are bridges that must be crossed to ensure safe and equitable care. Gulf Coast Center coordinates that care and provide the wrap-around services needed to keep the community in services and services in the community.

That community and cooperative approach has driven the Texas "community center" system of care for over 55 years.

Mission and Vision

Gulf Coast Center's mission is to provide accessible, efficient and quality services to support the independent and healthy living of those we serve. Our core values guide not just how we work with our clients, but also how we work with each other and the community. The vision includes empowering individuals to live meaningful, integrated lives, supporting families, and collaborating with community resources to fill gaps.

Values

Humanity - We value people by serving individuals and families with care and compassion.

Excellence - We value the pursuit of operational excellence by striving to gain efficiencies, decrease costs, and enhance service delivery through innovation.

Accountability - We value achievement of an exemplary standard of accountability for our individual and collective performance.

Loyalty - We value the crucial role which family members and other natural supports play in effective treatment.

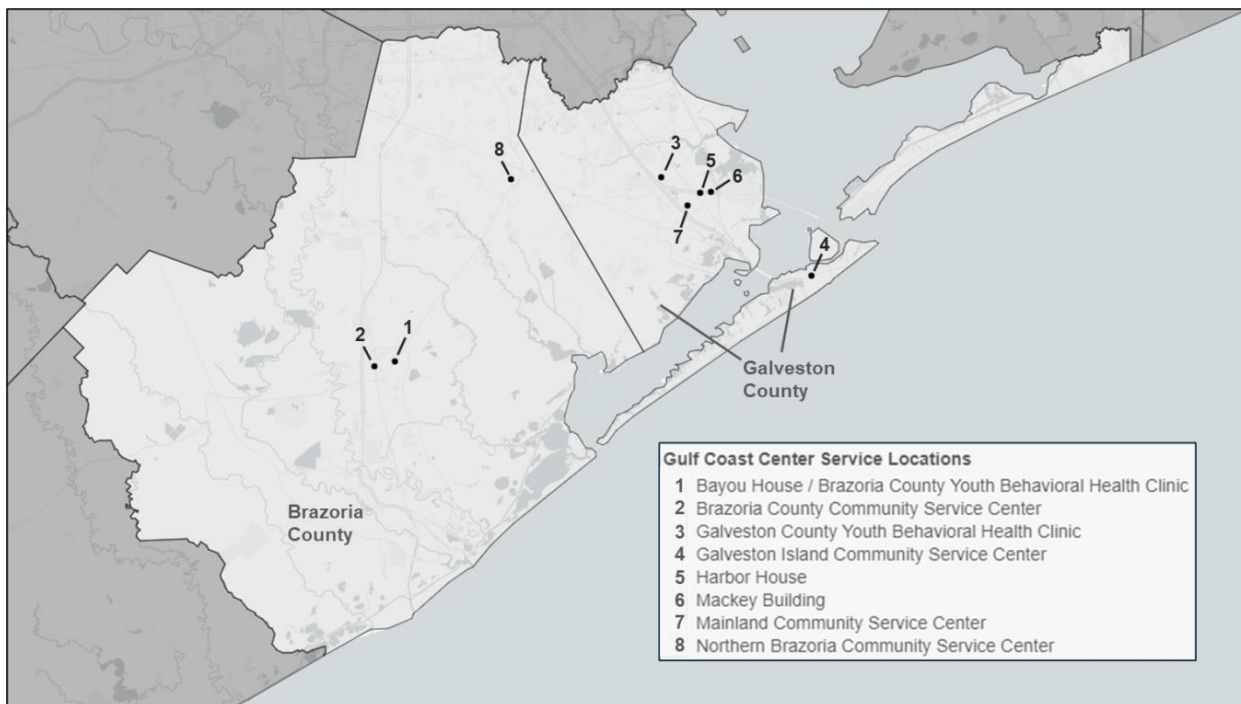
Teamwork - We value collaboration to efficiently maximize resources and improve outcomes of care.

Honor - We value united and uncompromising resolve as we steadfastly safeguard and evolve our work environment to uphold education, responsible self-direction, and collaborative coaching.

You - We value commitment to build and strengthen partnerships that benefit the needs and values of our community as a whole.

Local Service Area

The Counties of Galveston and Brazoria jointly agreed in 1973 to the establishment of the Gulf Coast Center (originally known as Gulf Coast Regional Mental Health Mental Retardation Center). Gulf Coast Center's Board of Trustees and leadership oversee LIDDA functions in the region. The Center is governed by a nine-member volunteer Board of Trustees appointed by the County Commissioner's Courts of Galveston (5 members) and Brazoria (4 members) Counties, Texas. Gulf Coast Center employs over 300 with 51 employees working in IDD Services. Gulf Coast Center serves over 10,000 individuals and their families. Our service area covers 1,736 miles over the counties and is comprised of 1 rural county (Brazoria) and 1 urban county (Galveston).



Planning and Stakeholder and Advisory Involvement

GCC employs stakeholder input and community needs through individuals receiving community-based intellectual disability services and family members of those individuals, residents of the State Supported Living Center (SSLC), family members of those residents, and members of SSLC volunteer services councils, if the SSLC is located in the local service area of the LIDDA, other interested persons, advisory committees, public comment, observation of community needs, provider forums, and through its provider network development planning. The draft plan is posted for public comment, and changes made in response to stakeholder feedback. A regional Planning Network and Advisory Committee (RPNAC) in collaboration with ETBHN (10 other LIDDAs) or similar advisory body will be involved in reviewing, recommending, and advising on the local plan. GCC will provide draft copies of the Local Plan to stakeholders, solicit comments (e.g. via website, public meetings), and document responses or rationale for any changes. The plan will adhere to HHSC and TAC rules governing how LIDDAs must operate (e.g. confidentiality, appeals, service settings). GCC commits to transparency and reporting of network operations, provider performance, and service gaps.

Gulf Coast Center serves as one of 39 community centers in Texas contracted by Health and Human Services and designated to act as the single point of entry for publicly funded intellectual and developmental disability (IDD) programs in Galveston and Brazoria County. As the LIDDA or Local Intellectual and Developmental Disability Authority, Gulf Coast Center is responsible for determining eligibility for IDD services, enrolling individuals in programs, and coordinating ongoing services. Utilizing a person-centered planning approach, Gulf Coast Center provides accessible, efficient and quality services to support the independence and healthy living of those we serve focusing on support to achieve their greatest potential while living within their communities.

We provide a range of services and support for people in Galveston and Brazoria counties with intellectual and developmental disability (IDD) needs including individuals experiencing co-occurring disorder services such as mental health and substance use. Gulf Coast Center IDD Services are divided into two departments, the IDD Authority which coordinates and monitors community services and the IDD Provider, which provides training, support and specialized services. Most of the services provided by the IDD Service Department are Service Coordination, Crisis Intervention and Intake/Enrollment. Gulf Coast Center IDD Provider Services Department contracts for all provider direct care services except PASRR Specialized Services. We also provide additional community services such as collaboration with school services, transitioning from nursing facilities, state facilities, community education and disaster recovery support. Integrated care coordination between Gulf Coast Center and community agencies is an important component to ensure the individual lives a meaningful and healthy life in the community.

LIDDA Priority Population and Eligibility

All individuals referred to Gulf Coast Center enter through the GATES – Get Access To Evaluations and Services department for the initial contact. An individual, family member or the individual’s natural support can inquire about services and assist individuals with requesting to be added to the state Interest Lists.

Community Needs assessment completed in January 2025 by the Meadows Policy Institute	Gulf Coast Center	County	
		Galveston	Brazoria
Adult Population	560,000	270,000	290,000
Intellectual and Developmental Disabilities	2,700	1,300	1,400
Youth Population	130,000	60,000	70,000
Intellectual and Developmental Disabilities	1,400	650	750

Waitlist / Interest List Management

The Gulf Coast Center (GCC) is responsible for maintaining accurate Interest Lists for individuals waiting for all applicable services. GCC will ensure that all individuals on these lists are contacted on a biennial basis to verify continued interest and update demographic and clinical information. GCC will manage and prioritize the interest lists in accordance with HHSC rules and guidance, ensuring equitable access and compliance with state requirements. Reports regarding the status, movement, and management of the lists will be submitted to HHSC as required by contract.

In accordance with the definition of "LIDDA priority population" found in 26 Tex. Admin. Code, Chapter 304, Subchapter A, §304.102 (Diagnostic Assessment), LIDDA priority population is a group comprised of individuals who meet one or more of the following descriptions:

- A person with an intellectual disability (ID), as defined by Texas Health and Safety Code (THSC) Section 591.003;
- An individual with autism spectrum disorder, as defined in the most current edition of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders;
- An individual with a related condition (also called a developmental disability on the current HHSC-approved list of related conditions who is eligible for and enrolling in services in the ICF/IID Program, HCS Program, TxHmL Program, or Community First Choice (CFC);
- A nursing facility (NF) resident who is eligible for specialized services for an intellectual disability or related condition pursuant to Section 1919(e)(7) of the Social Security Act;
- A child who is eligible for early childhood intervention (ECI) services through HHSC; or
- An individual diagnosed by an authorized provider as having a pervasive developmental disorder or Asperger disorder through a diagnostic assessment completed before November 15, 2015.

The determination of eligibility for the priority population must be made using assessments and evaluations performed by qualified professionals. Individuals who are members of the priority population are eligible to receive IDD services identified in the Description of IDD Services and the Service Definition Manual, as appropriate for the individual's level of need, eligibility for a particular service, and the availability of that service. Since resources may be insufficient to meet the service needs of every individual in the priority population, GR Services should be provided to meet the most intense needs first. Intense needs are determined as follows:

- an individual is in danger or at risk of losing his or her support system, especially the living arrangement or support needed to maintain self;
- an individual is at risk of abuse or neglect;
- an individual's basic health and safety needs not being met through current supports;
- an individual is at risk for functional loss without intervention or preventive or maintenance services;
- or
- an individual demonstrates repeated criminal behavior.

The LIDDA may serve individuals who have resided in a SSLC on a regular admission status, but who may not be in the priority population.

GCC follows the statutory definitions for intellectual disability, developmental disability, and related conditions. GCC places applicants on relevant interest or wait lists (e.g. HCS/ TxHmL) and manages the statewide interest list via its intake system. Because resources are limited, prioritization is given to individuals with the most intense needs (e.g. risk of loss of supports, health & safety risk, behavioral challenges). The contract (amendment) requires that the LIDDA maintain and provide the interest list (for General Revenue-funded services) in a format approved by HHSC. All services will be founded on a person-centered process, and the LIDDA supports the individual's right to prefer living environments. All services will be offered, planned and delivered in the least restrictive environments.

IDD Service Array

Screening – Gathering information to determine a need for services. This may be in-person or by phone. For people not eligible or who decline services, GCC will provide referral to alternate resources or supports.

Eligibility Determination - an interview and assessments or an endorsement of a previous eligibility determination conducted in accordance with THSC Section 593.005, and 26 TAC Chapter 304, Diagnostic Assessment. The diagnostic assessment is commonly referred to as a Determination of Intellectual Disability (DID). An assessment (or endorsement) typically includes an interview with the person, the person's legally authorized representative (LAR), or, if the person doesn't have an LAR, others who are actively involved with the person. This service also may be requested as part of a formal petition for guardianship.

Service Coordination - Assistance in accessing medical, social, educational, and other appropriate services and support that will help a person achieve a quality of life and community participation acceptable to the person as described in the plan of services and supports. The plan of services and supports is based on a person-centered process that is consistent with the Person-Centered Planning Guidelines and describes the person's desired outcomes and the services & supports, including service coordination, to be provided to the person, with specifics concerning frequency and duration. This service is provided to individuals receiving Medicaid Waiver services, such as Home and Community Based Services, Texas Home Living, General Revenue and Community First Choice Medicaid Services

Service coordination performed in accordance with 26 TAC Chapter 331

- **Assessment** - to identify an individual's needs and the services and supports that address those needs as they relate to the nature of the individual's presenting problem and disability.
- **Service planning and coordination** - activities to identify, arrange, advocate, collaborate with other agencies, and link for the delivery of outcome-focused services and supports that address the individual's needs and desires.
- **Monitoring**- activities to ensure that the individual receives needed services, evaluates the effectiveness and adequacy of services, and determines if identified outcomes are meeting the person's needs and desires; and

- Crisis prevention and management- activities that link and assist the individual to secure services and supports that will prevent or manage a crisis

*The plan of services and support is based on a person-directed discovery process that is consistent with HHSC's Person and Family Directed Services Planning Guidelines and describes the individual's:

- Desired outcomes
- Services and supports including service coordination services to be provided to the individual to meet the desired outcomes.
- Potential health and safety risks

Community First Choice (CFC) - LIDDA responsibilities primarily involve assessment, eligibility determination and enrollment activities, Service Coordination, resources, managed care organization (MCO) communication, reassessments and information and assistance with applying for individuals who meet the criteria CFC. This service may be included in the waiver services but can be the only service connected to LIDDA services. Gulf Coast Center is committed to working collaboratively with the MCO.

Continuity of Services - Assistance in accessing medical, social, educational, and other appropriate services and supports that will help a person achieve a quality of life and community participation acceptable to the person as described in the plan of services and supports. This service category includes the following:

- transition planning for a person residing in an SSLC whose movement to the community is being planned or for a person who formerly resided in a state facility and is on community-placement status. Refers to responsibilities listed in 26 TAC Chapter 904, Continuity of Services-State Facilities; or
- providing assistance to a person who is interested in admission to the ICF/IID Program including assistance with eligibility determination, enrollment activities, and other activities that may assist in maintaining person's placement or assist in locating another placement for the person. Refers to responsibilities listed in 26 TAC Section 331.7, 26 TAC Section 261.244, and THSC Section 533.0355;
- discharge planning for a person receiving services in a state hospital who is anticipating discharge to the community in order to identify and secure services necessary to prepare for successful transition to the community with needed services and supports. Refers to responsibilities listed in 26 TAC Sections 306.163 and 306.201; or
- providing assessment of needs for services and supports for a person with IDD who has been identified by the Texas Law Enforcement Telecommunications System (TLETS) as being incarcerated. Refers to responsibilities listed in the LIDDA Performance Contract, Article 2, Authority Function 2.3.7 and in the LIDDA Handbook, Section 19000. Continuity of services for a person identified by the TLETS system who is incarcerated

Permanency Planning – conducts and documents that permanency planning for persons under the age of 22 years who are enrolling in or currently residing in an ICF/IDD or HCS residential setting and is completed in accordance with HHSC rule 40 TAC, Chapter 9, Subchapter D (HCS) and 40 TAC, Chapter 9, Subchapter E – ICF/IDD

Habilitation Coordination - Assistance for a person residing in a nursing facility to access appropriate specialized services necessary to achieve a quality of life and level of community participation acceptable to the person and their LAR on the person's behalf. Habilitation Coordination is required in Title 26. HHS, Part 1. HHSC, Chapter 303. This service includes regular in-person contacts, coordinating specialized services, planning for transition out, supporting community integration

PASRR Evaluations – This requirement is to identify those individuals with IDD in Nursing Facilities that need additional advocacy and support to assure they receive the services they need and to transition from the nursing facility to a community setting by Title 26. HHS, Part 1. HHSC, Chapter 303, the PASRR IDD Handbook and the FY2023- 2024 HHSC Performance Contract to complete Level 2 PASRR Evaluations for individuals residing in Nursing Facilities who are identified as possibly eligible for IDD Specialized Services.

PASRR LIDDA Specialized Services – Independent Living Services for individuals living in nursing facilities -- individualized activities for individuals residing in a nursing facility that are consistent with the habilitation service plan and provided in an individual's residence and at community locations (e.g., libraries and stores).

Enhanced Community Coordination (ECC) (Money Follows the Person Funding) Service Coordination -- For an individual diverting or transitioning from an NF to the HCS Program or another community Medicaid program or from an SSLC to the HCS Program or a setting other than HCS

Crisis Intervention Services - Crisis intervention specialist – The lead crisis intervention specialist (CIS) is a full-time employee or contract employee who oversees all activities required by the LIDDA Handbook. The LIDDA must ensure that the lead CIS is not assigned responsibilities, duties, or tasks other than those described in the LIDDA Handbook. Additional staff may be assigned to support the lead CIS.

Crisis Respite Services - Crisis respite out-of-home - therapeutic support provided in a safe environment with staff on-site providing 24-hour supervision for up to 14 calendar days to assist a person who is demonstrating a crisis that cannot be stabilized in a less intensive setting. Out-of-home crisis respite is provided in the following settings: an ICF/IID, an HCS group home, an HHSC-authorized crisis respite facility, crisis residential facility or a LIDDA-operated facility.

Respite – Respite is either planned or emergency short-term relief provided by trained staff to the person's unpaid caregiver when the caregiver is temporarily unavailable. If enrolled in other services, the person continues to receive those services as needed during the respite period. Respite is typically defined by the family and provided by a trusted person or entity in the community. Community inclusion is a priority for Gulf Coast Center.

Community Support -- Community supports are individualized activities that are provided in the person's home and at community locations, such as libraries and stores. This service is available to individuals who live on their own in the community with minimal support and do not qualify for Medicaid.

Optional Supports for Community Integration

GCC may provide or contract for the following (depending on resources and local capacity):

- Supported Employment / Employment Assistance
- Behavioral Supports / Behavior Consultation
- Day Habilitation (for individuals residing in nursing facilities or needing structured day activities)
- Nursing / Health Support Services (if tied to IDD services and medical needs)
- Other services or supports as defined in individual PDPs

The choice, frequency, and duration of services are defined within the PDP and implementation plans.

Benefits Eligibility – Provides assistance with completing applications, approval and appeal as needed to acquire and/or maintain Medicaid if eligible. Service Coordinators and Benefit Advisors will work to assist individuals from application through the appeals process. GCC does not refuse services solely based on inability to pay; for non-Medicaid services, GCC may use a sliding scale for fees.

Quality Assurance, Monitoring and Performance Outcomes

- GCC will maintain a Quality Management Plan to monitor provider performance, compliance, outcomes, and implement continuous quality improvement.
- GCC sets performance metrics aligned with HHSC's contractual targets (e.g. utilization rates, crisis diversion, timeliness, transitions) and monitors them internally.
- GCC will conduct audits, provider reviews, corrective action plans, and ensure data validity.
- GCC will report required data and metrics to HHSC per contract requirements (interest lists, service utilization, outcome metrics).

GCC will adhere to new safety requirements in the FY 26 contract, such as responding to **Potential Threats to Health or Safety** that require in-person assessment within 48 hours of notice.

Provider Network and Workforce Development

- GCC will assemble and manage a provider network that offers individual choice to the extent possible, in compliance with the HHSC amendment.
- GCC will post provider interest notices, maintain provider inquiry forms, and follow procurement / credentialing processes.
- Where external provider capacity is limited, GCC may provide services internally or temporarily until external capacity builds.
- GCC commits to provider training, oversight, credentialing, contract monitoring, and capacity building.
- GCC will monitor gaps (e.g. in rural/underserved areas) and target recruitment efforts accordingly.
- GCC will utilize partnerships with local agencies, community organizations, colleges, or workforce development entities to expand provider capacity.

IDD Community Outreach

- GCC will inform the public, potential clients, families, providers, and stakeholders about IDD services via its website, printed materials, brochures, social media, community events, and provider outreach. (GCC posts its Local Plans and network development plans publicly)
- GCC will distribute explanation of services / supports documents, intake information, and processes to individuals, families, and prospective clients.
- GCC will conduct outreach to school districts, hospitals, nursing homes, advocacy groups, and providers to improve awareness of eligibility and supports.
- GCC will provide training and informational materials to families, first responders, community agencies, and providers about interacting with individuals with IDD, crisis de-escalation, etc.
- GCC will participate in local Community Resource Coordination Groups (CRCG)

Gulf Coast Center Goals, Key Initiatives and Strategies

Achieving operational excellence, through efficient and effective operations, results in consistent superior performance. This effort requires a well-trained workforce, relentless focus on customer service, state-of-the-art financial and technology systems, quality infrastructure and performance measurement. These systems enable success in current and future business initiatives. Achieving our mission requires an engaged community. Gulf Coast will be a leader in the community on education of the needs of individuals living with mental illness, substance use disorders, intellectual disabilities, and developmental disabilities. We will collaborate with community partners and our elected representatives to achieve the vision of better community healthcare promoting healthy living.

Key Initiatives & Business strategies

IDD –

- Gulf Coast Center will continue partnerships and ongoing education with the justice system and law enforcement through the IDD Intake (GATES), Continuity of Services and Crisis Intervention Specialist to educate on diverting to community services for success on community living. Additional education will be consistently communicated to utilize least restrictive environments first to divert individuals from the criminal justice system. IDD Crisis Respite will be utilized if needed to ensure health and safety while in transition to community living.
- Surveys, meetings and open dialogue with individuals, families and community partners to rank community needs and satisfaction of services.
- NCQA Accreditation: Increased structured services, data-driven and person-centered accountability including quarterly performance audits in compliance with HHSC contract standards.
- Community Engagement: IDD Awareness Day, family/partner meetings, celebration events and collaboration with community partners such as UTMB Capstone partnerships, IDD Hackathon, student worker collaboration with College of the Mainland, Student Accessibility Services
- Increased Quality Management: Improve IDD SmartCare Electronic Health Record forms project and reduce administrative overhead costs by streamlining documentation and using collaborative documentation.
- Internal Collaboration: Same Day/Next Days standards in IDD Services for referrals from internal program partners to continue to decrease intake waiting times.

- Workforce Development: Enhanced onboarding, refresher training, staff growth and empowerment.

CCBHC - Certified Community Behavioral Health Center

- Implement Ambulatory Detox, Level One Program Design.
- Update Needs Assessment for recertification of CCBHC in 3 years.
- Start cosmetic and capital improvements of facilities.
- Advance Revenue Cycle Management Operations and Training.
- Complete Disaster Response Operational Procedure Manual.
- Add revised policies and procedures and contracts to SharePoint.
- Update content for patient education provided via lobby monitors and social media.
- Develop and implement expanded customer satisfaction survey.
- Improve Open Access and Revenue Cycle Management Processes.
- Organize peer services collaboration through established Peer Summit.
- Renew Care Coordination Memorandum of Agreements with community partners.
- Incorporate CQI written plans to address incidences of suicide attempts, death by suicide, 30-day hospital re-admission, and operational changes.
- Develop parameters necessary to create reports to drive clinical practices.
- Evaluate productivity measure practice; consider change from quantity approach to outcome measures.
- Implement a shuttle route between Alvin & Angleton for patient care.
- Implement Kempner/Moody Transportation Grant.
- Further develop an experiential crisis training for staff to develop a mature crisis response system in partnership with key roles within our local communities

Staff Recruitment & Retention

- Improve internal customer service training for new staff and provide a version of the training to existing staff; training to include a diversity and inclusion focus.
- Develop leadership trainings specifically crafted for frontline managers.
- Establish connections with local colleges and universities for recruitment purposes.
- Redesign Exit Questionnaire into a digital format that will provide analytics.
- Conduct quality assurance activities to ensure compliance with CCBHC training requirements; support on-going growth of organization as a CCBHC.
- Develop electronic feedback survey regarding on-boarding and new employee orientation.
- Increase awareness and accessibility of employee Life Assistance Program for staff.
- Promote benefits of retirement plan and opportunity for education on retirement planning.
- Implement a collaboration between senior leadership and Human Resource Services to develop strategies that will foster leadership growth and development of frontline staff.

Community Outreach

- Standardize brochures to mirror website; available in English and Spanish; available electronically on website and hard copies in a folder.
- Expand and improve community presentations. Incorporate tabletop exercises and story-telling through lived experience.
- Fully implement Zero Suicide initiatives.

- Support local county efforts to establish jail-based competency restoration.
- Expand discussions with community partners and county officials on Multi-Disciplinary Response Teams (MDRT) and Extended Observation Unit (EOU).
- Complete State Hospital Learning Collaborative.
- Explore Jail Based Competency Restoration Services in collaboration with Galveston County.

Disaster Services

- Complete Disaster Response Manual.

Information Technology

- Develop meaningful dashboards necessary to achieve operational excellence.
- Expand SmartCare to include widgets, customized service notes, and consents.
- Add recently completed SmartCare Upgrade to version 314; future initiatives are to add Patient Portal, E&M Progress Note, and Medication Consent.
- Work with an Electronic Health Record vendor to develop a plan to implement a patient portal.
- Engage access as a member of Greater Houston Health Information Exchange.
- Finance
- Improve Revenue Cycle Management processes through evaluation, training, and implementation of efficacy and efficiency plans.
- Fully implement budget software to improve Financial Data Management.
- Conduct new software and budget training for leadership staff.
- Engage program manager and senior leadership in regular and consistent financial planning, preparing, and strategizing.
- Engage with Texas Council and community centers to fully understand, prepare, and implement funding strategies identified to extend and replace 1115 Extension Waiver.
- Pursue grant funding to augment operating budget.
- Pursue additional county and state funding to augment operating budget.
- Pursue value-based payment options negotiated with Managed Care Organizations to augment operating budget.

THE GULF COAST CENTER
Regular Board of Trustees Meeting
Mainland Community Service Center
7510 FM 1765, Texas City, TX
Wednesday, September 24, 2025
6:15 pm



"Better community healthcare promoting healthy living."

Minutes

1. **Call To Order** Jamie Travis, Board Chair
The following Board Members were present: Jamie Travis, Chair; Stephen Holmes, Vice-Chair; Vivian Renfrow, Caroline Rickaway and Galveston County Sheriff Lt. Jaime Castro.
The following Board Member(s) were excused: Brazoria County Bo Stallman, Mary Lou Flynn-DuPart, Chris Cahill.
Also present: Felicia Jeffery, CEO – Gulf Coast Center; Rick Elizondo, CFO; Devon Stanley, CIO; Linda Bell, General Counsel; Sarah Holt, CNO; Jerry Freshour, Sandy Patterson, Deanna David, Liley Mcpeek, Dr. M. Renee Valdez (virtual)
 - a. Announcements and Introductions
2025 Citizens of the Year Award: Jana Ogilvie was one of the recipients of the Unsung Heroes representing the West Columbia area (Pg 9)
The Board expressed pride in Jana Ogilvie, who was honored as one of the *Unsung Heroes* representing West Columbia. This annual award is presented by *The Facts* newspaper in Brazoria County to recognize outstanding community service. Jana was featured in the newspaper for her dedicated work in service coordination and her ongoing commitment to the community.
 - b. **Consider the approval of the recommendations for the FY26 Gulf Coast Center Board of Trustees' Officer Position as presented by the Board of Trustees Nominating Committee.**
Caroline Rickaway, Nominating Committee, reported that the nominating committee's recommendation and motion for the FY26 Board of Trustees Officers is as follows:
Jamie Travis, Brazoria County – Chair
Stephen Holmes, Galveston County – Vice Chair
Vivian Renfrow, Galveston County – Treasurer
Sheriff Bo Stallman, Brazoria County – Secretary
The motion coming from the committee does not require a second. The motion carried with all members voting in favor. There was no public comment.
2. **Citizens' Comments - none**
3. **Program Report:**
 - a. Just In Time Scheduling.....Dr. M. Renee Valdez, MD, PhD
Dr. M. Renee Valdez provided an update on the implementation and early outcomes of the **Just-in-Time Prescriber Scheduling** initiative, which began in late July. This system is designed to improve access to psychiatric care by allowing patients to schedule follow-up appointments within three to seven calendar days, ensuring timely evaluation and medication management while reducing no-shows and cancellations.
4. **Board Member Reports**
 - c. Texas Council of Community Centers Jamie Travis, Board Chair

Jamie reported that the next Texas Council quarterly meeting will be held November 6-8, 2025.

d. Texas Council Risk Management Fund Mary Lou Flynn-Dupart, TCRMF Board Chair

- TCRMF Board of Trustees Election (**Pg 10**)

Linda Bell reported on behalf of Mary Lou Flynn-Dupart. The next meeting will be held November 14th and will include the election of 3 trustees.

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

Grant Strategy and Strategic Use of Contracted Expertise: Felicia Jeffery

The Board was updated on Gulf Coast Center's approach to leveraging grants and contracted expertise to advance organizational priorities efficiently. Currently, GCC has approximately \$15.5 million in active grant submissions, including state and local funds. Approximately 10% of grant funding can be used for operational and administrative costs associated with managing contracts. Rather than hiring full-time staff for all grant-related and specialized projects, GCC contracts with external experts. This intentional strategy supports GCC's mission to efficiently manage resources, drive innovation, and maximize impact across programs.

- GCC selected **Compliatric**, a fully integrated healthcare compliance and risk management platform tailored for behavioral and community mental health organizations.
- The platform automates workflows for incident reporting, auditing, exclusion monitoring, grant administration, and policy oversight, ensuring compliance with federal, state, and accreditation standards.

These initiatives are designed to strengthen operational excellence, improve compliance oversight, and ensure the organization meets strategic goals efficiently and effectively.

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

- **Audit Update:** External auditors are currently on-site, with finalization of the audit expected in November.
- **Investment Report:** As of August 31, Gulf Coast Center held **\$2.2 million** in investment funds, earning **\$664,383.14 in interest** this fiscal year. These earnings have supported strategic initiatives and operational needs.

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.*)

d. **Review and approval of August 20, 2025 Board Minutes. (Pg. 46)**

On motion by Jaime Castro, and a second by Stephen Holmes, the board approved the August 20, 2025, Board Minutes as well as the August 20, 2025 Board Retreat Minutes. The motion carried with all members voting in favor. There was no public comment.

e. **Review and approval of August 2025 Check Registers**

On motion by Jaime Castro, and a second by Caroline Rickaway, the board approved the August Check Registers. The motion carried with all members voting in favor. There was no public comment.

f. **Annual review of Mission, Vision & Values**

The Annual Review of Mission, Vision & Values has been tabled.

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

GCC Administration Agreements

a. **Consider approval of the FY2025 Budget Amendment #1. (Pg 8)**

On motion by Jaime Castro, and a second by Stephen Holmes, the board approved the FY2025 Budget Amendment #1. The motion carried with all members voting in favor. There was no public comment.

b. Consider approval of the FY2026 Bank Account listing and signatures. (Pg 6)

On motion by Stephen Holmes, and a second by Caroline Rickaway, the board approved the FY2026 Bank Account listing and signatures. The motion carried with all members voting in favor. There was no public comment.

c. Consider approval of the Center's HUB Plan (Pg 20)

On motion by Stephen Holmes, and a second by Jaime Castro, the board approved the Center's HUB Plan. The motion carried with all members voting in favor. There was no public comment.

d. Consider approval of the new Consulting Agreement with 3H Leadership Consulting for the design, deliver, and deploy custom leadership development that fulfills the Leadership Excellence Crux 1 on Gulf Coast Center's Strategic Plan for FY26 and FY27.

Term: FY 26 and FY27

Not to Exceed: \$210,000 (\$26,250.00 per quarter)

Funding: Various

On motion by Vivian Renfrow, and a second by Stephen Holmes, the board approved the new Consulting Agreement with **3H Leadership Consulting** for the design, deliver, and deploy custom leadership development that fulfills the Leadership Excellence Crux 1 on Gulf Coast Center's Strategic Plan for FY26 and FY27.

The motion carried with all members voting in favor. There was no public comment.

e. Consider approval of the new agreement with Compliatric for use of software which provides real time insights, workflow automation in areas such as incident reports, and strengthens compliance and quality management.

Term: 9/15/25 – 9/14/30

Reimbursement rate: \$1,044/month

On motion by Jaime Castro, and a second by Stephen Holmes, the board approved the new agreement with **Compliatric** for use of software which provides real time insights, workflow automation in areas such as incident reports, and strengthens compliance and quality management. The motion carried with all members voting in favor. There was no public comment.

f. Consider approval of the policy and procedures listed below created and revised for the operation of the Extended Observation Unit.

On motion by Vivian Renfrow, and a second by Stephen Holmes, the board approved the policy and procedures listed below, created and revised for the operation of the Extended Observation Unit. The motion carried with all members voting in favor. There was no public comment.

15.14.a.1 Admission Criteria	15.14.a.2 Medical Exclusionary Criteria	15.14.b.1 Professional Services Plan
15.14.b.2 Staff Duties and Responsibilities	15.14.d.2 Staff Duties and Responsibilities	15.14.d.3 Nursing Care Plan, Crisis Treatment Plan and Patient Education
15.14.d.4 Treatment Planning	15.14.d.5 Crisis Nursing Triage Attachment A	15.14.e.1 Emergency Behavioral Health Interventions
15.14.e.2 Containment Workflow	15.14.f.1 Laboratory Service	15.14.g.1 Food Service & Pest Control

Below are GCC policies reviewed and updated to include or refer to EOU

2.13 Initial Employee Health Screening	12.1 Mental Health Continuity of Care
3.1 Chronic Carrier Infections; Food Storage	13.1 Medication Service
3.2 Chronic Carrier Infections	13.2 Prescriptive Authority Agreement
3.3 Safety Management Procedures	13.3 Delegation of Certain Medical and Nursing Acts
3.3a Pandemic / Epidemic Events	13.4 Waived Testing
3.3d Anti-Terrorism	13.5 Telemedicine Medical and Telehealth Services
3.4 Hurricane Emergency Procedures	13.6 Stock Controlled Medication
3.5 Active Shooter Guidelines	13.7 Ambulatory Withdrawal Management
3.11 Power Outage & Power Disruption	13.8 Opioid Overdose Prevention

3.14 Fire Safety Procedures
 3.15 Facility Keys and Security Codes
 8.9 Back-up and Data Recovery Plan
 8.17 Computer Incident Response Plan
 10.2 Crisis Screening & Risk Assessment
 10.3 Crisis Management and Follow-up
 11.1 Eligibility, Screening, and Assessment for Services

13.12 Medication Transport
 13.14 Standing Delegation Orders
 15.2 Jail Diversion Services
 15.8 Care Coordination
 15.10 Outreach Screening Assessment and Referral

HHSC Agreements

- g. Consider approval of the FY26-28 Outreach, Screening, Assessment, Referral (OSAR) contract #HHS001644600012. The OSAR program provides coordinated access to a continuum of substance use and other community services. Amount not to exceed \$1,497,960.** On motion by Jaime Castro, and a second by Caroline Rickaway, the board approved the FY26-28 Outreach, Screening, Assessment, Referral (OSAR) contract #HHS001644600012. The motion carried with all members voting in favor. There was no public comment.
- h. Consider approval of the FY26-27 MH performance contract #HHS001598600035. This contract provides funding for mental health adult and youth outpatient services, inpatient hospital beds, crisis, veterans, and PASRR MI services. Amount not to exceed \$42,246,414.** On motion by Jaime Castro, and a second by Stephen Holmes, the board approved the FY26-27 MH performance contract #HHS001598600035. The motion carried with all members voting in favor. There was no public comment.
- i. Consider approval of the FY26-27 Texas Correctional Office on Offenders w/Medical or Mental Impairments (TCOOMMI) contract #699-TC-26-27-LO52. The purpose of this contract is to provide continuity of care and intensive case management to persons on probation or parole to facilitate community integration and reduce recidivism. Amount not to exceed \$920,000 which is an increase of \$88,000 from previous allocation.** On motion by Jaime Castro, and a second by Stephen Holmes, the board approved the FY26-27 Texas Correctional Office on Offenders w/Medical or Mental Impairments (TCOOMMI) contract #699-TC-26-27-LO52. The motion carried with all members voting in favor. There was no public comment.
- j. Consider amendment #7 to the FY25 Outreach, Screening, Assessment, Referral (OSAR) contract #HHS000782500005. The OSAR program provides coordinated access to a continuum of substance use and other community services. The purpose of this amendment is to decrease funding in the amount of \$129,887 due to the expiration of American Rescue Plan Act (ARPA) funds.** On motion by Caroline Rickaway, and a second by Stephen Holmes, the board approved the FY25 Outreach, Screening, Assessment, Referral (OSAR) contract #HHS000782500005. The motion carried with all members voting in favor. There was no public comment.
- k. Consider approval of the FY26-30 HHSC Substance Use Treatment Service contract #HHS001535500114. This contract provides funding for substance use outpatient programs to include Treatment for Adult (TRA), Treatment for Youth (TRY) and Treatment for Females (TRF) as well as funds for subcontracted residential services. Total amount not to exceed \$11,061,435 for 5-year term.** On motion by Jaime Castro, and a second by Stephen Holmes, the board approved the FY26-30 HHSC Substance Use Treatment Service contract #HHS001535500114. The motion carried with all members voting in favor. There was no public comment.

FY 2026 (September 1, 2025- August 31, 2026) allocations are as follows:

Program ID	FY26 System Agency Share	FY26 Required Match	FY26 Total Contract Value

TRA	\$1,681,940.00	\$84,097.00	\$1,766,037.00
TRY	\$322,500.00	\$16,125.00	\$338,625.00
TRF	\$102,500.00	\$5,125.00	\$107,625.00
TOTAL:	\$2,106,940.00	\$105,347.00	\$2,212,287.00

- l. Consider approval of the FY26-30 HHSC Comprehensive Case Management Services (CCMS) contract #HHS001535500012. This contract provides funding for the provision of case management services to individuals eligible for intensive residential substance use services. CCMS services will reduce barriers to treatment, enhance motivation, encourage treatment retention, and strengthen resources for recovery. Total amount not to exceed \$1,021,635 for 5-year term. FY26 allocation is \$204,327.**

On motion by Jaime Castro, and a second by Stephen Holmes, the board approved the FY26-30 HHSC Comprehensive Case Management Services (CCMS) contract #HHS001535500012. The motion carried with all members voting in favor. There was no public comment.

Asset Management & Facility Services

- m. Consider the approval to declare surplus and dispose of Center vehicle #1182, a 2010 Ford Fusion with 139,966 miles, as this vehicle is no longer cost-effective for continued use due to age, high mileage, and increasing maintenance costs. (Pg. 19)**

On motion by Jaime Castro, and a second by Stephen Holmes, the board approved to declare surplus and dispose of Center vehicle #1182, a 2010 Ford Fusion with 139,966 miles. The motion carried with all members voting in favor. There was no public comment.

Behavioral Health Services

- n. Consider approval of the Memorandum of Understanding with Clear Creek Independent School District for the purpose of coordinating referrals, resources, skills training and case management services in order to assist youth at risk of placements or returning from placement who attend Clear Creek ISD. Term: 9/1/2025 until terminated.**

On motion by Stephen Holmes, and a second by Jaime Castro, the board approved the Memorandum of Understanding with **Clear Creek Independent School District** for the purpose of coordinating referrals, resources, skills training and case management services in order to assist youth at risk of placements or returning from placement who attend Clear Creek ISD. The motion carried with all members voting in favor. There was no public comment.

- o. Consider approval of the FY25 Amendment to the Hospital and Professional Services Agreement for PPB beds with Medical Behavioral Hospital of Clear Lake inclusive of extending the term date through November 30, 2025, reducing the bed capacity of designated/guaranteed beds from 10 to 5 effective September 1, 2025. Reimbursement: \$348,075 (daily rate \$765/bed day)**

On motion by Vivian Renfrow, and a second by Stephen Holmes, the board approved the FY25 Amendment to the Hospital and Professional Services Agreement with **Medical Behavioral Hospital of Clear Lake** inclusive of extending the term date through November 30, 2025, reducing the bed capacity of designated/guaranteed beds from 10 to 5 effective September 1, 2025. The motion carried with all members voting in favor. There was no public comment.

- p. Consider ratification of the renewal agreement with THE UNIVERSITY OF TEXAS MEDICAL BRANCH AT GALVESTON d/b/a UTMB Health for inpatient physician/psychiatric services. Reimbursement Rate: \$65/bed day; Amount not to exceed: \$427,050.00 annually. (no change from FY25). Description: UTMB provides inpatient physician services in the Center's contracted 18 bed inpatient unit located within SUN Behavioral Houston in Houston, TX**

On motion by Jaime Castro, and a second by Caroline Rickaway, the board ratified the renewal agreement with **THE UNIVERSITY OF TEXAS MEDICAL BRANCH AT GALVESTON d/b/a UTMB Health** for inpatient physician/psychiatric services. The motion carried with all members voting in favor. There was no public comment.

- q. **Consider approval of the FY26 renewal agreements with SUN Behavioral Houston for an Adult Inpatient Services guaranteeing 18 designated beds. Reimbursement Rate: \$700/bed day. Not to exceed: \$4,629,000.00**

On motion by Caroline Rickaway, and a second by Vivian Renfrow, the board approved the FY26 renewal agreements with **SUN Behavioral Houston** for an Adult Inpatient Services guaranteeing 18 designated beds. The motion carried with all members voting in favor. There was no public comment.

IDD Services

- r. **Consider approval of the FY26 renewal agreement with Lifetime Homecare HCS, LLC. to provide short-term (up to 14 calendar days) Crisis Respite for individuals with intellectual or developmental disabilities (IDD). Reimbursement: retainer fee of \$2,000.00 to insure immediate bed space availability upon notice of a crisis; \$300/individual daily (not to exceed \$175,000 increase of \$25K from FY25).**

On motion by Stephen Holmes, and a second by Jaime Castro, the board approved the FY26 renewal agreement with **Lifetime Homecare HCS, LLC.** to provide short-term (up to 14 calendar days) Crisis Respite for individuals with intellectual or developmental disabilities (IDD). The motion carried with all members voting in favor. There was no public comment.

SUD Agreements

- s. **Consider approval of the Youth Recovery Services Memorandum of Understanding with Brazoria County Juvenile Justice Department for the purpose of establishing a care coordination agreement for a full continuum of care and to ensure the most comprehensive services available to adolescents. Term: September 1, 2025 through August 31, 2026**

On motion by Caroline Rickaway, and a second by Jaime Castro, the board approved the Youth Recovery Services Memorandum of Understanding with **Brazoria County Juvenile Justice Department** for the purpose of establishing a care coordination agreement for a full continuum of care and to ensure the most comprehensive services available to adolescents. The motion carried with all members voting in favor. There was no public comment.

- t. **Consider approval of the OSAR Services Memorandum of Understanding with Brazoria County Juvenile Justice Department for the purpose of establishing a care coordination agreement for a full continuum of care and to ensure the most comprehensive services available to adolescents, adults, and their families. Term: September 1, 2025 through August 31, 2026**

On motion by Stephen Holmes, and a second by Vivian Renfrow, the board approved the OSAR Services Memorandum of Understanding with **Brazoria County Juvenile Justice Department** for the purpose of establishing a care coordination agreement for a full continuum of care and to ensure the most comprehensive services available to adolescents, adults, and their families. 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 that 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

September 24, 2025	Board Meeting	MCSC	6:15pm
October 22, 2025	Board Meeting	SBCSC	6:15pm
November	No Meeting		
December 10, 2025	Board Meeting	MCSC	6:15pm
January 28, 2026	Board Meeting	SBCSC or NBCSC (tbd)	6:15pm
February 25, 2026	Board Meeting	MCSC	6:15pm
March 25, 2026	Board Meeting	SBCSC or NBCSC (tbd)	6:15pm
April 29, 2026	Board Meeting	MCSC	6:15pm
May 27, 2026	Board Meeting	SBCSC	6:15pm
June 10-12, 2026	Annual Texas Council Conference	San Antonio, TX	
July 22, 2026	Board Meeting	MCSC	6:15pm
August 19, 2026	Board Meeting	SBCSC	6:15pm

SBCSC location: 101 Tigner, Angleton, TX | **NBCSC location:** 101 Brennan, Alvin, TX
MCSC location: 7510 FM 1765, Texas City, TX

11. Executive Session

➤ None.

12. Adjourn

There being no further business to bring before the Board of Trustees, the meeting was adjourned at 7:08 p.m.

Respectfully,

Approved as to Consent and Form,

Cathy Rice

Cathy Rice
Secretary to the Board of Trustees

Jamie Travis

Jamie Travis
Chair of the Board of Trustees