

The Harris Center for Mental Health and IDD 9401 Southwest Freeway Houston, TX 77074 Steve Schnee Conference Room# 104

Full Board Meeting

March 22, 2022 9:30 am

- I. DECLARATION OF QUORUM
- II. PUBLIC COMMENTS
- III. APPROVAL OF MINUTES
 - A. Approve Minutes of the Board of Trustees Meeting Held on Wednesday, February 15, 2022 (EXHIBIT F-1)
- IV. CHIEF EXECUTIVE OFFICER'S REPORT
- V. COMMITTEE REPORTS AND ACTIONS
 - A. Resource Committee Report and/or Action (G. Womack, Chair)
 - 1. Approve FY2022 Year-to-Date Budget Report February (EXHIBIT F-2 Sean Kim)
 - B. Quality Committee Report and/or Action (G. Santos, Chair)

VI. CONSENT AGENDA

- A. Approve FY'22 Year-to-Date Budget Report-February (EXHIBIT F-3 Sean Kim)
- B. March 2022 New Contracts Over 50K (EXHIBIT F-4 Silvia Tiller)
- C. March 2022 Contract Amendments Over 50K (EXHIBIT F-5 Silvia Tiller)
- D. March 2022 Interlocal Agreements (EXHIBIT F-6 Silvia Tiller)
- E. March 2022 Contract Ratifications (EXHIBIT F-7 Silvia Tiller)

VII. REVIEW AND COMMENT

- A. Strategic Plan Update (Wayne Young)
- VIII. BOARD CHAIR'S REPORT
 - IX. EXECUTIVE SESSION

- As authorized by §551.071 of the Texas Government Code, the Board of Trustees reserves the right to adjourn into Executive Session at anytime during the course of this meeting to seek legal advice from its attorney about any matters listed on the agenda.
- As authorized by §551.071 of the Texas Government Code, consultation with attorney on a matter related to financing of property and lines of credit in which the duty of the attorney to the governmental body under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas clearly conflicts with the Open Meetings Act.
- As authorized by §551.071 of the Texas Government Code, consultation with attorney on a matter related to Board governance in which the duty of the attorney to the governmental body under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas clearly conflicts with the Open Meetings Act.
- X. RECONVENE INTO OPEN SESSION
- XI. CONSIDER AND TAKE ACTION AS A RESULT OF THE EXECUTIVE SESSION
- XII. INFORMATION ONLY
 - A. March 2022 New Contracts Under 50K (EXHIBIT F-8)
 - B. March 2022 Contract Renewals Under 50K (EXHIBIT F-9)
 - C. March 2022 Contract Amendments Under 50K (EXHIBIT F-10)
 - D. March 2022 Affiliation Agreements, Grants, MOU's and Revenues-Information Only (EXHIBIT F-11)
 - E. Abbreviations List (EXHIBIT F-12)

XIII. ADJOURN

Veronica⁷Franco, Board Liaison

Shaukat Zakaria, Chair, Board of Trustees

The Harris Center for Mental Health and IDD

EXHIBIT F-1

THE HARRIS CENTER for Mental Health and IDD

MINUTES OF THE BOARD OF TRUSTEES MEETING

This is an official record of the Board of Trustees, The Harris Center for Mental Health and IDD, an Agency of the State, established by the Harris County Commissioners Court under provisions of Chapter 534 of the Health and Safety Code of the State of Texas.

PLACE OF MEETING: Conference Room 104

9401 Southwest Freeway Houston, Texas 77074

TYPE OF MEETING: Regular

DATE: February 22, 2022

TRUSTEES
IN ATTENDANCE: Mr. Shaukat Zakaria, Chair

Dr. George Santos, Vice Chairperson Dr. Lois Moore, Vice Chairperson Mr. Gerald Womack, Secretary

Judge Bonnie Hellums

Mr. Jim Lykes Robin Gearing PhD

Sheriff E. Gonzalez-Videoconference

TRUSTEES ABSENT:

I. Declaration of Quorum

Mr. Shaukat Zakaria, Chairperson, called the meeting to order at 9:54 a.m. noting that a quorum of the Board was in attendance.

II. Public Comments

Mr. Shaukat Zakaria, Chairperson, announced the floor is open for public comments. There were no public comments made.

III. Approval of Minutes

MOTION BY: SANTOS SECOND: HELLUMS

With unanimous affirmative votes

BE IT RESOLVED the Minutes of the Regular Board of Trustees meeting held on Wednesday, January 26, 2022 as presented under Exhibit F-1, are approved.

IV. Chief Executive Officer's Report was provided by CEO Wayne Young

Mr. Young provided a Chief Executive Officer report to the Board.

V. Committee Reports and Action were presented by the respective chairs:

- A. Resource Committee Report and/or Action- G. Womack, Chair
 - 1. FY'22 Year-to-Date Budget Report- January
- B. Quality Committee Report and/or Action- G. Santos, Chair
- C. Program Committee Report and/or Action- B. Hellums, Chair
- D. Governance Committee Report and/or Action-J. Lykes, Chair

VI. Consent Agenda

- A. Approve FY'21 Year-to-Date Budget Report-January
- B. February 2022 New Contracts Over 50K
- C. February 2022 Contract Amendments Over 50K
- D. February 2022 Contract Renewals Over 50K
- E. February 2022 Contract Ratifications Over 50K
- F. February 2022 Interlocal Agreements

G. NEW POLICIES

- 1. Corporate Compliance
- 2. COVID Vaccinations
- 3. Fee Schedule/Standard Charge
- 4. Personal Property

H. NO CHANGES

- 1. Confidentiality and Disclosure of Patient Health Information
- 2. Delegations in the Absence of the Chief Executive Officer
- 3. Drug/Alcohol Testing Pre-Employment
- 4. Dues and Membership Fees
- 5. Employment Eligibility Verification for Worker in the United States
- 6. Investment Policy
- 7. Lactation Breaks
- 8. Overtime Compensation

- 9. Patient Access to Medical Records
- 10. Pharmaceutical or Patient Assistance Programs (PAP)
- 11. Security of Patient Identifying Information
- 12. Shift Differential
- 13. Signature for Authorization
- 14. Solicitation of/and Acceptance of Donations (Money, Goods or Services)
- 15. State Service Contract Monitoring and Performance Reporting
- 16. Student internship Program

I. MINOR CHANGES

- 1. Corporate Card
- 2. Employee Counseling, Supervision, Progressive Discipline and Termination
- 3. Employee Referral Bonus Program
- 4. Equal Employment Opportunity
- 5. Linguistic Competence Services
- 6. Obligation to Identify Individuals or Entities Excluded from Participation in Federal Health Care Programs
- 7. Professional Behavior and Attire
- 8. Section 504 of the Rehabilitation Act ("The Act") and, The American with Disabilities Act ("ADA") (Consumers)
- 9. Standardized Patient Record Form
- 10. Temporary Personnel Services
- 11. Termination of General Revenue Contract Providers with Harris Center-IDD Services
- 12. Transfers-promotions-Demotions
- 13. Vehicle Operations
- 14. Volunteer Program

J. POLICY CHANGES

- 1. Credentialing Policy
- 2. Family and Medical Leave Act (FMLA)
- 3. Medical Services
- 4. Payment of Accrued Leave Upon Separation
- 5. Physician Assistant, Advanced Practice Registered Nurse Delegation Protocol
- 6. Research Procedures and the Committee for the Protection of Human Subjects.
- 7. Social Media Use

MOTION: Dr. Santos moved to approve Consent Agenda items A through J except for agenda item J6, Exhibit F-48-for Research Procedures and the Committee for the Protection of Human Subjects policy.

SECOND: Lykes seconded the motion

BE IT RESOLVED, with unanimous affirmative vote, Consent Agenda items A through J were approved agenda items with an exception to agenda item J-6, Exhibit F-48 Research Procedures and the Committee for the Protection of Human Subjects.

VII. Consider and Take Action

A. Board Resolution: Improving Approval Process of Routine and Required Expenses

MOTION BY: SANTOS SECOND: WOMACK

With unanimous affirmative votes BE IT RESOLVED Board Resolution: Improving Approval Process of Routine and Required Expenses, are approved.

B. Transfer January Enhanced FMAP Funds to COVID-10 eFMAP

MOTION BY: SANTOS SECOND: WOMACK

A. With unanimous affirmative votes BE IT RESOLVED C Transfer January Enhanced FMAP Funds to COVID-10 eFMAP, are approved.

VIII. Review and Comment

- A. **Procurement and Contracts Initiative,** Sean Kim, Kendra Thomas and Michelle Morris presented the Procurement and Contracts Initiative to the Full Board.
- B. **Information Security Follow up-IT Roadmap,** Wes Farris and Mustafa Cochinwala presented the Information Security Follow up-IT Roadmap to the Full Board.
- C. **Five Year Financial Forecast-**Sean Kim presented the Five Year Financial Forecast to the Full Board.
- D. **Market Compensation Review-**Wayne Young and Sean Kim presented the Market Compensation Review to the Full Board.
- IX. Board Chair's Report- Mr. Zakaria provided his Board Chair's report

X. Executive Session -

At 11:48 a.m. Chairperson Mr. Shaukat Zakaria announced the Board would enter into Executive Session for the following reasons:

- As authorized by §551.071 of the Texas Government Code, the Board of Trustees reserves the right to adjourn into Executive Session at anytime during the course of this meeting to seek legal advice from its attorney about any matters listed on the agenda.
- In accordance with §551.074 of the Texas Government Code, Discussion of Personnel Matters related to the Nomination of Individual Board members as Board Officers to the Audit Committee.
- In accordance with §551.074 of the Texas Government Code, Discussion of personnel matters related to Executive Leadership –Wayne Young, CEO

XI. Reconvene into Open Session

At 12:13 p.m., the Board of Trustees reconvened into open session.

XII. Consider and Take Action as a Result of the Executive Session

The Full Board took the following actions:

1. **Audit Committee Members**- Chair Zakaria moved for the approval of the following Audit Committee Members for February 22, 2022-February 21, 2023: Dr. L. Moore- Chair, Dr. G. Santos, Mr. Jim Lykes, Mr. G. Womack, Mrs. Bonnie Hellums, and Dr. Robin Gearing.

The motion was seconded by Dr. G. Santos.

The motion passed with unanimous affirmative votes.

ADJOURN

MOTION: SANTOS SECOND: WOMACK

Motion passed with unanimous affirmative votes

The meeting was adjourned at 12:13 P.M.

Respectfully submitted,

Veronica Franco, Board Liaison Shaukat Zakaria, Secretary, Board of Trustees The HARRIS CENTER for Mental Health and IDD

EXHIBIT F-2



The Harris Center for Mental Health and IDD

Financial Report For the Sixth Month and Year to Date Ended February 28, 2022

Fiscal Year 2022

Presented to the Resource Committee of the Board of Trustees on March 15, 2022

The Harris Center for Mental Health & IDD

March 15, 2022

Resource Committee
Board of Trustees
The Harris Center for Mental Health and IDD

The monthly financial report for February 28, 2022 of The Harris Center for Mental Health and IDD ("The Center") is submitted herewith. This report was prepared by The Center's Accounting Department. Responsibility for both accuracy of the presented data and the completeness and fairness of the presentation rests with the Authority, the Chief Financial Officer and the Accounting Department. We believe the data as presented is accurate in all material respects; that it is presented in a manner designed to fairly set forth the financial position and results of operations of the Center.

The Authority's accounting records for general operations are maintained on a modified accrual basis. Under this method, revenues are recognized in the period when they become measurable and available, and expenditures are recognized when the related fund liability is incurred, if measurable. The financial statement submitted herewith has not been audited by an independent auditor.

Sean Kim, CPA

Chief Financial Officer

The Harris Center for Mental Health and IDD Financial Summary For the Sixth Month and Year to Date Ended February 28, 2022

Month (,000)											
		Actual	E	Budget	Variance						
Revenues	\$	22,308	\$	19,857	\$	2,451					
Expenditures		24,863		25,899		1,036					
Excess of Revenues over (under) Expenditures before Other Sources	\$	(2,555)	\$	(6,042)	\$	3,487					

Year-to-date (,000)											
		ctual	В	udget	Va	riance					
Excess of Revenues over (under)	_			(100)	_						
Expenditures after Other Sources	<u>\$</u>	5,145	\$	(482)	\$	5,627					

The Harris Center for Mental Health and IDD Comparison of Revenue and Expenses - Actual to Budget For the Sixth Month and Year to Date Ended February 28, 2022

	N	onth Ended Feb	ruary 28, 2022		Six Months Ended February 28, 2022							
			Varia Favorable or (Variand Favorable or (U					
	<u>Actual</u>	<u>Budget</u>	<u>\$</u>	<u>%</u>	<u>Actual</u>	<u>Budget</u>	<u>\$</u>	<u>%</u>				
Total Revenues:												
Harris County and Local	\$ 4,507,068	\$ 4,667,304	. ,	-3%	\$ 27,202,008	\$ 27,995,595	,	-3%				
PAP / Samples	601,728	1,025,907	(424,179)	-41%	4,399,105	6,155,398	(1,756,293)	-29%				
Interest	5,861	4,166	1,695	41%	29,272	24,996	4,276	17%				
State General	8,012,311	8,043,355	(31,044)	0%	60,021,439	59,881,511	139,928	0%				
State Grants	820,923	1,189,482	(368,559)		5,869,198	7,136,887	(1,267,689)	-18%				
Federal Grants	5,254,648	2,139,740	3,114,908		17,387,994	12,852,624	4,535,370	35%				
3rd party billings	3,105,434	2,787,321	318,113	e 11%	12,916,559	15,865,827	(2,949,268)	-19% 				
Total Revenue	22,307,973	19,857,275	2,450,698	f 12%	127,825,576	129,912,838	(2,087,262)	-2%				
Total Expenses:												
Salaries and Fringe	17,766,480	17,870,818	104,338	q 1%	105,755,550	0 105,465,294	(290,256)	0%				
Travel	79,476	159,770	80,294	50%	447,886	, ,	788,799	64%				
Contracts and Consultants	1,767,099	1,825,534	58,435	3%	10,608,195		348,485	3%				
HCPC Contract	2,317,441	2,369,793	52,352	2%	13,946,995	, ,	271,763	2%				
Supplies and Drugs	955,641	1,368,251	412,610	30%	6,775,892		1,434,244	17%				
Equipment (Purch, Rent, Maint)	302,638	569,214	266,576		2,574,899	, ,	702,426	21%				
Building (Purch, Rent, Maint)	717,459	549,122	(168,337)		2,861,668		488,731	15%				
Vehicle (Purch, Rent, Maint)	47,984	38,057	(9,927)	-26%	287,763		(63,425)	-28%				
Telephone and Utilities	256,065	262,006	5,941	2%	1,574,526	•	(76,117)	-5%				
Insurance, Legal, Audit	167,203	250,122	82,919	33%	941,160		508,531	35%				
Other	474,719	585,498	110,779	19%	2,938,194		594,097	17%				
Claims Denials	10,462	50,787	40,325	79%	59,821	, ,	241,146	80%				
Total Expenses	24,862,666	25,898,971	1,036,306	j 4%	148,772,549	153,720,972	4,948,423	3%				
Excess of Revenues over (under)												
Expenditures before Other Sources	(2,554,693) a	(6,041,696)	3,487,004		(20,946,974)	(23,808,134)	2,861,160					
Funds from other sources:												
Use of fund balance - CapEx	370,876	-	370,876		1,773,059	-	1,773,059					
Use of fund balance - COVID-19	-	-	-		982,500	-	982,500					
Fund Balance DSRIP	432,753	432,753	-		2,694,833	2,694,833	-					
Waiver 1115 Revenues	3,727,126	3,727,126	-		20,631,658	20,631,658	-					
DSRIP Transition	-	-	-		-	-	-					
COVID-19 FMAP Allocation	<u>-</u>	-	-		<u>-</u>	-	- 					
Insurance Proceeds Proceeds from Sale of Assets	3,704 -	-	3,704 -		10,324	-	10,324					
Evenes of Poyonups over (under)												
Excess of Revenues over (under) Expenditures after Other Sources	\$ 1,979,766	\$ (1,881,817)	\$ 3,861,584		\$ 5,145,400	b \$ (481,643)	\$ 5,627,043					
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The Harris Center for Mental Health and IDD Comparative Balance Sheet As of February 28, 2022

Sasets			Ending l	Baland	e	Incre	ease/(Decrease)	
Assets Cash and Cash Equivalents \$ 122,258,696 \$ 108,090,727 \$ (14,167,969) a lank (16,739) b 108,090,727 \$ (14,167,969) a lank (16,320) c 274,347 (16,739) b 14,153,261 2,455,090 c 24,550,090 c 24,550,090 d 24,550,090 c 24,550,090 d 24,550,090 d 24,550,090 d 24,550,000 d 24,550,090 d 24,550,000 d 2		Ja					February	
Inventory - includes RX 276,020 274,347 (1,673)	Assets		, , ,		,			
Prepaid Expenses	Cash and Cash Equivalents	\$	122,258,696	\$	108,090,727	\$	(14,167,969)	а
ARM Medicaird, Medicaire, 3rd Party 11,998,162 14,453,261 2,455,099 Less Bad Debt Reserve (9,05,823) 1.59 (6,305,823) 1.59 (A,505,823)	Inventory - includes RX		276,020		274,347		(1,673)	b
ARM Medicaird, Medicaire, 3rd Party 11,998,162 14,453,261 2,455,099 Less Bad Debt Reserve (9,05,823) 1.59 (6,305,823) 1.59 (A,505,823)	Prepaid Expenses		9,704,458		9,686,074		(18,384)	С
Less Bad Debt Reserve (6,905,823) (6,905,823) (402,952) d AR DSRIP 15,941,539 (402,952) d AR DSRIP 9,021,801 14,180,182 5,183,831 Total Current Assets 162,697,805 155,720,307 (6,977,498)							, , ,	
AR Other 16,344,491 15,941,539 (402,952) d AR DSRIP 9,021,801 14,180,182 5,158,381 Total Current Assets 162,697,805 165,720,307 (6,977,498) Land 6,432,036 6,432,036 - Building 25,773,792 25,773,792 - Furniture and Fixtures 7,591,701 7,634,469 42,768 Vehicles 15,693,768 1,5697,7697,7697,7697,7697,7697,7697,7697	· · · · · · · · · · · · · · · · · · ·						_, .00,000	
AR DSRIP			, , , ,		, , , ,		(402.052)	ч
Total Current Assets								u
Land 6,432,036 6,432,036 -								
Building	Total Current Assets		162,697,805	-	155,720,307		(6,977,498)	
Building Improvements							-	
Furniture and Fixtures	Building		25,773,792		25,773,792		-	
Furniture and Fixtures	Building Improvements		21,621,995		21,621,995		-	
Vehicles 1,569,768 1,569,768 1,569,768 1,569,768 1,569,768 370,877 Construction in Progress 17,475,804 17,846,681 370,877 1413,645 TOTAL ASSETS \$ 243,162,901 \$ 236,599,048 \$ (6,563,853) Liabilities and Fund Balance Unearned Income Accounts Payables \$ 26,474,101 \$ 17,139,366 \$ (9,334,735) \$ 6 Accrued Payroll and Accounts Payables 24,729,499 25,911,264 1,181,765 \$ 7 Current Portion Long Term Debt - <td< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td>42,768</td><td></td></td<>							42,768	
Construction in Progress 17,475,804 17,846,681 370,877 Total Property, Plant & Equipment 80,465,096 80,878,741 413,645 413,645 TOTAL ASSETS 243,162,901 \$236,599,048 \$(6,563,853) \$	Vehicles						· <u>-</u>	
Total Property, Plant & Equipment 80,465,096 80,878,741 413,645 TOTAL ASSETS \$243,162,901 \$236,599,048 \$(6,563,853) Liabilities and Fund Balance							370.877	
TOTAL ASSETS \$ 243,162,901 \$ 236,599,048 \$ (6,563,853)	· · · · · · · · · · · · · · · · · · ·			-				
Liabilities and Fund Balance	rotar roperty, riant & Equipment		00,400,000		00,070,741		+10,040	
Unearmed Income	TOTAL ASSETS	\$	243,162,901	\$	236,599,048	\$	(6,563,853)	
Accrued Payroll and Accounts Payables Current Portion Long Term Debt Total Current Liabilities 51,203,600 43,050,630 (8,152,970) State Escheatment Payable Total Non Current Liabilities 51,203,600 43,050,630 (8,152,970) State Escheatment Payable Total Non Current Liabilities 41,354 41,270 (84) TOTAL LIABILITIES 51,244,954 43,091,900 (8,153,054) General Fund Balance 18,308,381 17,892,061 (416,320) Ronspendable Investment in Inventories 276,020 274,347 (1,673) Investment In Fixed Assets 80,465,097 80,878,741 413,644 Assigned: Current Capital Projects Future Purchases of Real Property and IT Infrastructure 2,000,000 ECI Building Use 361,664 Self Insurance 2,000,000 ECI Building Use 361,664 Waiver 1115 61,411,932 60,979,184 (432,748) i COVID-19 eFMAP Reserve 486,658 904,067 417,409 Compensated Absences 4,854,354 4,854,354 4,854,354 7 total TOTAL FUND BALANCE 191,917,947 193,507,148 1,589,201	Liabilities and Fund Balance							
Current Portion Long Term Debt 51,203,600 43,050,630 (8,152,970) State Escheatment Payable 41,354 41,270 (84) Total Non Current Liabilities 41,354 41,270 (84) TOTAL LIABILITIES 51,244,954 43,091,900 (8,153,054) General Fund Balance 18,308,381 17,892,061 (416,320) g Nonspendable 1nvestment in Inventories 276,020 274,347 (1,673) (1,673) Investment In Fixed Assets 80,465,097 80,878,741 413,644 Assigned: Current Capital Projects 19,222,365 18,851,488 (370,877) h Future Purchases of Real Property and IT Infrastructure 1,365,842 1,365,842 - Self Insurance 2,000,000 2,000,000 - ECI Building Use 361,664 361,664 - Waiver 1115 61,411,932 60,979,184 (432,748) i COVID-19 eFMAP Reserve 486,658 904,067 417,409 Compensated Absences 4,854,354 4,854,354 4,854,354 </td <td>Unearned Income</td> <td>\$</td> <td>26,474,101</td> <td>\$</td> <td>17,139,366</td> <td>\$</td> <td>(9,334,735)</td> <td>е</td>	Unearned Income	\$	26,474,101	\$	17,139,366	\$	(9,334,735)	е
Current Portion Long Term Debt - - Total Current Liabilities 51,203,600 43,050,630 (8,152,970) State Escheatment Payable 41,354 41,270 (84) Total Non Current Liabilities 41,354 41,270 (84) TOTAL LIABILITIES 51,244,954 43,091,900 (8,153,054) General Fund Balance 18,308,381 17,892,061 (416,320) g Nonspendable 276,020 274,347 (1,673) (1,673) Investment in Inventories 80,465,097 80,878,741 413,644 Assigned: 2 200,000 274,347 (1,673) 1,644 Current Capital Projects 19,222,365 18,851,488 (370,877) h Future Purchases of Real Property and IT Infrastructure 1,365,842 1,365,842 - Self Insurance 2,000,000 2,000,000 - ECI Building Use 361,664 361,664 - Waiver 1115 61,411,932 60,979,184 (432,748) i COVID-19 eFMAP Reserve 486,6	Accrued Payroll and Accounts Payables		24,729,499		25,911,264		1,181,765	f
Total Current Liabilities 51,203,600 43,050,630 (8,152,970) State Escheatment Payable Total Non Current Liabilities 41,354 41,270 (84) TOTAL LIABILITIES 51,244,954 43,091,900 (8,153,054) General Fund Balance Nonspendable Investment in Inventories Investment in Inventories Research Investment In Fixed Assets 276,020 274,347 (1,673) Investment In Fixed Assets 80,465,097 80,878,741 413,644 Assigned: Current Capital Projects 19,222,365 18,851,488 (370,877) h Future Purchases of Real Property and IT Infrastructure Self Insurance Self Insurance 2,000,000 2,000,000 - Self Insurance Self Insurance Self Insurance 361,664 361,664 - Waiver 1115 61,411,932 60,979,184 (432,748) it COVID-19 eFMAP Reserve 486,558 904,067 417,409 Compensated Absences 4,854,354 4,854,354 - Total 188,752,313 188,361,748 (390,565) Year to Date Excess Revenues over (under) Expenditures 3,165,634 5,145,400 1,979,766			· · · · -		· -		· · · · -	
Total Non Current Liabilities 41,354 41,270 (84) TOTAL LIABILITIES 51,244,954 43,091,900 (8,153,054) General Fund Balance 18,308,381 17,892,061 (416,320) g Nonspendable 276,020 274,347 (1,673) Investment in Inventories 80,465,097 80,878,741 413,644 Assigned: Current Capital Projects 19,222,365 18,851,488 (370,877) h Future Purchases of Real Property and IT Infrastructure 1,365,842 1,365,842 - Self Insurance 2,000,000 2,000,000 - ECI Building Use 361,664 361,664 - Waiver 1115 61,411,932 60,979,184 (432,748) i COVID-19 eFMAP Reserve 486,658 904,067 417,409 Compensated Absences 4,854,354 4,854,354 - Total 188,752,313 188,361,748 (390,565) Year to Date Excess Revenues over 1,979,766 1,979,766 TOTAL FUND BALANCE 191,917,947			51,203,600		43,050,630		(8,152,970)	
Total Non Current Liabilities 41,354 41,270 (84) TOTAL LIABILITIES 51,244,954 43,091,900 (8,153,054) General Fund Balance 18,308,381 17,892,061 (416,320) g Nonspendable 276,020 274,347 (1,673) Investment in Inventories 80,465,097 80,878,741 413,644 Assigned: Current Capital Projects 19,222,365 18,851,488 (370,877) h Future Purchases of Real Property and IT Infrastructure 1,365,842 1,365,842 - Self Insurance 2,000,000 2,000,000 - ECI Building Use 361,664 361,664 - Waiver 1115 61,411,932 60,979,184 (432,748) i COVID-19 eFMAP Reserve 486,658 904,067 417,409 Compensated Absences 4,854,354 4,854,354 - Total 188,752,313 188,361,748 (390,565) Year to Date Excess Revenues over 1,979,766 1,979,766 TOTAL FUND BALANCE 191,917,947	State Escheatment Payable		41,354		41,270		(84)	
General Fund Balance 18,308,381 17,892,061 (416,320) g Nonspendable Investment in Inventories Investment In Fixed Assets 276,020 274,347 (1,673) Investment In Fixed Assets 80,465,097 80,878,741 413,644 Assigned: Current Capital Projects 19,222,365 18,851,488 (370,877) h Future Purchases of Real Property and IT Infrastructure Self Insurance 2,000,000 2,000,000 - - ECI Building Use Waiver 1115 361,664 361,664 - - - COVID-19 eFMAP Reserve Compensated Absences 486,658 904,067 417,409 - Compensated Absences 4,854,354 4,854,354 - - Total 188,752,313 188,361,748 (390,565) Year to Date Excess Revenues over (under) Expenditures 3,165,634 5,145,400 1,979,766 TOTAL FUND BALANCE 191,917,947 193,507,148 1,589,201								
Nonspendable Investment in Inventories 276,020 274,347 (1,673) Investment In Fixed Assets 80,465,097 80,878,741 413,644 Assigned: Current Capital Projects 19,222,365 18,851,488 (370,877) h Future Purchases of Real Property and IT Infrastructure Self Insurance 2,000,000 2,000,000 - ECI Building Use 361,664 361,664 - Waiver 1115 61,411,932 60,979,184 (432,748) COVID-19 eFMAP Reserve 486,658 904,067 417,409 Compensated Absences 4,854,354 4,854,354 - Total 188,752,313 188,361,748 (390,565) Year to Date Excess Revenues over (under) Expenditures 3,165,634 5,145,400 1,979,766 TOTAL FUND BALANCE 191,917,947 193,507,148 1,589,201	TOTAL LIABILITIES		51,244,954		43,091,900		(8,153,054)	
Investment in Inventories 276,020 274,347 (1,673) Investment In Fixed Assets 80,465,097 80,878,741 413,644			18,308,381		17,892,061		(416,320)	g
Assigned: Current Capital Projects			276 020		274 347		(1 673)	
Assigned: Current Capital Projects Future Purchases of Real Property and IT Infrastructure Self Insurance ECI Building Use Waiver 1115 GOVID-19 eFMAP Reserve Compensated Absences Total Year to Date Excess Revenues over (under) Expenditures Assigned: 19,222,365 18,851,488 (370,877) h 19,222,365 18,851,488 (370,877) h 1,365,842 1,365					·		· · · /	
Current Capital Projects 19,222,365 18,851,488 (370,877) h Future Purchases of Real Property and IT Infrastructure 1,365,842 1,365,842 - Self Insurance 2,000,000 2,000,000 - ECI Building Use 361,664 361,664 - Waiver 1115 61,411,932 60,979,184 (432,748) i COVID-19 eFMAP Reserve 486,658 904,067 417,409 Compensated Absences 4,854,354 4,854,354 - Total 188,752,313 188,361,748 (390,565) Year to Date Excess Revenues over (under) Expenditures 3,165,634 5,145,400 1,979,766 TOTAL FUND BALANCE 191,917,947 193,507,148 1,589,201	investment in rived Assets		00,403,097		00,070,741		413,044	
Future Purchases of Real Property and IT Infrastructure 1,365,842 1,365,842 - Self Insurance 2,000,000 2,000,000 - ECI Building Use 361,664 361,664 - Waiver 1115 61,411,932 60,979,184 (432,748) i COVID-19 eFMAP Reserve 486,658 904,067 417,409 Compensated Absences 4,854,354 4,854,354 - Total 188,752,313 188,361,748 (390,565) Year to Date Excess Revenues over (under) Expenditures 3,165,634 5,145,400 1,979,766 TOTAL FUND BALANCE 191,917,947 193,507,148 1,589,201			10 222 265		10 051 100		(270.077)	h
Self Insurance 2,000,000 2,000,000 - ECI Building Use 361,664 361,664 - Waiver 1115 61,411,932 60,979,184 (432,748) i COVID-19 eFMAP Reserve 486,658 904,067 417,409 Compensated Absences 4,854,354 4,854,354 - Total 188,752,313 188,361,748 (390,565) Year to Date Excess Revenues over (under) Expenditures 3,165,634 5,145,400 1,979,766 TOTAL FUND BALANCE 191,917,947 193,507,148 1,589,201					, ,		(370,077)	11
ECI Building Use 361,664 361,664 - Waiver 1115 61,411,932 60,979,184 (432,748) i COVID-19 eFMAP Reserve 486,658 904,067 417,409 Compensated Absences 4,854,354 4,854,354 - Total 188,752,313 188,361,748 (390,565) Year to Date Excess Revenues over (under) Expenditures 3,165,634 5,145,400 1,979,766 TOTAL FUND BALANCE 191,917,947 193,507,148 1,589,201	· · ·						-	
Waiver 1115 61,411,932 60,979,184 (432,748) i COVID-19 eFMAP Reserve 486,658 904,067 417,409 Compensated Absences 4,854,354 4,854,354 - Total 188,752,313 188,361,748 (390,565) Year to Date Excess Revenues over (under) Expenditures 3,165,634 5,145,400 1,979,766 TOTAL FUND BALANCE 191,917,947 193,507,148 1,589,201							-	
COVID-19 eFMAP Reserve 486,658 904,067 417,409 Compensated Absences 4,854,354 4,854,354 - Total 188,752,313 188,361,748 (390,565) Year to Date Excess Revenues over (under) Expenditures 3,165,634 5,145,400 1,979,766 TOTAL FUND BALANCE 191,917,947 193,507,148 1,589,201							(400.740)	
Compensated Absences 4,854,354 4,854,354 - Total 188,752,313 188,361,748 (390,565) Year to Date Excess Revenues over (under) Expenditures 3,165,634 5,145,400 1,979,766 TOTAL FUND BALANCE 191,917,947 193,507,148 1,589,201							, ,	ı
Total 188,752,313 188,361,748 (390,565) Year to Date Excess Revenues over (under) Expenditures 3,165,634 5,145,400 1,979,766 TOTAL FUND BALANCE 191,917,947 193,507,148 1,589,201			/		,		417,409	
Year to Date Excess Revenues over (under) Expenditures 3,165,634 5,145,400 1,979,766 TOTAL FUND BALANCE 191,917,947 193,507,148 1,589,201	•							
(under) Expenditures 3,165,634 5,145,400 1,979,766 TOTAL FUND BALANCE 191,917,947 193,507,148 1,589,201	lotal		188,752,313		188,361,748		(390,565)	
TOTAL FUND BALANCE 191,917,947 193,507,148 1,589,201	Year to Date Excess Revenues over							
	(under) Expenditures		3,165,634		5,145,400		1,979,766	
TOTAL LIABILITIES AND FUND BALANCE \$ 243,162,901 \$ 236,599,048 \$ (6,563,853)	TOTAL FUND BALANCE		191,917,947		193,507,148		1,589,201	
	TOTAL LIABILITIES AND FUND BALANCE	\$	243,162,901	\$	236,599,048	\$	(6,563,853)	

- I. Comparison of Revenue and Expenses
 - a. For the month of February 2022, the sixth month of the fiscal year, the Harris Center is reporting excess Expenditures over Revenues of \$2,554,693.
 - b. The year-to-date amount translates to Excess Revenues over Expenditures of \$5,145,400 after use of fund balance, fund balance CapEx, fund balance DSRIP, Waiver 1115 revenues and insurance proceeds are considered.
 - c. State Grants are unfavorable to budget by \$368,559 due to timing of construction expenses related to the Healthy Community Grant.
 - d. Federal grants are favorable to budget by \$3,114,908 due to funding from several new federal block grants and ARPA grants. In addition MAC ADMIN Claiming funds were adjusted to recognize all MAC funds due to the Center.
 - e. Third Party Billings are favorable to budget by \$318,113.
 - f. Total Revenue is favorable to budget by \$2,450,698.
 - g. Salaries and Fringe Benefits are favorable to budget by \$104,338.
 - h. Equipment is favorable to budget by \$266,576 due to timing of expenses.
 - i. Building is unfavorable to budget by \$168,337 due to expenses for Board approved capital projects funded from reserves.
 - j. Total Expenses are favorable to budget by \$1,036,306.

II. Comparative Balance Sheet

a. Cash and Cash Equivalents - The Agency considers cash and cash equivalents to be cash on hand, demand deposit accounts and short term investments with maturities of less than ninety days. Cash and cash equivalents decreased from the prior month because of operations.

				Increase
	Ending	Bala	ance	(Decrease)
	1/31/2022		2/28/2022	February
Cash-General Fund Bank of America	\$ 7,238,807	\$	6,667,250	\$ (571,557)
Cash-General Fund Chase	52,295,412		37,963,609	(14,331,803)
Cash-BOA ACH Vendor	158,381		579,078	420,697
Cash-FSA-Discovery	208,445		217,166	8,721
Cash-Pharmacy Chase	-		112	112
Petty Cash	5,700		5,700	-
Investments-TexPool General Fund	1,001,743		1,001,791	48
Investments-TexPool Self Insurance	2,289,302		2,289,413	111
Investments-TexPool Prime	31,326,211		31,328,943	2,732
Investments-Texas Class	 27,734,695		28,037,665	302,970
	\$ 122,258,696	\$	108,090,727	\$ (14,167,969)

b. Inventory normally does not significantly change from month to month. The balance is normally updated annually at the time of the year end physical inventory. PAP/Drug samples are not included in inventory, as this inventory does not belong to the Center. Inventory consists of the following:

					Increase	
	Ending	Bala	ance	(Decrease)		
	1/31/2022	February				
Inventory-Central Supplies	\$ 28,052	\$	28,052	\$	-	
Supplies Used	(17,215)		(18,888)		(1,673)	
Inventory-Drugs	265,183		265,183			
Total Inventory	\$ 276,020	\$	274,347	\$	(1,673)	

c. Prepaid Expenses decreased due to amortization of prepaid insurance and other prepaid items.

II. Comparative Balance Sheet (continued)

d. Accounts Receivable decreased in February.

			Increase
	Ending	Balance	(Decrease)
_	1/31/2022	2/28/2022	February
Villas at Bayou Park	60,433	60,433	\$ -
Pear Grove	39,937	39,937	-
Pasadena Cottages	72,252	79,167	6,915
Employee	-	-	-
Pecan Village	4,401	4,401	-
Acres Homes Garden	92,516	94,096	1,580
General Accounts Receivable	1,142,233	1,142,233	-
Pharmacy PBM	-	595	595
Harris County Projects	737,926	855,113	117,186
Harris County Juvenile Probation	757,383	449,237	(308,147)
Harris County Community Supervision	685,124	541,220	(143,904)
Harris County Sheriff's Department	2,638,028	2,798,200	160,172
ICFMR	176,897	158,715	(18,182)
TCOOMMI-Special Needs	578,106	751,025	172,919
TDCJ-Parole	123,000	143,500	20,500
TDCJ-Substance Abuse	67,851	84,518	16,667
TCOOMMI-Juvenile	197,731	244,044	46,313
Jail Diversion	2,357,077	1,695,297	(661,780)
ECI	716,136	314,096	(402,041)
ECI Respite	976	949	(28)
ECI SNAP	19,184	18,196	(988)
Federal CHH Navigation	101,961	181,403	79,441
Federal Aot	61,312	119,296	57,984
PATH-Mental Health Block Grant	107,042	231,129	124,087
MH Block Grant-Coordinated Specialty Care	153,312	127,619	(25,693)
DSHS SAPT Block Grant	108,243	227,953	119,710
Enhanced Community Coordinator	94,471	97,177	2,705
Subtotal, A/R-Other	\$ 11,093,535	\$ 10,459,548	\$ (633,987)

II. Comparative Balance Sheet (continued)

d. Accounts Receivable Other (Continued)

					Increase
		Ending	Bala	ance	(Decrease)
	:	1/31/2022		2/28/2022	February
DSHS Mental Heath First Aid	\$	20,205	\$	25,482	\$ 5,277
HHSC ZEST-Zero Suicide		31,334		38,258	6,925
HCC Open Door		350,214		314,606	(35,607)
HCS		22,416		22,416	-
Tx Home Living Waiver		314,550		301,618	(12,933)
Federal DSHS Disaster Assistance		1,013,602		219,333	(794,268)
DPP-BHS		2,178,997		2,624,219	445,222
Helpline Contracts		229,391		247,881	18,490
City of Houston-CCSI		50,537		50,537	-
City of Houston-DMD		10,332		20,663	10,332
City of Houston-911 CCD Amended		28,183		60,079	31,897
A/R - HHSC Projects		994,496		1,548,998	554,502
Local TCDD C19 Vac Stipend		6,700		7,900	1,200
Grand Total A/R - Other	\$	16,344,491	\$	15,941,539	\$ (402,952)

- e. Unearned Income decreased due to expenditures of State General Revenue Funds.
- f. Accrued Payroll and Accounts Payable increased because of payment timing related to accounts payable, payroll, and employee fringe benefit liabilities.
- g. General Fund Balance decreased due to operations.
- h. Current Capital Projects decreased due to expenses related to Board approved Capex projects.
- i. Waiver 1115 Reserves decreased due to use of budgeted DSRIP reserves for operations.
- j. Days of Operations in Reserve for Total Agency is 149 days versus 150 days for the prior month.

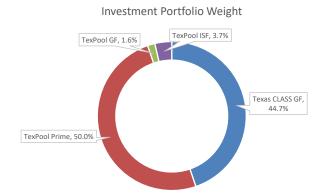
III. Investment Portfolio

- a. Total investments as of February 28, 2022 are \$62,657,813 of which 100% is in government pools. (Texas Class 45% and TexPool 55%)
- b. Investments this month yielded interest income of \$5,861.

The Harris Center for Mental Health and IDD Investment Portfolio February 28, 2022

Local Government Investment Pools (LGIPs)

	Begii	nning Balance	Transfer In	Transfer Out	I	Interest Income	Ending Value	Portfolio %	Yield
Texas CLASS									
Texas CLASS General Fund	\$	27,734,695	\$ 7,000,000	\$ (6,700,000)	\$	2,969	\$ 28,037,665	44.7%	0.097%
TexPool									
TexPool Prime		31,326,211	\$ -	\$ -		2,732	31,328,943	50.0%	0.098%
TexPool General Fund		1,001,743				49	1,001,791	1.6%	0.038%
TexPool Internal Service Fund		2,289,302				111	2,289,413	3.7%	0.038%
TexPool Sub-Total		34,617,256	-	-		2,892	34,620,148	55.3%	0.092%
Total Investments	\$	62,351,951	\$ 7,000,000	\$ (6,700,000)	\$	5,861	\$ 62,657,813	100%	0.094%



3 Month Weighted Average Maturity (Days)
3 Month Weighted Average Yield of The Harris Center Investment Portfolio
0.089%
3 Month Rolling Weighted Average Daily Treasury Bill Rate (4 weeks)
0.041%

This Investment Portfolio Report of The Harris Center for Mental Health and IDD as of February 28,2022 is in compliance with the Public Funds Investment Act (PFIA), Chapter 2256 of the Texas Government Code and the Investment Strategy approved by the Board of Trustees.

The Harris Center for Mental Health and IDD Monthly Report of Financial Transactions Related to Payments of Liabilities for Employee Benefits

Report for February 2022

Vendor	Description		Feb-22	YTD Total Through February		
Lincoln Financial Group	Retirement Funds (401a, 403b, 457)	\$2,400,000	\$1,758,910	\$9,394,639		
Blue Cross Blue Shield of TX	Health and Dental Insurance	\$2,600,000	\$1,850,142	\$4,123,533		

^{*} As established by the Board Resolution: Harris Center Board of Trustees Signature Authorization and Delegation Authority for Certain Items effective February 22, 2022.

Note: Non-employee portion of February payments of Liabilities for Employee Benefits = 10% of Expenditures.

EXHIBIT F-3



The Harris Center for Mental Health and IDD

Financial Report For the Sixth Month and Year to Date Ended February 28, 2022

Fiscal Year 2022

Presented to the Resource Committee of the Board of Trustees on March 15, 2022

The Harris Center for Mental Health & IDD

March 15, 2022

Resource Committee
Board of Trustees
The Harris Center for Mental Health and IDD

The monthly financial report for February 28, 2022 of The Harris Center for Mental Health and IDD ("The Center") is submitted herewith. This report was prepared by The Center's Accounting Department. Responsibility for both accuracy of the presented data and the completeness and fairness of the presentation rests with the Authority, the Chief Financial Officer and the Accounting Department. We believe the data as presented is accurate in all material respects; that it is presented in a manner designed to fairly set forth the financial position and results of operations of the Center.

The Authority's accounting records for general operations are maintained on a modified accrual basis. Under this method, revenues are recognized in the period when they become measurable and available, and expenditures are recognized when the related fund liability is incurred, if measurable. The financial statement submitted herewith has not been audited by an independent auditor.

Sean Kim, CPA

Chief Financial Officer

The Harris Center for Mental Health and IDD Financial Summary For the Sixth Month and Year to Date Ended February 28, 2022

Month (,000)											
		Actual	E	Budget	Variance						
Revenues	\$	22,308	\$	19,857	\$	2,451					
Expenditures		24,863		25,899		1,036					
Excess of Revenues over (under) Expenditures before Other Sources	\$	(2,555)	\$	(6,042)	\$	3,487					

Year-to-date (,000)											
		ctual	В	udget	Va	riance					
Excess of Revenues over (under)	_			(100)	_						
Expenditures after Other Sources	<u>\$</u>	5,145	\$	(482)	\$	5,627					

The Harris Center for Mental Health and IDD Comparison of Revenue and Expenses - Actual to Budget For the Sixth Month and Year to Date Ended February 28, 2022

	N	onth Ended Feb	ruary 28, 2022		Six Months Ended February 28, 2022					
			Varia Favorable or (Variand Favorable or (U			
	<u>Actual</u>	Budget	<u>\$</u>	<u>%</u>	<u>Actual</u>	<u>Budget</u>	<u>\$</u>	<u>%</u>		
Total Revenues:										
Harris County and Local	\$ 4,507,068	\$ 4,667,304	. ,	-3%	\$ 27,202,008	\$ 27,995,595	,	-3%		
PAP / Samples	601,728	1,025,907	(424,179)	-41%	4,399,105	6,155,398	(1,756,293)	-29%		
Interest	5,861	4,166	1,695	41%	29,272	24,996	4,276	17%		
State General	8,012,311	8,043,355	(31,044)	0%	60,021,439	59,881,511	139,928	0%		
State Grants	820,923	1,189,482	(368,559)		5,869,198	7,136,887	(1,267,689)	-18%		
Federal Grants	5,254,648	2,139,740	3,114,908		17,387,994	12,852,624	4,535,370	35%		
3rd party billings	3,105,434	2,787,321	318,113	e 11%	12,916,559	15,865,827	(2,949,268)	-19% 		
Total Revenue	22,307,973	19,857,275	2,450,698	f 12%	127,825,576	129,912,838	(2,087,262)	-2%		
Total Expenses:										
Salaries and Fringe	17,766,480	17,870,818	104,338	q 1%	105,755,550	0 105,465,294	(290,256)	0%		
Travel	79,476	159,770	80,294	50%	447,886	, ,	788,799	64%		
Contracts and Consultants	1,767,099	1,825,534	58,435	3%	10,608,195		348,485	3%		
HCPC Contract	2,317,441	2,369,793	52,352	2%	13,946,995	, ,	271,763	2%		
Supplies and Drugs	955,641	1,368,251	412,610	30%	6,775,892		1,434,244	17%		
Equipment (Purch, Rent, Maint)	302,638	569,214	266,576		2,574,899	, ,	702,426	21%		
Building (Purch, Rent, Maint)	717,459	549,122	(168,337)		2,861,668		488,731	15%		
Vehicle (Purch, Rent, Maint)	47,984	38,057	(9,927)	-26%	287,763		(63,425)	-28%		
Telephone and Utilities	256,065	262,006	5,941	2%	1,574,526		(76,117)	-5%		
Insurance, Legal, Audit	167,203	250,122	82,919	33%	941,160		508,531	35%		
Other	474,719	585,498	110,779	19%	2,938,194		594,097	17%		
Claims Denials	10,462	50,787	40,325	79%	59,821	, ,	241,146	80%		
Total Expenses	24,862,666	25,898,971	1,036,306	j 4%	148,772,549	153,720,972	4,948,423	3%		
Excess of Revenues over (under)										
Expenditures before Other Sources	(2,554,693) a	(6,041,696)	3,487,004		(20,946,974)	(23,808,134)	2,861,160			
Funds from other sources:										
Use of fund balance - CapEx	370,876	-	370,876		1,773,059	-	1,773,059			
Use of fund balance - COVID-19	-	-	-		982,500	-	982,500			
Fund Balance DSRIP	432,753	432,753	-		2,694,833	2,694,833	-			
Waiver 1115 Revenues	3,727,126	3,727,126	-		20,631,658	20,631,658	-			
DSRIP Transition	-	-	-		-	-	-			
COVID-19 FMAP Allocation	<u>-</u>	-	<u>-</u>		<u>-</u>	-	- 			
Insurance Proceeds Proceeds from Sale of Assets	3,704 -	-	3,704 -		10,324 -	-	10,324			
Evenes of Poyonups over (under)										
Excess of Revenues over (under) Expenditures after Other Sources	\$ 1,979,766	\$ (1,881,817)	\$ 3,861,584		\$ 5,145,400 ======	b \$ (481,643)	\$ 5,627,043			
	= =	===================================	=		=	=				

The Harris Center for Mental Health and IDD Comparative Balance Sheet As of February 28, 2022

		Ending I	Balanc	e	Incre	ase/(Decrease)	
	Ja	nuary 31, 2022		ruary 28, 2022		February	
Assets							
Cash and Cash Equivalents	\$	122,258,696	\$	108,090,727	\$	(14,167,969)	а
Inventory - includes RX		276,020		274,347		(1,673)	b
Prepaid Expenses		9,704,458		9,686,074		(18,384)	С
A/R Medicaid, Medicare, 3rd Party		11,998,162		14,453,261		2,455,099	
Less Bad Debt Reserve		(6,905,823)		(6,905,823)		2,100,000	
		, , , ,		,		(400.050)	
A/R Other		16,344,491		15,941,539		(402,952)	a
A/R DSRIP		9,021,801		14,180,182		5,158,381	
Total Current Assets		162,697,805		155,720,307		(6,977,498)	
Land		0.400.000		0.400.000			
Land		6,432,036		6,432,036		-	
Building		25,773,792		25,773,792		-	
Building Improvements		21,621,995		21,621,995		-	
Furniture and Fixtures		7,591,701		7,634,469		42,768	
Vehicles		1,569,768		1,569,768		· <u>-</u>	
Construction in Progress		17,475,804		17,846,681		370,877	
Total Property, Plant & Equipment		80,465,096		80,878,741		413,645	
Total Property, Plant & Equipment		60,465,096		00,070,741		413,045	
TOTAL ASSETS	\$	243,162,901	\$	236,599,048	\$	(6,563,853)	
Liabilities and Fund Balance							
Harris and the const	•	00 474 404	•	47 400 000	Φ.	(0.004.705)	
Unearned Income	\$	26,474,101	\$	17,139,366	\$	(9,334,735)	
Accrued Payroll and Accounts Payables		24,729,499		25,911,264		1,181,765	f
Current Portion Long Term Debt		-		-		-	
Total Current Liabilities		51,203,600		43,050,630		(8,152,970)	
State Escheatment Payable		41,354		41,270		(84)	
Total Non Current Liabilities		41,354		41,270		(84)	
Total Non Current Liabilities		41,334		41,270		(04)	
TOTAL LIABILITIES		51,244,954		43,091,900		(8,153,054)	
General Fund Balance		18,308,381		17,892,061		(416,320)	q
Nonspendable						, , ,	Ŭ
Investment in Inventories		276,020		274,347		(1,673)	
Investment In Fixed Assets		80,465,097		80,878,741		413,644	
mvodmont m i nod nodoto		00,400,007		00,070,741		410,044	
Assigned:							
Current Capital Projects		19,222,365		18,851,488		(370,877)	h
Future Purchases of Real Property and IT Infrastructure		1,365,842		1,365,842		` - ′	
Self Insurance		2,000,000		2,000,000		_	
ECI Building Use		361,664		361,664		_	
Waiver 1115		61,411,932		60,979,184		(432,748)	i
COVID-19 eFMAP Reserve						, , ,	•
Compensated Absences		486,658		904,067		417,409	
•		4,854,354		4,854,354		(200 505)	
Total		188,752,313		188,361,748		(390,565)	
Year to Date Excess Revenues over							
(under) Expenditures		3,165,634		5,145,400		1,979,766	
. ,		. ,		. ,			
TOTAL FUND BALANCE		191,917,947		193,507,148		1,589,201	
TOTAL LIABILITIES AND FUND BALANCE	\$	243,162,901	\$	236,599,048	\$	(6,563,853)	

- I. Comparison of Revenue and Expenses
 - a. For the month of February 2022, the sixth month of the fiscal year, the Harris Center is reporting excess Expenditures over Revenues of \$2,554,693.
 - b. The year-to-date amount translates to Excess Revenues over Expenditures of \$5,145,400 after use of fund balance, fund balance CapEx, fund balance DSRIP, Waiver 1115 revenues and insurance proceeds are considered.
 - c. State Grants are unfavorable to budget by \$368,559 due to timing of construction expenses related to the Healthy Community Grant.
 - d. Federal grants are favorable to budget by \$3,114,908 due to funding from several new federal block grants and ARPA grants. In addition MAC ADMIN Claiming funds were adjusted to recognize all MAC funds due to the Center.
 - e. Third Party Billings are favorable to budget by \$318,113.
 - f. Total Revenue is favorable to budget by \$2,450,698.
 - g. Salaries and Fringe Benefits are favorable to budget by \$104,338.
 - h. Equipment is favorable to budget by \$266,576 due to timing of expenses.
 - i. Building is unfavorable to budget by \$168,337 due to expenses for Board approved capital projects funded from reserves.
 - j. Total Expenses are favorable to budget by \$1,036,306.

II. Comparative Balance Sheet

a. Cash and Cash Equivalents - The Agency considers cash and cash equivalents to be cash on hand, demand deposit accounts and short term investments with maturities of less than ninety days. Cash and cash equivalents decreased from the prior month because of operations.

				Increase
	Ending	Bala	ance	(Decrease)
	1/31/2022		2/28/2022	February
Cash-General Fund Bank of America	\$ 7,238,807	\$	6,667,250	\$ (571,557)
Cash-General Fund Chase	52,295,412		37,963,609	(14,331,803)
Cash-BOA ACH Vendor	158,381		579,078	420,697
Cash-FSA-Discovery	208,445		217,166	8,721
Cash-Pharmacy Chase	-		112	112
Petty Cash	5,700		5,700	-
Investments-TexPool General Fund	1,001,743		1,001,791	48
Investments-TexPool Self Insurance	2,289,302		2,289,413	111
Investments-TexPool Prime	31,326,211		31,328,943	2,732
Investments-Texas Class	 27,734,695		28,037,665	302,970
	\$ 122,258,696	\$	108,090,727	\$ (14,167,969)

b. Inventory normally does not significantly change from month to month. The balance is normally updated annually at the time of the year end physical inventory. PAP/Drug samples are not included in inventory, as this inventory does not belong to the Center. Inventory consists of the following:

						Increase		
		Ending	Bala	ance	(Decrease)			
	1/31/2022 2/28/2022					February		
Inventory-Central Supplies	\$	28,052	\$	28,052	\$	-		
Supplies Used		(17,215)		(18,888)		(1,673)		
Inventory-Drugs		265,183		265,183		-		
Total Inventory	\$	276,020	\$	274,347	\$	(1,673)		

c. Prepaid Expenses decreased due to amortization of prepaid insurance and other prepaid items.

II. Comparative Balance Sheet (continued)

d. Accounts Receivable decreased in February.

			Increase		
	Ending	Balance	(Decrease)		
_	1/31/2022	2/28/2022	February		
Villas at Bayou Park	60,433	60,433	\$ -		
Pear Grove	39,937	39,937	-		
Pasadena Cottages	72,252	79,167	6,915		
Employee	-	-	-		
Pecan Village	4,401	4,401	-		
Acres Homes Garden	92,516	94,096	1,580		
General Accounts Receivable	1,142,233	1,142,233	-		
Pharmacy PBM	-	595	595		
Harris County Projects	737,926	855,113	117,186		
Harris County Juvenile Probation	757,383	449,237	(308,147)		
Harris County Community Supervision	685,124	541,220	(143,904)		
Harris County Sheriff's Department	2,638,028	2,798,200	160,172		
ICFMR	176,897	158,715	(18,182)		
TCOOMMI-Special Needs	578,106	751,025	172,919		
TDCJ-Parole	123,000	143,500	20,500		
TDCJ-Substance Abuse	67,851	84,518	16,667		
TCOOMMI-Juvenile	197,731	244,044	46,313		
Jail Diversion	2,357,077	1,695,297	(661,780)		
ECI	716,136	314,096	(402,041)		
ECI Respite	976	949	(28)		
ECI SNAP	19,184	18,196	(988)		
Federal CHH Navigation	101,961	181,403	79,441		
Federal Aot	61,312	119,296	57,984		
PATH-Mental Health Block Grant	107,042	231,129	124,087		
MH Block Grant-Coordinated Specialty Care	153,312	127,619	(25,693)		
DSHS SAPT Block Grant	108,243	227,953	119,710		
Enhanced Community Coordinator	94,471	97,177	2,705		
Subtotal, A/R-Other	\$ 11,093,535	\$ 10,459,548	\$ (633,987)		

II. Comparative Balance Sheet (continued)

d. Accounts Receivable Other (Continued)

				Increase
	Ending	Bala	ance	(Decrease)
	 1/31/2022		2/28/2022	February
DSHS Mental Heath First Aid	\$ 20,205	\$	25,482	\$ 5,277
HHSC ZEST-Zero Suicide	31,334		38,258	6,925
HCC Open Door	350,214		314,606	(35,607)
HCS	22,416		22,416	-
Tx Home Living Waiver	314,550		301,618	(12,933)
Federal DSHS Disaster Assistance	1,013,602		219,333	(794,268)
DPP-BHS	2,178,997		2,624,219	445,222
Helpline Contracts	229,391		247,881	18,490
City of Houston-CCSI	50,537		50,537	-
City of Houston-DMD	10,332		20,663	10,332
City of Houston-911 CCD Amended	28,183		60,079	31,897
A/R - HHSC Projects	994,496		1,548,998	554,502
Local TCDD C19 Vac Stipend	 6,700		7,900	1,200
Grand Total A/R - Other	\$ 16,344,491	\$	15,941,539	\$ (402,952)

- e. Unearned Income decreased due to expenditures of State General Revenue Funds.
- f. Accrued Payroll and Accounts Payable increased because of payment timing related to accounts payable, payroll, and employee fringe benefit liabilities.
- g. General Fund Balance decreased due to operations.
- h. Current Capital Projects decreased due to expenses related to Board approved Capex projects.
- i. Waiver 1115 Reserves decreased due to use of budgeted DSRIP reserves for operations.
- j. Days of Operations in Reserve for Total Agency is 149 days versus 150 days for the prior month.

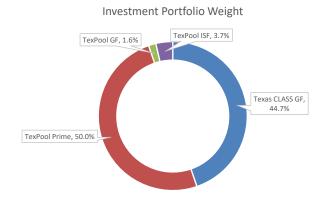
III. Investment Portfolio

- a. Total investments as of February 28, 2022 are \$62,657,813 of which 100% is in government pools. (Texas Class 45% and TexPool 55%)
- b. Investments this month yielded interest income of \$5,861.

The Harris Center for Mental Health and IDD Investment Portfolio February 28, 2022

Local Government Investment Pools (LGIPs)

	Begir	nning Balance	Transfer In	Transfer Out	Inter	est Income	Ending Value	Portfolio %	Yield
Texas CLASS Texas CLASS General Fund	\$	27,734,695	\$ 7,000,000	\$ (6,700,000)	\$	2,969	\$ 28,037,665	44.7%	0.097%
TexPool									
TexPool Prime		31,326,211	\$ -	\$ -		2,732	31,328,943	50.0%	0.098%
TexPool General Fund		1,001,743				49	1,001,791	1.6%	0.038%
TexPool Internal Service Fund		2,289,302				111	2,289,413	3.7%	0.038%
TexPool Sub-Total		34,617,256	-	-		2,892	34,620,148	55.3%	0.092%
Total Investments	\$	62,351,951	\$ 7,000,000	\$ (6,700,000)	\$	5,861	\$ 62,657,813	100%	0.094%



3 Month Weighted Average Maturity (Days)1.003 Month Weighted Average Yield of The Harris Center Investment Portfolio0.089%3 Month Rolling Weighted Average Daily Treasury Bill Rate (4 weeks)0.041%

This Investment Portfolio Report of The Harris Center for Mental Health and IDD as of February 28,2022 is in compliance with the Public Funds Investment Act (PFIA), Chapter 2256 of the Texas Government Code and the Investment Strategy approved by the Board of Trustees.

The Harris Center for Mental Health and IDD Monthly Report of Financial Transactions Related to Payments of Liabilities for Employee Benefits

Report for February 2022

Vendor	Description	Monthly Not-To- Exceed*	Feb-22	YTD Total Through February	
Lincoln Financial Group Retirement Funds (401a, 403b, 457)		\$2,400,000	\$1,758,910	\$9,394,639	
Blue Cross Blue Shield of TX	Health and Dental Insurance	\$2,600,000	\$1,850,142	\$4,123,533	

^{*} As established by the Board Resolution: Harris Center Board of Trustees Signature Authorization and Delegation Authority for Certain Items effective February 22, 2022.

Note: Non-employee portion of February payments of Liabilities for Employee Benefits = 10% of Expenditures.

EXHIBIT F-4

March 2022 NEW CONTRACTS OVER 50k

	CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE DESCRIPTION	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	FY22 NEW CONTRACTS								
	ADMINISTRATION								
1	Web-Hed Technologies, Inc. dba Webhead	Yes	Design and Develop a New Website		\$208,884.40	04/01/22- 03/31/23	GR	RFP	A Proposal Opening for The Harris Center Public Website was heldon Wednesday, February 2, 2022. Forty-three (43) vendors were contacted and advertisements were placed in four (4) local newspapers, The Harris Center's website, the State of Texas ESBD website, the Houston Minority Supplier Development Council and the Women's Business Enterprise Alliance. Eighteen (18) HUB vendors were located. Five (5) proposals were deemed responsive and evaluated by the Project Team. Three (3) Throsposals were deemed responsive and evaluated by the Project Team. Three (3) "Notice Not to Participate' were received. The vendors who submitted a responsive proposal are Red Laser Technology, Webhead and Indoop Beam. The Project Team consisted of the following members: Frances Otto, Buyer II, Sharon Brauner, Purchasing Manager, Karen Boren, Director of Communications, Jazmin Almanza, Communications and Publications Specialist, Anthrony Jones, Application Development Director and Michael Walker, Application Analyst II. Six (6) areas were evaluated: Latest Technology, Vendor Support, Methodologi/Approach, Overall Program and Cost. Demos were requested of all three responsive vendors and were held the week of February 14, 2022. The recommendation to design and develop a new veloalte, is awarded to Webhead. The initial contract period is anticipated to begin upon avarded of contract for one (1) base year with four (4) optional annual renewals at the sole discretion of The Harris Center, based upon satisfactory performance and annual budget approval. The Fiscal Year 2022 budget requested on an annual busist. The contract shall commence with a tentative commencement date, and shall remain in effect unless terminated, canceled or extended for a foundation of the Strip of t
	VVCDIICAG	163	vvebsite		\$200,004.40	04/01/22-03/31/23	GK	KEF	F120, 340,470,00
	CPEP/CRISIS SERVICES								
	FORENSICS								
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES								
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI								
	LEASES								
	MENTAL HEALTH SERVICES								



Award Recommendation REQUEST FOR PROPOSAL (RFP) THE HARRIS CENTER PUBLIC WEBSITE

A Proposal Opening for The Harris Center Public Website was held on Wednesday, February 2, 2022.

Forty-three (43) vendors were contacted and advertisements were placed in four (4) local newspapers, The Harris Center's website, the State of Texas ESBD website, the Houston Minority Supplier Development Council and the Women's Business Enterprise Alliance. Eighteen (18) HUB vendors were located. Five (5) proposals were received. Three (3) proposals were deemed responsive and evaluated by the project team. Three (3) "Notice Not to Participate" were received. The vendors who submitted a responsive proposal are Red Laser Technology, Webhead and Indigo Beam.

The Project Team consisted of the following members: Frances Otto, Buyer II, Sharon Brauner, Purchasing Manager, Karen Boren, Director of Communications, Jazmin Almanza, Communications and Publications Specialist, Anthony Jones, Application Development Director and Michael Walker, Application Analyst II.

Six (6) areas were evaluated: Latest Technology, Vendor Support, Methodology/Approach, Overall Program and Cost,

Demos were requested of all three responsive vendors and were held the week of February 14, 2022.

Based on the project team's evaluation of responses received, it is recommended to award Web-Hed Technologies, Inc. dba Webhead to design and develop a new website. This recommendation is based on the team's belief that Webhead is the greatest value to The Harris Center. Webhead is a HUB vendor.

The initial contract period is anticipated to begin upon award of contract for One (1) base years with four (4) optional annual renewals at the sole discretion of The Harris Center based upon satisfactory performance and annual budget appropriations, which will be reviewed on an annual basis. The contract shall commence with a tentative commencement date, and shall remain in effect unless terminated, canceled or extended. The first contract year will begin upon award of contract and end on August 31, 2022 subject to Fiscal Year budget approval.

The Fiscal Year 2022 budget requested is \$208,884.40, subject to the appropriation and availability of funds. The total NTE (Not to Exceed) requested for the five years is \$402,788.40, funded annually (breakdown below). The Funding Source is Information Technology (1147). The project accounting code is IT22.1147.01.

FY22 - \$208,884.40 (\$198,054.00 for Website and \$10,830.40 for Creative/Graphic Design for Mobile App) FY23 - \$48,476.00 (\$776.00 Widget Modules, \$200.00 Secure Certificate, \$36,000.00 Website Maintenance and

\$11,500.00 Search Engine Optimization) FY24 - \$48,476.00 FY25 - \$48,476.00

FY26 - \$48,476.00

Frances Otto Frances Otto Date: 2022,03,01

15:03:48 -06'00"

Frances Otto, CTCD Buyer II

Sharon

Digitally signed by Sharon

Brauner Dato: 2022.03.01 Brauner 15:25:34 -06'00'

Sharon Brauner, C.P.M., A.P.P.

Purchasing Manager Digitally signed by Sean

Min Date: 2022.03.01 Sean

Sean Kim, MBA, CPA Chief Financial Officer



Mental Health and IDD	
Contract Section	<u>^</u>
Somiati Section	A substitute of the substitute
Contractor*	
Web-hed Technologies, Inc. dba Webhead	
Contract ID #*	
N/A	
Presented To*	
Resource Committee	
Full Board	
5 5	
Date Presented*	
3/15/2022	
Parties* (?)	
WebHead and The Harris Center for Mental Health and	IDD
Agenda Item Submitted For:* (?)	
☐ Information Only (Total NTE Amount is Less than \$50	0,000,000
■ Board Approval (Total NTE Amount is \$50,000.00+)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	☐ Competitive Proposal
✓ Request for Proposal☐ Request for Application	☐ Sole Source☐ Request for Qualification
Request for Quote	Tag-On
Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	Other
- · · · · · · · ·	
Funding Information*	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
4/1/2022	3/31/2023
If contract is off-cycle, specify the contract term (?)	
One Year with four year option	
Fiscal Year* (?)	Amount*(?)
2022	\$ 208,884.40
Funding Source*	
General Revenue (GR)	

Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	✓ New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
□ BAA/DUA	☑ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Serv New Website design, hosting, and ongoing support and r	
Contract Owner*	
Mustafa Cochinwala	
	*
Previous History of Contracting with Vendor/Contract	tor"
○ Yes No ○ Unknown	
Vendor/Contractor a Historically Underutilized Busine	ess (HUB)* (?)
*	
Please provide the HUB status*	
MWBE - Minority or Women owned business enterprise.	
Community Partnership* (?)	
○ Yes ○ No ● Unknown	
Commention Beauty and the Holland Co.	
Supporting Documentation Upload (?)	
Vendor/Contractor Contact Person	
	medianata con di Trisse (di sun contra Marconat sua con con mandre (del acces di servico com combinado de contr
Name*	
Juanita Gonzalez	
Address*	
Street Address	
1710 North Main Avenue	
Address Line 2	
City	State / Province / Region
San Antonio	TX
Postal / Zip Code	
78212-3938	Country US
70212-3930	03
Phone Number*	
210-354-1661	
*	
Email*	
contracts@webheadtech.com	
Budget Section	⊙
Budget Section	©

Budget Unit Number* Amount Charged to Unit* Expense/GL Code No.* 1147 \$ 208,884.40 900060 **Budget Manager** Secondary Budget Manager Erica S. Brown Ricardo Campbell Provide Rate and Rate Descriptions if applicable * (?) New Website design, hosting, and ongoing support and maintenance = 208,884.40 Project WBS (Work Breakdown Structure)* (?) IT22.1147.01 THC External Web and Digital Platform Design Requester Name Submission Date 3/2/2022 Anthony Jones Budget Manager Approval(s) Approved by Approval Date Exica Brown 3/2/2022 Procurement Approval File Upload (?) Approved by Approval Date Sharon Brauner 3/2/2022 Contract Owner Approval Approved by Approval Date Mustafa Cochinwala 3/2/2022 Contracts Approval Approve* Yes No, reject entire submission Return for correction Approved by * Approval Date* Shaskyia Behn 3/2/2022

EXHIBIT F-5

March 2022 AMENDMENTS OVER 50k

SNAPSHOT SUMMARY CONTRACT AMENDMENTS \$50,000.00 AND MORE

CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE DESCRIPTION	PREVIOUS NTE AMOUNT	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
FY22/23 AMENDMENTS									
ADMINISTRATION									
Universal Protection Service, LP dba Allied 1 Universal Security Services	No	Agency Wide Security Guard Services	\$781,390.28	\$33,000.00	\$814,390.28	09/01/21- 08/31/22	GR	RFP	The purpose of this Amendment is to change the rates and to adjust budget for FY22. Rate changed for FY22, yet the budget was not adjusted. Two sites need to change their services hours and have increased their hours (Airline-10 extra hours per week from 40 to 50, and SE increased hours by 28- from 92 to 120. The Saturday Clinic Guard's work hours were adjusted to fulltime. Lastly, the Contract Owner needed to be updated.
Automated Logic Contracting Services, Inc.	No	Multi-Facility Building Automation System	\$629,705.00	\$111,000.00	\$740,705.00	06/01/21- 08/31/22	GR	RFP	Contract PO# CT141346 needs to be amended to include the FY22 amount of \$111,000.00 for maintenance, software and to add the 6160 S Loop East mechanical electrical upgrades. The contract was amended Nov 2021 to reflect the date of the contract being extended to 08/31/22, but did not reflect adding the FY22 amount to the PO for the amendment change. This request will make the TOTAL FY22 NTE \$740,705.00 for Capital Project FM21.1126.21.
3 Centre Technologies, Inc.	No	Microsoft Office 365 Subscription	\$400,000.00	\$75,000.00	\$475,000.00	09/01/21- 08/31/22	GR	Sole Source	This Amendment is to add to existing contract for Microsoft Cloud App Security License. The Cloud Application license provides fully integrated visibility, oversight, security, and governance of Microsoft 365 apps to prevent and remediate risky or inappropriate app behavior.
									This Amendment is to increase allocation to existing PO to fulfill contract payments due to Consumer needs that have exceeded the initial \$300,000 allocation for
IRIS Telehealth Medical Group,PA	No	Telepsychiatry Services	\$300,000.00	\$350,000.00	\$650,000.00	03/17/21-03/16/23	GR	Consumer Driven	telepsychiatry services.
Kronos Incorporated	No	Document Management	\$327,619.19	\$137,250.00	\$464,869.19	04/01/22-03/31/23	GR	Project #IT21.1147.08 =HRIS	Document Manager replaces the tedious Knowledge Lake process of having to scan, save, and upload documents to Kronos (manual front desk). The documents can be uploaded directedly into WFD using Document Manager in an efficient, seamless process that produces an integrated employee record. People Assist is employee case management for HR (investigation tracking, analytics, and reporting); connects via the employee portal and provides HR information, Q&A.
S Kronos Incorporated	No	User Adoption Consultant	\$464,869.19	\$2,400.00	\$467,269.19	04/01/22- 03/31/23	GR	Project #IT21.1147.08 =HRIS	This Amendment is having end users adopt and use UKG DimensionsTM is a key outcome of a successful implementation. The UKG User Adoption Consultant, a Prosci Certified Change Practitioner, will help the agencyassess and plan for a change strategy that captures the people side of our UKG Dimensions solution.
Master Pool-HR Recruitment Placement &	117	Agency-Wide Recruitment Permanent Placement and		32,					This Amendment is to increase funds to meet the current financial obligations to our recruitment vendors and also, the additional funding will allow for the
7 Temporary Employment	No	Temporary Staffing	\$178,800.00	\$146,000.00	\$324,800.00	09/01/21- 08/31/22	GR	Tag-On	continued support of the Agency's manpower needs. This Amendment is to increase the NTE to cover
McKesson Corporation	No	Agency Wide Medical Supplies	\$315,953.00	\$23,170.00	\$339,123.00	09/01/21- 08/31/22	GR	Competitive Bid	medical equipment/surgical supplies through August 31, 2021 billing cycle.
CPEP/CRISIS SERVICES									
OF EFICIOIS SERVICES									



Mental Health and IDD	
0.121-1.02-1.	
Contract Section	
Contractor* Universal Protection Service, LP dba Allied Universal Service	ecurity Services
Contract ID #* 7798	
Presented To* Resource Committee Full Board	
Date Presented* 3/15/2022	
Parties* (?)	
The Harris Center and Universal Protection Service, LP	dba Allied Universal Security Services
Agenda Item Submitted For:* (?) Information Only (Total NTE Amount is Less than \$5 Board Approval (Total NTE Amount is \$50,000.00+) Grant Proposal Revenue Other	0,000.00)
Procurement Method(s)*	
Check all that Apply	
☐ Competitive Bid	☐ Competitive Proposal
✓ Request for Proposal	Sole Source
Request for Application Request for Quote	Request for Qualification Tag-On
☐ Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	Other
Funding Information*	
New Contract Amendment	
Contract Term Start Date * (?) 9/1/2021	Contract Term End Date* (?) 8/31/2022
If contract is off-cycle, specify the contract term (?)	6/31/2022
Current Contract Amount* \$ 781,390.28	
Increase Not to Exceed* \$ 33,000.00	
Revised Total Not to Exceed (NTE)* \$ 814,390.28	

Fiscal Year* (?)	Amount* (?)		
2022	\$ 814,390.28		
Funding Source*			
General Revenue (GR)			
Contract Description / Type * (?)			
	Consultant		
Personal/Professional Services Consumer Driven Contract	Consultant New Contract/Agreement		
Memorandum of Understanding	✓ Amendment to Existing Contract		
Affiliation or Preceptor	Service/Maintenance		
BAA/DUA	☐ IT/Software License Agreement		
Pooled Contract	Lease		
Renewal of Existing Contract	Other		
	the state of the s		
Justification/Purpose of Contract/Description of Ser			
The purpose of this amendment is to add 6160 South Lo	the same to the same that the same the same to the same the same to the same t		
was budget for but not added to contract in last amenda budget was not adjusted. Two sites need to change thei	The state of the s		
increased their hours (Airline - 10 extra hours per week	A CONTRACTOR OF THE CONTRACTOR		
hours by 28 - from 92 to 120 Sat. clinic guard went ful	Il time). Last, to update contract		
owner.			
Contract Owner*			
Anthony Robinson			
Previous History of Contracting with Vendor/Contra	ctor*		
Yes No • Unknown			

Vendor/Contractor a Historically Underutilized Busin	ness (HUB) * (?)		
○ Yes ○ No ⊚ Unknown			
Community Partnership* (?)			
Supporting Documentation Upload (?)			
FY22 Amendment.xlsx	87.44KB		
Vendor/Contractor Contact Person	Ć.		
Name*			
Don Massey			
Address*			
Street Address			
1776 Woodstead Court Ste 224			
Address Line 2			
City	State / Province / Region		
The Woodlands	TX		
Postal / Zip Code	Country		
77380	USA		
Phone Number*			
281-725-8623			

Budget Section



Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*

Amount Charged to Unit*

Expense/GL Code No.*

1808

\$ 728.96

583000

Budget Manager

Secondary Budget Manager

Brown, Erica

Campbell, Ricardo

Budget Unit Number*

Amount Charged to Unit*

Expense/GL Code No.*

1809

\$ 1,436.16

583000

Budget Manager

Secondary Budget Manager

Brown, Erica

Campbell, Ricardo

Budget Unit Number*

Amount Charged to Unit*

Expense/GL Code No.*

1814

\$ 870.40

583000

Budget Manager

Brown, Erica

Secondary Budget Manager

Campbell, Ricardo

Budget Unit Number*

Amount Charged to Unit*

Expense/GL Code No.*

1820

\$ 1,827.84

583000 Secondary Budget Manager

Budget Manager

Campbell, Ricardo

Brown, Erica

Amount Charged to Unit*

Expense/GL Code No.*

1849

\$ 5,843.20

583000

Budget Manager

Secondary Budget Manager

Brown, Erica

Campbell, Ricardo

Budget Unit Number*

Budget Unit Number*

Amount Charged to Unit*

Expense/GL Code No.*

1858

\$ 16,143.36

583000

Budget Manager

Secondary Budget Manager

Brown, Erica

Campbell, Ricardo

Budget Unit Number*

Amount Charged to Unit*

Expense/GL Code No.*

1869

\$ 2,263.04

583000

Budget Manager

Brown, Erica

Secondary Budget Manager

Campbell, Ricardo

Budget Unit Number*

Amount Charged to Unit*

Expense/GL Code No.*

1817

\$ 3,887.04

583000

Budget Manager

Secondary Budget Manager

Brown, Erica

Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable * (?)

FY22 Flat Rate \$16.90 for security services

Project WBS (Work Breakdown Structure)* (?)	
Requester Name	Submission Date
MACKINNEY, EGGLA	12/17/2021
Budget Manager Approval(s)	0
Approved by	
	Approval Date
Enica Brown	2/4/2022
Procurement Approval	
File Upload (?)	
Approved by	Approval Date
Sign	
Contract Owner Approval	6
Approved by	
A	Approval Date
11-	2/4/2022
Contracts Approval	
Approve*	
Yes No, reject entire submission	
Return for correction	
Approved by *	
Class P.	Approval Date*
Shaskyia Behu	2/7/2022



MARRIS Executive Contract Summa

Mental Health and IDD	
Contract Section	
Contractor*	
Automated Logic Contracting Services, Inc.	
Contract ID #*	
2021-0124	
Presented To*	
Resource Committee Full Board	
Date Presented * 3/15/2022	
Parties* (?)	
Automated Logic and The Harris Center	
Agenda Item Submitted For:* (?)	
☐ Information Only (Total NTE Amount is Less than \$50	0,000.00)
✓ Board Approval (Total NTE Amount is \$50,000.00+)	
Grant Proposal	
Revenue	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	Competitive Proposal
Request for Proposal	Sole Source
Request for Application Request for Quote	Request for Qualification
Interlocal	☐ Tag-On ☐ Consumer Driven
Not Applicable (If there are no funds required)	Other
Funding Information*	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
6/1/2021	8/31/2022
If contract is off-cycle, specify the contract term (?)	
Current Contract Amount*	
\$ 629,705.00	
Increase Not to Exceed*	
\$ 111,000.00	
Revised Total Not to Exceed (NTE)*	
\$ 740,705.00	

Fiscal Year* (?)	Amount* (?)
2022	\$ 740,705.00
Funding Source*	
General Revenue (GR)	
Control Description (T. 11.2)	
Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract Memorandum of Understanding	New Contract/Agreement
 ✓ Memorandum of Understanding ✓ Affiliation or Preceptor 	✓ Amendment to Existing Contract ✓ Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Servi	ices Being Provided* (?)
Contract PO# CT141346 needs to be amended to include	the FY22 amount of \$111,000.00
for maintenance, software and to add the 6160 S Loop Ea	
upgrades. The contract was amended Nov 2021 to reflect extended to 8/31/2022, but did not reflect adding the FY2:	•
amendment change. This request will make the TOTAL F	
capital project FM21.1126.21.	
Contract Owner*	
Todd McCorquodale	
Previous History of Contracting with Vendor/Contract	tor*
Yes No Unknown	
Please add previous contract dates and what services	s were provided *
6/1/2021 to present	s were provided
o/1/2021 to present	
Vendor/Contractor a Historically Underutilized Busine	ess (HUB)* (?)
○ Yes No ○ Unknown	
Please provide an explanation*	
does not meet criteria	
Community Partnership * (?)	
○ Yes ○ No ○ Unknown	
Supporting Documentation Upload (?)	
ALC BAS Proposal - 6160 S. Loop E - Mech Elec Upgrad	es v1
(002).pdf	162.8KB
CT141346 highlighted.pdf	625.48KB
Transa mgmgmca.pu	020.4000
Vendor/Contractor Contact Person	(A)
Name*	
Automated Logic / Karl Henson	

Address*		
Street Address		
290 Beltway Green Boulevard, Ste. 6	00	
Address Line 2		
City	State / Province / Region	
Pasadena	TX	
Postal / Zip Code	Country	
77503	US	
Phone Number*		
2818242168		
Email*		
karl.henson@carrier.com		
Budget Section		
Budget Units and Amounts	s Charged to each Budget U	nit
	to provide the control of the state of the s	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1126	\$ 111,000.00	900040
Budget Manager	Secondary Budge	t Manager
Erica S. Brown	Ricardo Campbell	t manager
Liica S. Diowii	Ricardo Campbell	
Provide Rate and Rate Descriptions		
Provide Rate and Rate Descriptions see original contract and attached do		
	cumentation	
see original contract and attached do	cumentation	
see original contract and attached do Project WBS (Work Breakdown Str FM22.1126.02	cumentation ucture) * (?)	
see original contract and attached do Project WBS (Work Breakdown Str FM22.1126.02 Requester Name	cumentation ucture) * (?) Submission Date	
see original contract and attached do Project WBS (Work Breakdown Str FM22.1126.02	cumentation ucture) * (?)	
see original contract and attached do Project WBS (Work Breakdown Str FM22.1126.02 Requester Name Sarah A. Harper	cumentation ucture) * (?) Submission Date 2/18/2022	
see original contract and attached do Project WBS (Work Breakdown Str FM22.1126.02 Requester Name	cumentation ucture) * (?) Submission Date 2/18/2022	
see original contract and attached do Project WBS (Work Breakdown Str FM22.1126.02 Requester Name Sarah A. Harper	cumentation ucture) * (?) Submission Date 2/18/2022	0
see original contract and attached door Project WBS (Work Breakdown Str. FM22.1126.02 Requester Name Sarah A. Harper Budget Manager Approval	cumentation ucture) * (?) Submission Date 2/18/2022	
see original contract and attached door Project WBS (Work Breakdown Str. FM22.1126.02 Requester Name Sarah A. Harper Budget Manager Approval	Submission Date 2/18/2022	
see original contract and attached door Project WBS (Work Breakdown Str. FM22.1126.02 Requester Name Sarah A. Harper Budget Manager Approval	Submission Date 2/18/2022 (S) Approval Date	0
see original contract and attached door Project WBS (Work Breakdown Str. FM22.1126.02 Requester Name Sarah A. Harper Budget Manager Approval	Submission Date 2/18/2022 (S) Approval Date	
see original contract and attached don Project WBS (Work Breakdown Str FM22.1126.02 Requester Name Sarah A. Harper Budget Manager Approval Approved by Ekica Bhom	Submission Date 2/18/2022 (S) Approval Date	
see original contract and attached don Project WBS (Work Breakdown Str FM22.1126.02 Requester Name Sarah A. Harper Budget Manager Approval Approved by Ekica Bhom	Submission Date 2/18/2022 (S) Approval Date	⊙
See original contract and attached don Project WBS (Work Breakdown Str FM22.1126.02 Requester Name Sarah A. Harper Budget Manager Approval Approved by Exica burn Procurement Approval	Submission Date 2/18/2022 (S) Approval Date	♠
see original contract and attached door Project WBS (Work Breakdown Str. FM22.1126.02 Requester Name Sarah A. Harper Budget Manager Approval Approved by Ekica Bhown Procurement Approval	Submission Date 2/18/2022 (S) Approval Date 2/18/2022	♠
see original contract and attached don Project WBS (Work Breakdown Str FM22.1126.02 Requester Name Sarah A. Harper Budget Manager Approval Approved by Ekica Bhook Procurement Approval File Upload (?)	Submission Date 2/18/2022 (S) Approval Date	
see original contract and attached door Project WBS (Work Breakdown Str. FM22.1126.02 Requester Name Sarah A. Harper Budget Manager Approval Approved by Ekica Bhown Procurement Approval	Submission Date 2/18/2022 (S) Approval Date 2/18/2022	
see original contract and attached don Project WBS (Work Breakdown Str FM22.1126.02 Requester Name Sarah A. Harper Budget Manager Approval Approved by fhica blum Procurement Approval File Upload (?) Approved by Sign	Submission Date 2/18/2022 (S) Approval Date 2/18/2022	
see original contract and attached don Project WBS (Work Breakdown Str FM22.1126.02 Requester Name Sarah A. Harper Budget Manager Approval Approved by Ekica Bhook Procurement Approval File Upload (?)	Submission Date 2/18/2022 (S) Approval Date 2/18/2022	

Approved by	Approval Date	
Todd McCorquedate	2/18/2022	
Contracts Approval		
Approve*		
Yes		
 No, reject entire submission 		
 Return for correction 		
Approved by *		
	Approval Date*	



HARRIS Executive Contract Summary

Mental Health and IDD	
Contract Section	<u> </u>
Contractor*	
Centre Technologies	
Contract ID #*	
7710	
Presented To*	
Resource Committee Full Board	
Date Presented*	
3/15/2022	
Parties* (?)	
Centre Technologies and The Harris Center	
Agenda Item Submitted For: * (?)	000.003
 Information Only (Total NTE Amount is Less than \$50, ✓ Board Approval (Total NTE Amount is \$50,000.00+) 	000.00)
Grant Proposal	
Revenue	
Other	
The same of the sa	
Procurement Method(s)*	
Check all that Apply	Commetitive Decreed
Competitive Bid Request for Proposal	☐ Competitive Proposal☑ Sole Source
Request for Application	Request for Qualification
Request for Quote	☐ Tag-On
Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	Other
Funding Information*	
New Contract Amendment	
Contract Term Start Date * (?)	Contract Term End Date * (?)
9/1/2021	8/31/2022
If contract is off-cycle, specify the contract term (?)	
Current Contract Amount*	
\$ 400,000.00	
Increase Not to Exceed*	
\$ 75,000.00	
Revised Total Not to Exceed (NTE)*	
\$ 475,000.00	

Fiscal Year* (?)	Amount* (?)	
2022	\$ 75,000.00	
Funding Source*		
General Revenue (GR)		
Contract Description / Type* (?)		
Personal/Professional Services	Consultant	
Consumer Driven Contract	New Contract/Agreement	
Memorandum of Understanding	Amendment to Existing Contract	
☐ Affiliation or Preceptor ☐ BAA/DUA	Service/Maintenance	
Pooled Contract	☐ IT/Software License Agreement ☐ Lease	
Renewal of Existing Contract	Other	
_ romand		
Justification/Purpose of Contract/Description of Serv	rices Being Provided* (?)	
Amend contract CT141438		
Microsoft Cloud App Security License - Cloud Application visibility, oversight, security, and governance of Microsoft remediate risky or inappropriate app behavior.	- 180 Sec. 18 (1907) 1908 1908 1908 1908 1908 1908 1908 1909	
Contract Owner*		
Mustafa Cochinwala		
Previous History of Contracting with Vendor/Contrac	tor*	
Please add previous contract dates and what service FY 2011 - Current Consulting Services Hardware Maintenance/Support O365 License Management	s were provided*	
Vendor/Contractor a Historically Underutilized Busine	ess (HUB)* (?)	
○ Yes No ○ Unknown		
Please provide an explanation* They used to be, but with growth and additional investors they had to change type of ownership	i,	
Community Partnership * (?)		
○ Yes ● No ∪ Unknown		
Supporting Documentation Upload (?)		
Vendor/Contractor Contact Person	•	
Name *		
Centre Technologies		

Address*		
Street Address		
16801 Greenspoint Park Drive		
Address Line 2		
Suite 200	0.1.15	
City	State / Province / Reg	lion
	TX	
Postal / Zip Code 77060-2303	Country US	
77000-2303	03	
Phone Number*		
281-506-2480		
Email*		
JSchanbachler@centretechnologies	s com	
	5.55111	
Budget Section		
Budget Units and Amoun	its Charged to each Budget	Unit
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1147	\$ 75,000.00	900020
Budget Manager	Secondary Bud	get Manager
Erica S. Brown	Ricardo Campbe	ell
Provide Rate and Rate Description \$4.00 per user per month Project WBS (Work Breakdown S IT21_1147_01 - \$33,000.00 IT21_1147_04 - \$42,000.00		
Requester Name	Submission Da	te
Richard B. Hurst	2/17/2022	
Budget Manager Approve	al(s)	<u> </u>
Approved by		
	Approval Date	
Exica Brown	2/18/2022	
Procurement Approval		<u> </u>
File Upload (?)		
rile Opioad (?)		
	Annual Dete	
Approved by	Approval Date	
	Approval Date	

Approved by	
	Approval Date
Mustafa Cochinwala	2/18/2022
Contracts Approval	
Approve*	
Yes	
 No, reject entire submission 	
 Return for correction 	
Approved by *	
	Approval Date*
Shaskyia Behn	2/18/2022



HARRIS Executive Contract Summary

Mental Health and IDD	
Contract Section	
Contractor* IRIS Telehealth Contract ID #* 2021-0079	
Presented To * ● Resource Committee ☐ Full Board	
Date Presented* 3/15/2022	
Parties* (?) IRIS Telehealth and The Harris Center for Mental Health	and IDD Services
Agenda Item Submitted For: * (?) ☐ Information Only (Total NTE Amount is Less than \$50 ☑ Board Approval (Total NTE Amount is \$50,000.00+) ☐ Grant Proposal ☐ Revenue ☐ Other	0,000.00)
Procurement Method(s)*	
Check all that Apply Competitive Bid Request for Proposal Request for Application Request for Quote Interlocal Not Applicable (If there are no funds required)	 □ Competitive Proposal □ Sole Source □ Request for Qualification □ Tag-On ✓ Consumer Driven ✓ Other Increase Allocation
Funding Information* New Contract Amendment	
Contract Term Start Date * (?) 3/17/2021	Contract Term End Date * (?) 3/16/2023
If contract is off-cycle, specify the contract term (?)	
Current Contract Amount* \$ 300,000.00	
Increase Not to Exceed* \$ 350,000.00	
Revised Total Not to Exceed (NTE)* \$ 650,000.00	

Fiscal Year* (?)	Amount* (?)	
2022	\$ 650,000.00	
	A second	
Funding Source*		
General Revenue (GR)		
Contract Description / Type* (?)		
Personal/Professional Services	Consultant	
Consumer Driven Contract	New Contract/Agreement	
Memorandum of Understanding	Amendment to Existing Contract	
Affiliation or Preceptor	Service/Maintenance	
☐ BAA/DUA	☐ IT/Software License Agreement	
☐ Pooled Contract	Lease	
Renewal of Existing Contract	Other	
Justification/Purpose of Contract/Description of Serv	rices Being Provided* (?)	
Consumer needs have exceed initial \$300,000 allocation		
adding \$350,000 to existing PO to fulfill contract paymen	ts.	
Contract Owner*		
Keena Pace		
Previous History of Contracting with Vendor/Contrac	tor*	
Yes ○ No ○ Unknown		
Please add previous contract dates and what services were provided*		
FY22 funding term:		
09-01-21 to 08-31-22		
Vendor/Contractor a Historically Underutilized Business (HUB) * (?)		
○ Yes ○ No ● Unknown		
Community Partnership* (?)		
○ Yes No ○ Unknown		
Supporting Documentation Upload (?)		
Vendor/Contractor Contact Person	<u> </u>	
Name*		
Eric Prickett, Clinical Partnership Director		
Address*		
Street Address		
7400 West 130th Street		
Address Line 2		
City	State / Province / Region	
Overland Park	KS	
Postal / Zip Code	Country	
66213-2715	US	
*		
Phone Number*		
913 905 3844		

Email* eric.prickett@irishealth.com **Budget Section** Budget Units and Amounts Charged to each Budget Unit **Budget Unit Number*** Amount Charged to Unit* Expense/GL Code No.* 2200 \$ 350,000.00 5403045 **Budget Manager** Secondary Budget Manager Debbie C. Shelby Angelica D. Loera Provide Rate and Rate Descriptions if applicable * (?) \$195.00 to \$215.00/hour - 40 hours/week Project WBS (Work Breakdown Structure)* (?) Two Psychiatrists - Adult Outpatient Program Requester Name **Submission Date** Debbie C. Shelby 2/18/2022 Budget Manager Approval(s) Approved by Approval Date Debbie Chambers Shelby 2/18/2022 Contract Owner Approval Approved by Approval Date 2/22/2022 Contracts Approval Approve* Yes No, reject entire submission Return for correction Approved by * Approval Date* Shaskyia Behn 2/23/2022



Mental Health and IDD	
Contract Section	
Contractor* Ultimate Kronos Group	
Contract ID #* 6685	
Presented To* ⊚ Resource Committee ⊙ Full Board	
Date Presented* 3/15/2022	
Parties* (?)	
Ultimate Kronos Group and The Harris Center for Mental	Health and IDD
Agenda Item Submitted For: * (?) ☐ Information Only (Total NTE Amount is Less than \$50, ☐ Board Approval (Total NTE Amount is \$50,000.00+) ☐ Grant Proposal ☐ Revenue ☐ Other	000.00)
Procurement Method(s)*	
Check all that Apply Competitive Bid Request for Proposal Request for Application Request for Quote Interlocal Not Applicable (If there are no funds required)	 Competitive Proposal Sole Source Request for Qualification ✓ Tag-On Consumer Driven Other
Funding Information * New Contract Amendment	
Contract Term Start Date* (?) 4/1/2022	Contract Term End Date * (?) 3/31/2023
If contract is off-cycle, specify the contract term (?) One Year with three year option	
Current Contract Amount* \$ 327,619.19	
Increase Not to Exceed* \$ 137,250.00	
Revised Total Not to Exceed (NTE)* \$ 464,869.19	

Fiscal Year* (?)	Amount* (?)		
2022	\$ 48,750.00		
Fiscal Year* (?)	Amount* (?)		
2023	\$ 88,500.00		
Funding Source*			
General Revenue (GR)			
Contract Description / Type * (?)			
✓ Personal/Professional Services	☐ Consultant		
Consumer Driven Contract	New Contract/Agreement		
Memorandum of Understanding	Amendment to Existing Contract		
Affiliation or Preceptor	Service/Maintenance		
BAA/DUA	☑ IT/Software License Agreement		
Pooled Contract	Lease		
Renewal of Existing Contract	Other		
Instification/Dumana of Comband/Danaginting	of Comises Dainy Durvided* (2)		
Justification/Purpose of Contract/Description			
Document Manager replaces the tedious Knowle			
and upload documents to Kronos (manual front d			
directedly into WFD using Document Manager in produces an integrated employee record.	an emcient, seamless process that		
produces an integrated employee record.			
People Assist is employee case management for	HR (investigation tracking, analytics, and		
reporting); connects via the employee portal and provides HR information, Q&A.			
Contract Owner*			
Mustafa Cochinwala			
Previous History of Contracting with Vendor/0	Contractor*		
William Committee Committe	Solitactor		
Yes No Unknown			
Please add previous contract dates and what	services were provided*		
9/1/2022 - 8/31/2023			
Vendor/Contractor a Historically Underutilized	d Business (HUB)* (?)		
○ Yes ○ No ⊚ Unknown			
Community Partnership * (?)	· ·		
○ Yes No ○ Unknown			
Supporting Documentation Upload (?)			
The Harris Center for Mental Health and IDD - Hi			
UKG RL.docx	90.49KB		
Vendor/Contractor Contact Person			
Name*			
Denise Gellerman			

Address*

Street Address

900 Chelmsford St

Address Line 2

City

State / Province / Region

Lowell
Postal / Zip Code

MA Country

01851

United States

Phone Number*

2064510583

Email*

denise.gellerman@ukg.com

Budget Section



Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*

Amount Charged to Unit*

Expense/GL Code No.*

1147

\$ 9.000.00

900022

Budget Manager

Secondary Budget Manager

Brown, Erica

Campbell, Ricardo

Budget Unit Number*

Amount Charged to Unit*

Expense/GL Code No.*

1147

\$ 128,250.00

900021

Budget Manager

Brown, Erica

Secondary Budget Manager

Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable * (?)

Year 1 – USD88,500.00(USD79,500.00 for Subscription Fee costs plus USD 9,000.00 for the Launch Services Fee as set forth herein).

Year 2 - USD88,500.00

Project WBS (Work Breakdown Structure)* (?)

IT21.1147.08 HRIS

Requester Name

Submission Date

Jones, Anthony

2/8/2022

Budget Manager Approval(s)



Approved by

Approval Date

Exica Brown

2/8/2022

Procurement Approval



File Upload (?)

Approved by	Approval Date	
Sign		
Contract Owner Approval		۵
Approved by		
	Approval Date	
Mustafa Cochinwala	2/8/2022	
Contracts Approval		
Approve*		
Yes		
 No, reject entire submission 		
 Return for correction 		
Approved by *		
	Approval Date*	
Shaskyia Behn	2/10/2022	



мены пеані ані ПЛУ	
Contract Section	
Contractor* Ultimate Kronos Group	
Contract ID #*	
6685	
Presented To*	
Resource Committee Full Board	
Date Presented*	
3/15/2022	
Parties*(?)	11-1111177
Ultimate Kronos Group and The Harris Center for Mental	Health and IDD
Agenda Item Submitted For: * (?)	
Information Only (Total NTE Amount is Less than \$50	,000.00)
Board Approval (Total NTE Amount is \$50,000.00+) Grant Bronnel	
Grant Proposal Revenue	
Other	
121	
Procurement Method(s)*	
Check all that Apply	0.00
Competitive Bid Request for Proposal	☐ Competitive Proposal ☐ Sole Source
Request for Proposal Request for Application	Request for Qualification
Request for Quote	✓ Tag-On
☐ Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	Other
Funding Information*	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
9/1/2021	8/31/2022
If contract is off-cycle, specify the contract term (?)	
Current Contract Amount*	
\$ 464,869.19	
Increase Not to Exceed*	
\$ 2,400.00	
Revised Total Not to Exceed (NTE)*	
\$ 467,269.19	

Fiscal Year* (?)	Amount* (?)	
2022	\$ 2,400.00	
Funding Source*		
General Revenue (GR)		
Contract Description / Type * (?)		
Personal/Professional Services	Consultant	
Consumer Driven Contract	New Contract/Agreement	
Memorandum of Understanding	Amendment to Existing Contract	
Affiliation or Preceptor	Service/Maintenance	
BAA/DUA	☐ IT/Software License Agreement	
Pooled Contract	Lease	
Renewal of Existing Contract	Other	
Justification/Purpose of Contract/Description of Se	ervices Being Provided * (?)	
Having end users adopt and use UKG DimensionsTM		
implementation. The UKG User Adoption Consultant, a		
Practitioner, will help the agency assess and plan for a	change strategy that captures the	
people side of our UKG Dimensions solution.		
Contract Owner*		
Mustafa Cochinwala		
	4	
Previous History of Contracting with Vendor/Contra	actor*	
Vendor/Contractor a Historically Underutilized Bus	iness (HUB)* (?)	
○ Yes ○ No ② Unknown		
Tes O NO 9 OIRHOWII		
Community Partnership* (?)		
Yes No Unknown		
Supporting Documentation Upload (?)		
Dimensions User Adoption Assessment Overview.pdf	248.66KB	
Differsions user Adoption Assessment Overview.pdf	240.00NB	
Vendor/Contractor Contact Person		
veridon contractor contact i craon	and the second control of the contro	
Name*		
Denise Gellerman		
Address*		
Street Address		
900 Chelmsford St		
Address Line 2		
City	State / Province / Region	
Lowell	MA	
Postal / Zip Code	Country	
01851	United States	
Phone Number*		
12064510583		
Email*		
denise.gellerman@ukg.com		

Budget Section Budget Units and Amounts Charged to each Budget Unit Budget Unit Number* Amount Charged to Unit* Expense/GL Code No.* 1147 \$ 2,400.00 900060 **Budget Manager** Secondary Budget Manager Erica S. Brown Ricardo Campbell Provide Rate and Rate Descriptions if applicable * (?) Fixed price: \$2,400 per User Adoption Assessment Part number: 9990057-EDU Project WBS (Work Breakdown Structure)* (?) IT21.1147.08 = HRIS Requester Name **Submission Date** Anthony Jones 2/21/2022 Budget Manager Approval(s) Approved by Approval Date Exica Brown 2/22/2022 Procurement Approval File Upload (?) Approved by Approval Date Sign Contract Owner Approval Approved by Approval Date Mustafa Cochinwala 2/22/2022 Contracts Approval Approve* Yes No, reject entire submission Return for correction Approved by * Approval Date* Shaskyia Behn 2/23/2022

HARRIS CENTER 10

Contract Section	
Contractor*	
P-Recruitment	
Contract ID #* 2021-0224	
Presented To * Resource Committee Full Board	
Date Presented* 3/15/2022	
Parties* (?)	
The Harris Center and New Master Pool (HR Recruitment and Placement Services)	
Agenda Item Submitted For: * (?) Information Only (Total NTE Amount is Less than \$50 Board Approval (Total NTE Amount is \$50,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment#	,000.00)
✓ Other Contract Amendment	
Procurement Method(s)*	
Competitive Bid Request for Proposal Request for Application Request for Quote Interlocal Not Applicable (If there are no funds required)	Competitive Proposal Sole Source Request for Qualification Tag-On Consumer Driven Other
Funding Information * New Contract Amendment	
Contract Term Start Date * (?) 9/1/2021	Contract Term End Date* (?) 8/31/2022
If contract is off-cycle, specify the contract term (?)	
Current Contract Amount* \$ 178,800.00	
Increase Not to Exceed* \$ 146,000.00	

Revised Total Not to Exceed (NTE)*	
\$ 324,800.00	
	*
Fiscal Year* (?)	Amount* (?)
2022	\$ 324,800.00
Funding Sausa*	
Funding Source*	
General Revenue (GR)	
Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	 Amendment to Existing Contract
Affiliation or Preceptor	☐ Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Ser	rvices Being Provided* (?)
Vendors provide recruitment permanent placement and	
The increase funding is to meet the current financial obl	CONTROL CONTROL OF THE STATE OF
Also, the additional funding will allow for the continued s	
needs.	
Contract Owner*	
Lesleigh Robertson	
Previous History of Contracting with Vendor/Contracting	ctor*
Yes No Unknown	
Vendor/Contractor a Historically Underutilized Busin	ness (HUB)* (?)
Yes No • Unknown	
Community Partnership * (?)	
Yes No Unknown	
Supporting Documentation Upload (?)	
Vendor/Contractor Contact Person	
Name*	
P-Recruitment Pooled Services	
r-Necralitient Pooled Services	
Address*	
n/a	
n/a	
n/a	n/a
n/a	n/a

Phone Number*		
n/a		
Email*		
AP@TheHarrisCenter.org		
Budget Section		\circ
Budget Units and Amounts	Charged to each Budg	et Unit
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1101	\$ 146,000.00	592000
Budget Manager		Budget Manager
Erica S. Brown	Ricardo Can	npbell
Provide Rate and Rate Descriptions if applicable * (?)		
Project WBS (Work Breakdown Stru	ucture)* (?)	
n/a		
Requester Name	Submission	Date
Veronica A. Franco	2/25/2022)
Budget Manager Approval	(s)	
Approved by		
	Approval Da	ate
Ehica Bhown	2/28/2022	
Procurement Approval		
File Upload (?)		
Approved by Sign	Approval Da	ate
Contract Owner Approval		•
Approved by		
	Approval Da	ate
Lesleigh Robertson	3/1/2022	
Contracts Approval		
Approve*		
Yes		
No, reject entire submissionReturn for correction		

Approved by*

Shaskyia Belui

Approval Date* 3/4/2022

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H	YEAR STATE	1111	1003
	OF FARI	aca:	100
a	H and to by	MINE	2
Mental	0.01	Section 1	NEW

Mental Health and IDD	
Contract Section	
Contractor* MCKESSON MEDICAL SUPPLIES AND EQUIPMENT Contract ID #* 7137	
Presented To* Resource Committee Full Board	
Date Presented * 3/15/2022	
Parties* (?) The Harris Center and McKesson Medical Supplies and	Equipment
Agenda Item Submitted For: * (?) Information Only (Total NTE Amount is Less than \$50 Board Approval (Total NTE Amount is \$50,000.00+) Grant Proposal Revenue Other	0,000.00)
Procurement Method(s)*	
Check all that Apply Competitive Bid Request for Proposal Request for Application Request for Quote Interlocal Not Applicable (If there are no funds required)	Competitive Proposal Sole Source Request for Qualification Tag-On Consumer Driven Other
Funding Information* New Contract Amendment	
Contract Term Start Date* (?) 9/1/2021	Contract Term End Date* (?) 8/31/2022
If contract is off-cycle, specify the contract term (?)	
Current Contract Amount* \$ 315,953.00	
Increase Not to Exceed* \$ 23,170.00	
Revised Total Not to Exceed (NTE)* \$ 339,123.00	

Fiscal Year* (?) 2022	Amount* (?) \$ 339,123.00	
2022 \$ 339,123.00		
Funding Source*		
General Revenue (GR)		
Contract Description / Type* (?)		
Personal/Professional Services	☐ Consultant	
Consumer Driven Contract	New Contract/Agreement	
Memorandum of Understanding	Amendment to Existing Contract	
Affiliation or Preceptor	□ Service/Maintenance	
■ BAA/DUA	☐ IT/Software License Agreement	
Pooled Contract	Lease	
Renewal of Existing Contract	✓ Other Tag-On	
Justification/Purpose of Contract/Description	on of Services Being Provided* (?)	
Funds to cover medical equipment/surgical sup	pplies through August 31, 2022 billing cycle.	
Contract Owner*		
Deborah Sweat		
Previous History of Contracting with Vendo	or/Contractor*	
Yes No Unknown		
Please add previous contract dates and wh	at services were provided*	
Over 18 years for medical surgical supplies, ag		
Vendor/Contractor a Historically Underutiliz	zed Business (HUB)* (?)	
○ Yes ○ No ⑨ Unknown		
Community Partnership* (?)		
Yes No Unknown		
Supporting Documentation Upload (?)		
MCKESSON P.O. CT#141510 ECS AMENDM	ENT REQUESTS.pdf 746.13KB	
Vendor/Contractor Contact Person	on 📀	
Name*		
Sarah Brady-Zujic, Account Manager		
Address*		
Street Address		
9954 Maryland Drive, Suite 4000		
Address Line 2		
	State / Province / Pegion	
City Richmond	State / Province / Region VA	
Postal / Zip Code 23233	Country United States	
Phone Number*		
713-337-4677; 800-767-6339, opt. 16		
Email*		
sarah.zujic@mckesson.com		

Budget Section Budget Units and Amounts Charged to each Budget Unit Budget Unit Number* Amount Charged to Unit* Expense/GL Code No.* 547002 1108 \$ 7,000,00 **Budget Manager** Secondary Budget Manager Campbell, Ricardo Brown, Erica Budget Unit Number* Amount Charged to Unit* Expense/GL Code No.* \$ 13,000.00 547002 2214 Secondary Budget Manager **Budget Manager** Shelby, Debbie Loera, Angelica Budget Unit Number* Amount Charged to Unit* Expense/GL Code No.* 4836 \$ 3,170.00 547002 **Budget Manager** Secondary Budget Manager Adams-Austin, Mamie Shelby, Debbie Provide Rate and Rate Descriptions if applicable * (?) Rates vary, depending on supply order. Project WBS (Work Breakdown Structure)* (?) Requester Name Submission Date 2/2/2022 Arceneaux, Linda Budget Manager Approval(s) Approved by Approval Date Frica Brown 2/2/2022 Approved by Approval Date Debbie Chambers Shelby 2/2/2022 Approved by Approval Date Mamie Oddams-Odustin 2/3/2022 Procurement Approval File Upload (?)

Approved by Sign	Approval Date			
Contract Owner Approval	Ć			
Approved by				
	Approval Date			
D. Sweat	2/3/2022			
Contracts Approval				
Approve*				
Yes				
 No, reject entire submission 				
Return for correction				
Approved by *				
	Approval Date*			
Shaskyia Behn	2/7/2022			

EXHIBIT F-6

March 2022 INTERLOCAL AGREEMENTS

	CONTRACTORS	HUBs/MWBE	PRODUCT/SERVICE DESCRIPTION	ACTION TYPE	CONTRACT PERIOD	FUNDING	COMMENTS
	FY22 CONTRACTS						
	INTERLOCALS						
1	Harris County Resources for Children and Adults (HCRCA) [formerly known as Harris County CPS]	No	TRIAD Prevention Services (Mental Health Screenings, Assessments, Office and In- Home Therapy and Other Services)	Interlocal/Revenue Renewal	03/01/22- 09/30/22	County Funds	Annual Renewal of Agreement of Triad Prevention Services to provide mental health screenings, assessments, office and in-home therapy and other services to youth and families referred to Triad.
2	Harris County Juvenile Probation-MST	No	Multi-Systemic Therapy Services	New	09/01/21- 08/31/22	County Funds	This Agreement is for Multi-Systemic Therapy Services Team #2.
-							

HARRIS CENTER for Mental Health and IDI

Annual Renewal Evaluation

Evaluation of Current Fiscal Year Performance

Current Fiscal Year Contract Information	
Current Fiscal Year 2022	
Contract ID#* 7168	
Contractor Name * Harris County Resources for Children and Adults (HCRCA) (formerly Harris County CPS)
Service Provided* (?) TRIAD Prevention services to provide mental health scree in-home therapy and other services to youth and families response.	
Term for Off-Cycle Only* 03/01/2022-09/30/2022	
Procurement Method(s)* Check all that Apply Competitive Bid Request for Proposal	Competitive Proposal Sole Source
 □ Request for Application □ Request for Quote ☑ Interlocal □ Not Applicable (If there are no funds required) 	Request for Qualification Tag-On Consumer Driven Other Revenue
Contract NTE* (?) \$269,106.00	
Rate(s)/Rate(s) Description Varies	
Unit(s) Served* N/A	
G/L Code(s)* N/A	
Current Fiscal Year Purchase Order Number* HC144888	
Contract Requestor* Sheenia Williams-Wesley	
Contract Owner* Monalisa Jiles	
File Upload (?)	

Have there been any significant per ○ Yes ● No	formance deficiencies within the cu	ırrent fiscal year?*
Were Services delivered as specifie Per No	d in the contract?*	
Did Contractor perform duties in a r	nanner consistent with standards o	of the profession?*
Did Contractor adhere to the contra	cted schedule?* (?)	
Were reports, billing and/or invoices • Yes • No	s submitted in a timely manner?*(?	?)
Agency?* (?)	proper supporting documentation	of time spent rendering services for the
Yes O NoDid Contractor render services consYes O No	sistent with Agency policy and proc	cedures?* (?)
Maintained legally required standar • Yes • No	ds for certification, licensure, and/o	or training?* (?)
Renewal Determination		•
Is the contract being renewed for no	ext fiscal year with this Contractor?	* (?)
Renewal Information for Ne	ext Fiscal Year	\odot
Budget Units and Amounts	Charged to each Budget	Unit
Budget Unit Number* 6702	Amount Charged to Unit* \$ 269,106.00	Expense/GL Code No.*
Budget Manager* Williams-Wesley, Sheenia	Secondary Bud Jiles, Monalisa	get Manager*
Fiscal Year* (?) 2022	Amount* (?) \$ 269,106.00	
Next Fiscal Year Not to Exceed Amo	ount for Master Pooled Contracts	
Contract Funding Source* County		
		•

Will the scope of the Services change?*	
○ Yes ◎ No	
Is the payment deadline different than net (45)?*	
Yes No	
Are there any changes in the Performance Targets?*	
○ Yes No	
Are there any changes to the Submission deadlines for	notes or supporting documentation?*
○ Yes ® No	
File Upload (?)	
Contract Owner	Ó.
Contract Owner* (?)	
Please Select Contract Owner	
Monalisa Jiles	
Budget Manager Approval(s)	Ô
Approved by	
Sheenia Wittiams-Westey	
Contract Owner Approval	<u> </u>
Approved by	
me . T.	
Monatisa Tites	
Contracts Approval	
Approve*	
Yes	
 No, reject entire submission 	
Return for correction	
Approved by *	
	Approval Date*
	2/8/2022

Executive Contract Summary Contract Section Contractor* Harris County Juvenile Probation - MST Contract ID #* 2021-0232 Presented To* Resource Committee Full Board Date Presented* 3/15/2022 Parties* (?) Harris County Juvenile Probation Department, Harris County Resources for Children and Adults, Texas Dept. of Family and Protective Services Youth Clients and The Harris Center for Mental Health and IDD Services Agenda Item Submitted For: * (?) ☐ Information Only (Total NTE Amount is Less than \$50,000.00) Board Approval (Total NTE Amount is \$50,000.00+) Grant Proposal ✓ Revenue Other Procurement Method(s)* Check all that Apply Competitive Bid Competitive Proposal Request for Proposal Sole Source Request for Application Request for Qualification Request for Quote Tag-On Consumer Driven ✓ Interlocal Not Applicable (If there are no funds required) Other Funding Information* New Contract Amendment Contract Term Start Date * (?) Contract Term End Date * (?) 8/31/2022 If contract is off-cycle, specify the contract term (?)

2022

Fiscal Year* (?)

Funding Source*

County

Contract Description / Type * (?)	
Personal/Professional Services	Consultant
✓ Consumer Driven Contract	✓ New Contract/Agreement
Memorandum of Understanding	 Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	✓ Other ILA
Justification/Purpose of Contract/Description of a Multi-Systemic Therapy Team #2 Services Contract Owner* Mike Downey Previous History of Contracting with Vendor/Con Yes No Unknown	tractor*
Please add previous contract dates and what ser	vices were provided*
09-01-21 to 08-31-22 MST Team #1	
Vendor/Contractor a Historically Underutilized Bu	usiness (HUB)* (?)
○ Yes ○ No ● Unknown	
Community Partnership* (?)	
○ Yes ◉ No ○ Unknown	
Supporting Documentation Upload (?)	
capporting bootinentation opious (4)	
Vendor/Contractor Contact Person	lacktriangle
Name*	
Name* Jennifer Lane	
Jennifer Lane	
Jennifer Lane Address*	
Jennifer Lane Address* Street Address	
Jennifer Lane Address* Street Address 1200 Congress Street	State / Province / Region
Jennifer Lane Address* Street Address 1200 Congress Street Address Line 2	State / Province / Region
Jennifer Lane Address * Street Address 1200 Congress Street Address Line 2 City Houston	TX
Jennifer Lane Address* Street Address 1200 Congress Street Address Line 2 City	-
Jennifer Lane Address * Street Address 1200 Congress Street Address Line 2 City Houston Postal / Zip Code	TX Country
Jennifer Lane Address* Street Address 1200 Congress Street Address Line 2 City Houston Postal / Zip Code 77002 Phone Number* (713) 222-4240	TX Country
Jennifer Lane Address* Street Address 1200 Congress Street Address Line 2 City Houston Postal / Zip Code 77002 Phone Number* (713) 222-4240 Email*	TX Country US
Jennifer Lane Address* Street Address 1200 Congress Street Address Line 2 City Houston Postal / Zip Code 77002 Phone Number* (713) 222-4240	TX Country US
Jennifer Lane Address* Street Address 1200 Congress Street Address Line 2 City Houston Postal / Zip Code 77002 Phone Number* (713) 222-4240 Email*	TX Country US

Budget Unit Number* Amount Charged to Unit* Expense/GL Code No.* 6622 \$ 0.00 000000 **Budget Manager** Secondary Budget Manager Debbie C. Shelby Angelica D. Loera Provide Rate and Rate Descriptions if applicable * (?) \$0.00 Project WBS (Work Breakdown Structure) * (?) \$0.00 Requester Name **Submission Date** Debbie C. Shelby 2/24/2022 Budget Manager Approval(s) Approved by Approval Date Debbie Chambers Shelby 2/24/2022 Procurement Approval File Upload (?) Approved by Approval Date Sign Contract Owner Approval Approved by Approval Date Michael Downey 2/24/2022 Contracts Approval Approve* Yes No, reject entire submission Return for correction Approved by * Approval Date* Shaskyia Behn 2/25/2022

EXHIBIT F-7

March 2022 RATIFICATIONS

SNAPSHOT SUMMARY MARCH CONTRACT RATIFICATIONS

				PREVIOUS						
	CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE	NTE	INCREASE AMOUNT	NITE AMOUNT	CONTRACT REDIOR	FUNDING	DID TAG ON	
- 8		HOB/MWBE	DESCRIPTION	AMOUNT	AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
- 8	FY22 CONTRACTS									
	RATIFICATIONS									
1	PreCheck, Inc.	No	Personnel Background Investigation Services	\$37,500.00	\$78,000.00	\$115,500.00	09/01/21-08/31/22	GR	Statutory Requirement	This Amendment is necessary to pay FY22 outstanding invoices that were recently received but unable to be paid because of insufficient funds on the PO. Funds were approved for FY22 but were utilized to pay FY21 invoices that were received late because they were being sent to emails of employees that are no longer with the Agency and to provide funding for the remainder of the fiscal year. An increase to the PO will restore the FY22 funding and prevent the Agency from losing this required Service.
-				-						
-				-						
				 						
				-						
-				-						
				-						
-				-						
-										
		-		-						
										-

Mental Health and IDD EXECUTIVE CONTract Sun	ımary
Contract Section	
Contractor*	
Pre Check Inc.	
Contract ID #*	
7237	
Presented To*	
Resource Committee	
Full Board	
Date Presented*	
3/15/2022	
Parties* (?)	
The Harris Center, Pre Check Inc.	
Agenda Item Submitted For:* (?)	
Information Only (Total NTE Amount is Less than \$5	0,000.00)
✓ Board Approval (Total NTE Amount is \$50,000.00+)☐ Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
Competitive Bid	Competitive Proposal
Request for Proposal	Sole Source
Request for ApplicationRequest for Quote	Request for QualificationTag-On
☐ Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	✓ Other Statutory Requirement
Funding Information*	
New Contract Amendment	
Contract Term Start Date * (?)	Contract Term End Date * (?)
9/1/2021	8/31/2022
If contract is off-cycle, specify the contract term (?)	
Current Contract Amount*	
\$ 37,500.00	
Increase Not to Exceed*	
\$ 78,000.00	
Revised Total Not to Exceed (NTE)*	
\$ 115,500.00	

Fiscal Year* (?)	Amount* (?)
2022	\$ 78,000.00
Funding Source*	
General Revenue (GR)	
Contract Description / Type* (?)	
Personal/Professional Services	☐ Consultant
Consumer Driven Contract	☐ New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
■ BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	✓ Other Personnel Background Services
Justification/Purpose of Contract/Description	on of Services Being Provided * (?)
This Amendment is necessary to pay FY22 out	
received but unable to be paid because of insu	The body of the second
approved for FY22 but were utilized to pay FY2	
they were being sent to the emails of employee	es that are no longer with the Agency. An
increase to the PO will restore the FY22 funding	g and prevent the Agency losing this
required service	
Contract Owner*	
Lesleigh Robertson	
Lesieigh Nobeltson	
Previous History of Contracting with Vendo	r/Contractor*
○ Yes ○ No ● Unknown	
Vandario anteriore di l'attaina la la contra d'il	4 Decision (IIID) * (2)
Vendor/Contractor a Historically Underutiliz	ed Business (HUB) (7)
Community Partnership * (?)	
○ Yes ○ No ● Unknown	
Supporting Documentation Upload (?)	
Vendor/Contractor Contact Person	on the second
Name*	
Pre Check Inc.	
Address*	
1287 North Post Oak Road	
Houston	TX
77055	US
Phone Number*	
713-861-5959	

Email* Accountsreceivable@precheck.com **Budget Section** Budget Units and Amounts Charged to each Budget Unit Budget Unit Number* Amount Charged to Unit* Expense/GL Code No.* 1108 543025 \$ 78,000.00 **Budget Manager** Secondary Budget Manager Brown, Erica Campbell, Ricardo Provide Rate and Rate Descriptions if applicable * (?) Project WBS (Work Breakdown Structure) * (?) Requester Name Submission Date Franco, Veronica 3/10/2022 Budget Manager Approval(s) Approved by Approval Date Ricardo Campbell 3/10/2022 **Contract Owner Approval** Approved by Approval Date Carrie Rys 3/11/2022 Contracts Approval Approve* Yes No, reject entire submission Return for correction Approved by * Approval Date* Shaskyia Behn 3/11/2022

EXHIBIT F-8

March 2022 NEW CONTRACTS UNDER 50k

SNAPSHOT SUMMARY NEW CONTRACTS LESS THAN \$50,000

	CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE DESCRIPTION	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	FY22 NEW CONTRACTS								
	ADMINISTRATION								
1	Civic Initiatives	No	Consulting Support Services		\$10,000.00	02/14/22- 12/31/22	GR	RFQuote	This Agreement is for Consulting Support Services in support of ongoing procurement and contract-related projects on an asneeded basis. FY22: \$5,000.00 FY23: \$5,000.00 Total NTE: \$10,000.00
2	Dixie Safe and Lock	No	MEDCO Key System		\$20,000.00	02/01/22- 08/31/22	GR	Proprietary Agreement and Business Continuity	Agency has a signed agreement, which is proprietary, for the MEDCO key system. MEDCO is the only company to work at 9401 Southwest Freeway, and also provide our blank MEDCO keys. Additionally, we are able to utilize them throughout the Agency for other/general locksmith needs. A contract will help in having a method to pay invoices through a Purchase Order.
3	eQuest	No	Job Distribution Services		\$2,750.00	04/01/22- 08/31/22	IT21.1147.08= HRIS	Sole Source	eQuest is our current provider of job distribution services via the UKG Workforce Dimension human capital management system. The procurement of the upgraded eQuest service is a Sole Source because of the partnership and integration with UKG Workforce Dimensions.
4	Inword Wellness Plic	No	Crisis Line Counselors		\$6,000.00	04/01/22- 08/31/22	State Funds	N/A	This Service Provider will be replacing the current debriefing group provider for the crisis line. The current provider, The Semicolon Group will be terminating their contract effective March 31, 2022.
5	Pearl Meyer & Partners, LLC	No	Consultant Services		\$11,000.00	02/25/22- 08/31/22	GR	Consultant Agreement	This Agreement is for the Consultant to provide Competitiveness Review of Cash Compensation for the Agency
6	The University of Texas Health Science Center at Houston	No	Continuing Medical Education		\$3,300.00	03/11/22- 08/31/22	GR	Consultant Agreement	This Agreement is to provide Continuing Medical Education for the Agency.
7	The Visual Influence	No	World Café Model CIC Related Intervention		\$49,000.00	03/01/22- 02/28/23	County Funds	Sole Source	This Agreement is for a required service to provide the World Café Model CIC related intervention for the ARPA Project (Healthy Minds Healthy Communities)
	CPEP/CRISIS SERVICES	ING	Neidled Intervention		343,000.00	03/01/22-02/20/23	County Funds	Sole Source	(riedius) winds riedius Communius)
	FORENSICS								
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES								
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI								
	LEASES								



Executive Contract Summary

MERIO FICOLIT ARC 1010	
Contract Section	
Contractor* Civic Initiatives	
Contract ID #* 2022-0351	
Presented To* Resource Committee Full Board	
Date Presented* 3/15/2022	
Parties* (?) The Harris Center for Mental Health and IDD / Civic Initiat	ives
Agenda Item Submitted For: * (?) Information Only (Total NTE Amount is Less than \$50,000.00+) Board Approval (Total NTE Amount is \$50,000.00+) Grant Proposal Revenue Other	000.00)
Procurement Method(s)*	
Check all that Apply Competitive Bid Request for Proposal Request for Application Request for Quote Interlocal Not Applicable (If there are no funds required)	Competitive Proposal Sole Source Request for Qualification Tag-On Consumer Driven Other
Funding Information*	
● New Contract ○ Amendment Contract Term Start Date * (?) 2/14/2022 If contract is off-cycle, specify the contract term (?)	Contract Term End Date* (?) 12/31/2022
Fiscal Year* (?) 2022	Amount* (?) \$ 5,000.00
Fiscal Year* (?) 2023	Amount* (?) \$ 5,000.00

Funding Source*	
General Revenue (GR)	
Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	✓ Consultant
	New Contract/Agreement
Memorandum of UnderstandingAffiliation or Preceptor	Amendment to Existing Contract Service/Maintenance
BAA/DUA	☐ Service/Maintenance ☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Serv	
Consulting support services in support of ongoing procur projects on an as-needed basis	rement and contract-related
Contract Owner*	
Sean Kim	
Previous History of Contracting with Vendor/Contracting	tor*
Yes ○ No ○ Unknown	
Please add previous contract dates and what service	es were provided*
TERM: JANUARY 25, 2021 AND ENDING (30) DAYS	o note provided
AFTER THE FINAL DELIVERABLE AS INDICATED WIT	HIN
EXHIBIT A. SERVICE - PROVIDE AN ASSESSMENT O	
ALL PROCUREMENT AND CONTRACT WORKFLOW	
PROCESS	
Vendor/Contractor a Historically Underutilized Busin	ess (HUB)* (?)
○ Yes ○ No ⑥ Unknown	
Community Partnership * (?)	
Yes No Unknown	
Supporting Documentation Upload (?)	
CI Quickstart SOW Harris Center 020322.docx	73.12KB
of Quionstant GOVV Harris Genter 020022.udox	70.1210
Vendor/Contractor Contact Person	
100 to	
Name*	
Derrek Davis	
Address*	
Street Address	
7000 N Mopac Expressway	
Address Line 2	
Suite 200	
City	State / Province / Region
Austin	TX
Postal / Zip Code	Country
78731	USA
Phone Number*	
512-523-4834	

Email* ddavis@civicinitiatives.com **Budget Section** Budget Units and Amounts Charged to each Budget Unit **Budget Unit Number*** Amount Charged to Unit* Expense/GL Code No.* 1101 \$ 5.000.00 542000 **Budget Manager** Secondary Budget Manager Erica S. Brown Ricardo Campbell Provide Rate and Rate Descriptions if applicable * (?) NTE of \$10,000. Hourly rates range between \$96.90/hour -\$219.30/hour Project WBS (Work Breakdown Structure)* (?) N/A Requester Name Submission Date Sean Y. Kim 2/11/2022 Budget Manager Approval(s) Approved by Approval Date Exica Brown 2/11/2022 Procurement Approval File Upload (?) Approved by Approval Date Sharon Brauner 2/11/2022 **Contract Owner Approval** Approved by Approval Date Sean Kim 2/11/2022 Contracts Approval Approve* No, reject entire submission Return for correction

Approved by *

Shaskyia Behn

Approval Date* 2/16/2022

Executive Contract Summary

Mental Health and IDD	
Contract Section	
Contractor*	
Dixie Safe and Lock	
Contract ID #* 2022-0347	
Presented To*	
Resource Committee	
○ Full Board	
Date Presented*	
3/15/2022	
Parties* (?)	
Dixie Safe and Lock and The Harris Center	
Agenda Item Submitted For: * (?)	
☑ Information Only (Total NTE Amount is Less than \$50	0,000.00)
Board Approval (Total NTE Amount is \$50,000.00+)	•
☐ Grant Proposal	
Revenue	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	☐ Competitive Proposal
Request for Proposal	□ Sole Source
Request for Application	Request for Qualification
Request for Quote	☐ Tag-On
InterlocalNot Applicable (If there are no funds required)	 ✓ Other proprietary agreement and business
Not Applicable (if there are no funds required)	continuity
Funding Information*	
New Contract	

Contract Term Start Date * (?) 2/1/2022	Contract Term End Date * (?) 8/31/2022
	6/31/2022
If contract is off-cycle, specify the contract term (?)	
Fiscal Year* (?)	Amount* (?)
2022	\$ 20,000.00
Funding Source*	
General Revenue (GR)	

Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	✓ New Contract/Agreement
 Memorandum of Understanding 	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
☐ BAA/DUA	☐ IT/Software License Agreement
□ Pooled Contract	Lease
Renewal of Existing Contract	Other

Justification/Purpose of Contract/Description of Ser	
Dixie Safe & Lock is who we have a signed agreement f	
proprietary. They are the only company authorized to we	1000 Control 1000
provide our blank MEDCO keys. We are able to utilize the other/general locksmith needs. A contract will help have	
Purchase Order.	a method to pay involces from a
Contract Owner*	
Todd McCorquodale	
Previous History of Contracting with Vendor/Contracting	ctor*
100 C 1 - 100 10 10 10 10 10 10 10 10 10 10 10 10	3.01
Yes No Unknown	
Please add previous contract dates and what service	es were provided*
2017 to present - locksmith	

Vendor/Contractor a Historically Underutilized Busin	ness (HUB) * (?)
○ Yes No ○ Unknown	
Please provide an explanation*	
does not meet criteria	
Community Partnership* (?)	
○ Yes No ○ Unknown	
Supporting Documentation Upload (?)	
capporting Documentation opioca (v)	
Vendor/Contractor Contact Person	
Reproduce Software and the second of the sec	
Name*	
Dixie Safe and Lock / Kelly Torres	
Address*	
Street Address	
7920 Gulf Freeway	
Address Line 2	
City	State / Province / Region
Houston	TX
Postal / Zip Code	Country
77017-3018	US
Phone Number*	
7136435767	
	9
Email*	
Dixieap@dixielock.com	

Budget Section Budget Units and Amounts Charged to each Budget Unit **Budget Unit Number*** Amount Charged to Unit* Expense/GL Code No.* 1899 569012 \$ 20,000.00 **Budget Manager** Secondary Budget Manager Brown, Erica Campbell, Ricardo Provide Rate and Rate Descriptions if applicable * (?) Project WBS (Work Breakdown Structure) * (?) Requester Name **Submission Date** Harper, Sarah 2/3/2022 Budget Manager Approval(s) Approved by Approval Date Exica Brown 2/3/2022 **Procurement Approval** File Upload (?) Approved by Approval Date Contract Owner Approval Approved by Approval Date Fodd McCorquedale 2/3/2022 Contracts Approval Approve* Yes No, reject entire submission Return for correction Approved by * Approval Date* Shaskyia Behn 2/7/2022



SCHARRIS Executive Contract Summa

Mental Health and IDD	
Contract Section	
Contractor*	
eQuest	
Contract ID #*	
2022-0359	
Presented To*	
Resource Committee	
→ Full Board	
Date Presented *	
3/15/2022	
Parties* (?)	
eQuest and The Harris Center for Mental Health and IDD	
Agenda Item Submitted For: * (?)	
Information Only (Total NTE Amount is Less than \$50,	000.00)
☐ Board Approval (Total NTE Amount is \$50,000.00+)	
☐ Grant Proposal	
Revenue	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	Competitive Proposal
Request for Proposal	✓ Sole Source
Request for Application	Request for Qualification
Request for Quote	Tag-On
Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	✓ Other Existing Contract (Partnership with UGK)
Funding Information*	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
4/1/2022	8/31/2022
If contract is off-cycle, specify the contract term (?)	
4/1/2022 - 8/31/2022	
Fiscal Year* (?)	Amount* (?)
2022	\$ 2,750.00
Funding Source*	
General Revenue (GR)	
.50 .50	

	Contract Description / Type * (?)			
	Personal/Professional Services		Consultant	
	Consumer Driven Contract	4	New Contract/Agreement	
	 Memorandum of Understanding 		Amendment to Existing Contr	act
	Affiliation or Preceptor		Service/Maintenance	
	BAA/DUA	4	IT/Software License Agreeme	nt
	Pooled Contract		Lease	
	Renewal of Existing Contract		Other	
	Justification/Purpose of Contract/Description of Serv	ices E	Being Provided* (?)	
	eQuest is our current provider of job distribution services			
	human capital management system. The procurement of			
	sole source because of the partner status and integration			
	UKG Dimensions user adoption service is a sole source be material specific to UKG.	ecaus	se it is proprietary training	
	Contract Owner*			
	Mustafa Cochinwala			
	Previous History of Contracting with Vendor/Contract	tor*		
	○ Yes ○ No ● Unknown			
	Vendor/Contractor a Historically Underutilized Busine	ess (H	UB)* (?)	
	○ Yes ○ No ⑨ Unknown			
	Community Partnership * (?)			
	Yes No Unknown			
	Too S Ito S Diminoviii			
	Supporting Documentation Upload (?)			
	Supporting Documentation Upload (?) Sales_Order_from_eQuest.pdf		136.12KB	
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CONTROL OF THE PARTY OF THE PAR			136.12KB	<u> </u>
200000000	Sales_Order_from_eQuest.pdf Vendor/Contractor Contact Person		136.12KB	<u>~</u>
ponument)	Sales_Order_from_eQuest.pdf Vendor/Contractor Contact Person Name*		136.12KB	0
Exemples	Sales_Order_from_eQuest.pdf Vendor/Contractor Contact Person		136.12KB	
permanea	Sales_Order_from_eQuest.pdf Vendor/Contractor Contact Person Name*		136.12KB	
Distriction 2	Vendor/Contractor Contact Person Name* Josh Ault		136.12KB	
penuma	Vendor/Contractor Contact Person Name* Josh Ault Address*	A Maria	136.12KB	
panisana.	Sales_Order_from_eQuest.pdf Vendor/Contractor Contact Person Name* Josh Ault Address* Street Address		136.12KB	
pomuna	Sales_Order_from_eQuest.pdf Vendor/Contractor Contact Person Name* Josh Ault Address* Street Address 400 Executive Parkway	State	136.12KB	
personal	Vendor/Contractor Contact Person Name* Josh Ault Address* Street Address 400 Executive Parkway Address Line 2	State CA		
DOMESTIC	Sales_Order_from_eQuest.pdf Vendor/Contractor Contact Person Name* Josh Ault Address* Street Address 400 Executive Parkway Address Line 2 City	CA	/ Province / Region	
Manage	Sales_Order_from_eQuest.pdf Vendor/Contractor Contact Person Name* Josh Ault Address* Street Address 400 Executive Parkway Address Line 2 City San Ramon	CA	/ Province / Region	
permana	Vendor/Contractor Contact Person Name* Josh Ault Address* Street Address 400 Executive Parkway Address Line 2 City San Ramon Postal / Zip Code 94583	CA	/ Province / Region	
TOTAL CONTRACTOR OF THE PARTY O	Vendor/Contractor Contact Person Name* Josh Ault Address* Street Address 400 Executive Parkway Address Line 2 City San Ramon Postal / Zip Code 94583 Phone Number*	CA	/ Province / Region	
Internation of the Control of the Co	Vendor/Contractor Contact Person Name* Josh Ault Address* Street Address 400 Executive Parkway Address Line 2 City San Ramon Postal / Zip Code 94583 Phone Number* 713-970-3958	CA	/ Province / Region	
	Vendor/Contractor Contact Person Name* Josh Ault Address* Street Address 400 Executive Parkway Address Line 2 City San Ramon Postal / Zip Code 94583 Phone Number*	CA	/ Province / Region	
monnaya a	Vendor/Contractor Contact Person Name* Josh Ault Address* Street Address 400 Executive Parkway Address Line 2 City San Ramon Postal / Zip Code 94583 Phone Number* 713-970-3958	CA	/ Province / Region	
ACTIVITIES OF THE PERSON OF TH	Vendor/Contractor Contact Person Name* Josh Ault Address* Street Address 400 Executive Parkway Address Line 2 City San Ramon Postal / Zip Code 94583 Phone Number* 713-970-3958 Email*	CA	/ Province / Region	0

Budget Unit Number* Expense/GL Code No.* Amount Charged to Unit* 1147 \$ 2,750.00 900021 **Budget Manager** Secondary Budget Manager Erica S. Brown Ricardo Campbell Provide Rate and Rate Descriptions if applicable * (?) FY22 = \$2,750.00 (April 2022 - Aug 2022) 1 The Blast! Network Unlimited = 3,500.00 1 AutoPost = 2,500.00 1 Standard Support Services + Maintenance and Essential Product Updates = 600.00 Total: \$6,600.00 Project WBS (Work Breakdown Structure)* (?) IT21,1147.08 = HRIS Submission Date Requester Name 2/21/2022 Anthony Jones Budget Manager Approval(s) Approved by Approval Date Exica Brown 2/22/2022 Procurement Approval File Upload (?) Approved by Approval Date Sharon Brauner 2/22/2022 **Contract Owner Approval** Approved by **Approval Date** Mustafa Cochinwala 2/22/2022 Contracts Approval Approve* Yes No, reject entire submission Return for correction

Approved by *

Shaskyia Behn

Approval Date* 2/25/2022



HARRIS Executive Contract Summary

Mental Health and IDD	
Contract Section	
Contractor*	
Inword Wellness Plic	
mword vveimess File	
Contract ID #*	
2022-0355	
Presented To*	
Resource Committee	
○ Full Board	
Date Presented*	
3/18/2022	
Parties* (?)	
The Harris Center for Mental Health and IDD & Inword \	Nellness Plic
Agenda Item Submitted For: * (?)	
☑ Information Only (Total NTE Amount is Less than \$5	0,000.00)
Board Approval (Total NTE Amount is \$50,000.00+)	•
Grant Proposal	
Revenue	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	Competitive Proposal
Request for Proposal	☐ Sole Source
Request for Application	Request for Qualification
Request for Quote	☐ Tag-On
Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	✓ Other Provided by Janice Cote
Funding Information*	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
4/1/2022	8/31/2022
If contract is off-cycle, specify the contract term (?)	
in contract is on-cycle, specify the contract term (*)	
Fiscal Year* (?)	Amount* (?)
2022	\$ 6,000.00
Funding Source*	
State	

Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
□ BAA/DUA	IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Sen	vices Being Provided* (?)
This service provider will be replacing the current debries	fing group provider for the crisis
line. The current provider, The Semicolon Group, will be	terminating their contract effective
March 31, 2022	
Contract Owner*	
Jennifer Battle	
Jennier Dattie	
Previous History of Contracting with Vendor/Contracting	tor*
○ Yes @ No ○ Unknown	

Vendor/Contractor a Historically Underutilized Busin	ess (HUB)* (?)
⊘ Yes ○ No ⑥ Unknown	
Community Partnership * (?)	
Yes No Unknown	
Tes Wo Onknown	
Supporting Documentation Upload (?)	
Ormaza_Quote-HarrisCtr (1).pdf	68KB
Vendor/Contractor Contact Person	
Vendor/Contractor Contact Person	
Name* Tatiana Ormaza	
Name* Tatiana Ormaza Address*	
Name * Tatiana Ormaza Address * Street Address	
Name* Tatiana Ormaza Address* Street Address P.O. Box 2920	
Name * Tatiana Ormaza Address * Street Address P.O. Box 2920 Address Line 2	State / Drouince / Region
Name * Tatiana Ormaza Address * Street Address P.O. Box 2920 Address Line 2 City	State / Province / Region
Name * Tatiana Ormaza Address * Street Address P.O. Box 2920 Address Line 2 City Cypress	Tx
Name * Tatiana Ormaza Address * Street Address P.O. Box 2920 Address Line 2 City Cypress Postal / Zip Code	Tx Country
Name * Tatiana Ormaza Address * Street Address P.O. Box 2920 Address Line 2 City Cypress	Tx
Name * Tatiana Ormaza Address * Street Address P.O. Box 2920 Address Line 2 City Cypress Postal / Zip Code	Tx Country
Name * Tatiana Ormaza Address * Street Address P.O. Box 2920 Address Line 2 City Cypress Postal / Zip Code 77410	Tx Country
Name* Tatiana Ormaza Address* Street Address P.O. Box 2920 Address Line 2 City Cypress Postal / Zip Code 77410 Phone Number* 346-239-7992	Tx Country
Name * Tatiana Ormaza Address * Street Address P.O. Box 2920 Address Line 2 City Cypress Postal / Zip Code 77410 Phone Number * 346-239-7992 Email *	Tx Country
Name* Tatiana Ormaza Address* Street Address P.O. Box 2920 Address Line 2 City Cypress Postal / Zip Code 77410 Phone Number* 346-239-7992	Tx Country
Name * Tatiana Ormaza Address * Street Address P.O. Box 2920 Address Line 2 City Cypress Postal / Zip Code 77410 Phone Number * 346-239-7992 Email * tatiana.ormaza@gmail.com	Tx Country
Name * Tatiana Ormaza Address * Street Address P.O. Box 2920 Address Line 2 City Cypress Postal / Zip Code 77410 Phone Number * 346-239-7992 Email *	Tx Country
Name* Tatiana Ormaza Address* Street Address P.O. Box 2920 Address Line 2 City Cypress Postal / Zip Code 77410 Phone Number* 346-239-7992 Email* tatiana.ormaza@gmail.com	Tx Country United States
Name * Tatiana Ormaza Address * Street Address P.O. Box 2920 Address Line 2 City Cypress Postal / Zip Code 77410 Phone Number * 346-239-7992 Email * tatiana.ormaza@gmail.com	Tx Country United States

Budget Unit Number* Amount Charged to Unit* Expense/GL Code No.* 7001 \$ 6,000.00 549005 **Budget Manager** Secondary Budget Manager Ricardo Campbell Erica S. Brown Provide Rate and Rate Descriptions if applicable * (?) Up to 5 one hour debriefing groups a month at a rate of Project WBS (Work Breakdown Structure)* (?) Unknown Requester Name Submission Date Janai L. Smith 2/18/2022 Budget Manager Approval(s) Approved by Approval Date Ricardo Campbell 2/20/2022 Procurement Approval File Upload (?) Approved by Approval Date Sign **Contract Owner Approval** Approved by Approval Date Tennifer Battle 2/21/2022 Contracts Approval Approve* Yes No, reject entire submission Return for correction Approved by * Approval Date* Shaskyia Behn 2/21/2022

HARRIS Executive Contract Summary

Mental Health and IDD	
Contract Section	A
	ACRES OF STORES OF STREET
Contractor*	
Pearl Meyer & Partners, LLC	
Contract ID #*	
2022-0358	
Presented To*	
Resource Committee Full Board	
- Full Board	
Date Presented*	
3/15/2022	
Parties* (?)	
Pearl Meyer & Partners, LLC and The Harris Center for I	Mental Health and IDD
Agenda Item Submitted For: * (?)	
	000 00)
 ✓ Information Only (Total NTE Amount is Less than \$50 ☐ Board Approval (Total NTE Amount is \$50,000.00+) 	7,000.00)
Grant Proposal	
Revenue	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	Competitive Proposal
Request for Proposal	Sole Source
Request for Application	Request for Qualification
Request for Quote Interlocal	☐ Tag-On
Not Applicable (If there are no funds required)	 Consumer Driven ✓ Other Consultant Contract
Herrippineasie (il dicio die no fande required)	Substitution Consultant Contract
Funding Information*	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
2/25/2022	8/31/2022
If contract is off-cycle, specify the contract term (?)	
in contract is on-cycle, specify the contract term (r)	
Fiscal Year* (?)	Amount* (?)
2022	\$ 11,000.00
	¥ 11,000.00
Funding Source*	
General Revenue (GR)	
Concrat Nevenue (ON)	

Contract Description / Type * (?)	
Personal/Professional Services	✓ Consultant
Consumer Driven Contract	✓ New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
□ BAA/DUA	IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Se Competitiveness Review of Cash Compensation	ervices Being Provided* (?)
Contract Owner*	
Wayne Young	
Previous History of Contracting with Vendor/Contra	actor*
○ Yes ○ No ● Unknown	
Vendor/Contractor a Historically Underutilized Bus	iness (HUB)*(?)
O Yes O No O Unknown	
Community Partnership * (?)	
O Yes O No Unknown	
Supporting Documentation Upload (?)	
Pearl Meyer Partners LLC ID#2022-0358.pdf	2.21MB
	THE PART OF THE PROPERTY OF THE PART OF TH
Vendor/Contractor Contact Person	
Vendor/Contractor Contact Person	
Name* Pearl Meyer	
Name* Pearl Meyer Address*	
Name* Pearl Meyer Address* Street Address	
Name* Pearl Meyer Address*	
Name* Pearl Meyer Address* Street Address 3 Riverway Address Line 2	
Name * Pearl Meyer Address * Street Address 3 Riverway Address Line 2 Suite 1250	State / Province / Region
Name* Pearl Meyer Address* Street Address 3 Riverway Address Line 2	State / Province / Region TX
Name* Pearl Meyer Address* Street Address 3 Riverway Address Line 2 Suite 1250 City Houston	TX
Name * Pearl Meyer Address * Street Address 3 Riverway Address Line 2 Suite 1250 City Houston Postal / Zip Code	TX Country
Name* Pearl Meyer Address* Street Address 3 Riverway Address Line 2 Suite 1250 City Houston	TX
Name * Pearl Meyer Address * Street Address 3 Riverway Address Line 2 Suite 1250 City Houston Postal / Zip Code	TX Country
Name* Pearl Meyer Address* Street Address 3 Riverway Address Line 2 Suite 1250 City Houston Postal / Zip Code 77056-1919	TX Country
Name * Pearl Meyer Address * Street Address 3 Riverway Address Line 2 Suite 1250 City Houston Postal / Zip Code 77056-1919 Phone Number *	TX Country
Name* Pearl Meyer Address* Street Address 3 Riverway Address Line 2 Suite 1250 City Houston Postal / Zip Code 77056-1919 Phone Number* 713-568-2200 Email*	TX Country
Name* Pearl Meyer Address* Street Address 3 Riverway Address Line 2 Suite 1250 City Houston Postal / Zip Code 77056-1919 Phone Number* 713-568-2200 Email* houston@pearlmeyer.com	TX Country
Name* Pearl Meyer Address* Street Address 3 Riverway Address Line 2 Suite 1250 City Houston Postal / Zip Code 77056-1919 Phone Number* 713-568-2200 Email*	TX Country
Name* Pearl Meyer Address* Street Address 3 Riverway Address Line 2 Suite 1250 City Houston Postal / Zip Code 77056-1919 Phone Number* 713-568-2200 Email* houston@pearlmeyer.com	TX Country US
Name* Pearl Meyer Address* Street Address 3 Riverway Address Line 2 Suite 1250 City Houston Postal / Zip Code 77056-1919 Phone Number* 713-568-2200 Email* houston@pearlmeyer.com	TX Country US

Budget Unit Number* Amount Charged to Unit* Expense/GL Code No.* 1101 \$ 11,000.00 542000 Secondary Budget Manager **Budget Manager** Erica S. Brown Ricardo Campbell Provide Rate and Rate Descriptions if applicable * (?) See attachment Project WBS (Work Breakdown Structure)* (?) Requester Name **Submission Date** 2/25/2022 Veronica A. Franco Budget Manager Approval(s) Approved by Approval Date Exica Brown 2/25/2022 **Procurement Approval** File Upload (?) Approved by Approval Date Sign Contract Owner Approval Approved by Approval Date 3/1/2022 Contracts Approval Approve* Yes No, reject entire submission Return for correction Approved by * Approval Date* Shaskyia Behn 3/1/2022

HARRIS CENTER 6

Executive Contract Summary

Mental Health and IDD	IIII a i y
Contract Section	
*	
Contractor*	
The University of Texas Health Science Center at House	ton (UT Health)
Contract ID #*	
2022-0361	
Presented To*	
Resource Committee	
Full Board	
T dii Board	
Date Presented*	
3/15/2022	
Parties* (?)	
	ton (UT Health) and The Harris Center for Mental Health
and IDD	
Agenda Item Submitted For:* (?)	
30 DOM - 100 DOM AND STORES AND S	0.000.00\
✓ Information Only (Total NTE Amount is Less than \$5	0,000.00)
☐ Board Approval (Total NTE Amount is \$50,000.00+)☐ Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	Competitive Proposal
Request for Proposal	Sole Source
Request for Application	Request for Qualification
Request for Quote	Tag-On
Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	✓ Other Consultant Agreement
Funding Information*	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
3/11/2022	8/31/2022
	0/3/1/2022
If contract is off-cycle, specify the contract term (?)	
Fiscal Year* (?)	Amount* (?)
2022	\$ 3,300.00
Funding Source*	

General Revenue (GR)

Contract Description / Type * (?)	
Personal/Professional Services	✓ Consultant
Consumer Driven Contract	✓ New Contract/Agreement
 Memorandum of Understanding 	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
□ BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Security Provide Continuing Medical Education ("CME") Contract Owner*	Services Being Provided * (?)
Luming Li	
Previous History of Contracting with Vendor/Con	tractor*
○ Yes ○ No ● Unknown	
Vendor/Contractor a Historically Underutilized Bu	usiness (HUB)* (?)
○ Yes ○ No ● Unknown	
Community Partnership* (?)	
○ Yes ○ No ⑨ Unknown	
Supporting Documentation Upload (?)	
2022_02_24_16_56_16.pdf	734.58KB
	701.000
VI	
Vendor/Contractor Contact Person	
terrecorder in the world the death of an extensive process of the condition to the condition of the condition to the condition of the conditio	
Name* The University of Texas Health Science Center at Ho	puston
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD	puston
Name* The University of Texas Health Science Center at Ho	puston
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD Address* Street Address	puston
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD Address*	puston
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD Address* Street Address	puston
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD Address* Street Address 6431 Fannin Street	puston
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD Address* Street Address 6431 Fannin Street Address Line 2	ouston State / Province / Region
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD Address* Street Address 6431 Fannin Street Address Line 2 JJL 304	
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD Address* Street Address 6431 Fannin Street Address Line 2 JJL 304 City	State / Province / Region
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD Address* Street Address 6431 Fannin Street Address Line 2 JJL 304 City Houston	State / Province / Region TX
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD Address* Street Address 6431 Fannin Street Address Line 2 JJL 304 City Houston Postal / Zip Code	State / Province / Region TX Country
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD Address* Street Address 6431 Fannin Street Address Line 2 JJL 304 City Houston Postal / Zip Code 77030-1501 Phone Number* 7133645854	State / Province / Region TX Country
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD Address* Street Address 6431 Fannin Street Address Line 2 JJL 304 City Houston Postal / Zip Code 77030-1501 Phone Number* 7133645854 Email*	State / Province / Region TX Country
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD Address* Street Address 6431 Fannin Street Address Line 2 JJL 304 City Houston Postal / Zip Code 77030-1501 Phone Number* 7133645854	State / Province / Region TX Country
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD Address* Street Address 6431 Fannin Street Address Line 2 JJL 304 City Houston Postal / Zip Code 77030-1501 Phone Number* 7133645854 Email*	State / Province / Region TX Country
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD Address* Street Address 6431 Fannin Street Address Line 2 JJL 304 City Houston Postal / Zip Code 77030-1501 Phone Number* 7133645854 Email* Zi.Yang.Jiang@uth.tmc.edu	State / Province / Region TX Country
Name* The University of Texas Health Science Center at Ho Office of Educational Programs/Zi Yang Jiang, MD Address* Street Address 6431 Fannin Street Address Line 2 JJL 304 City Houston Postal / Zip Code 77030-1501 Phone Number* 7133645854 Email* Zi.Yang.Jiang@uth.tmc.edu	State / Province / Region TX Country US

Expense/GL Code No.* **Budget Unit Number*** Amount Charged to Unit* 1101 \$ 3,300.00 542000 **Budget Manager** Secondary Budget Manager Erica S. Brown Ricardo Campbell Provide Rate and Rate Descriptions if applicable * (?) UTHealth Fee \$3,300 Project WBS (Work Breakdown Structure)* (?) UTHealth Fee of \$3,300 Requester Name Submission Date Veronica A. Franco 2/24/2022 Budget Manager Approval(s) Approved by Approval Date Exica Brown 2/25/2022 Procurement Approval File Upload (?) Approved by Approval Date **Contract Owner Approval** Approved by Approval Date 3/2/2022 Contracts Approval Approve* Yes No, reject entire submission Return for correction Approved by * Approval Date* Shaskyia Behn 3/3/2022

% Executive Contract Summary

Mental Heslih and IDD	
Contract Section	^
Contractor*	
The Visual Influence	
Contract ID #*	
2022-0353	
Presented To *	
Resource Committee Full Board	
Full Board	
Date Presented*	
3/15/2022	
Parties* (?)	
The Visual Influence and The Harris Center for Mental H	lealth and IDD
Agenda Item Submitted For:* (?)	
✓ Information Only (Total NTE Amount is Less than \$50	0.000.00)
Board Approval (Total NTE Amount is \$50,000.00+)	5,000.007
Grant Proposal	
Revenue	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	☐ Competitive Proposal
Request for Proposal	✓ Sole Source
Request for Application	Request for Qualification
Request for Quote	☐ Tag-On
Interlocal	Consumer Driven
○ Not Applicable (If there are no funds required)	Other
Funding Information*	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
3/1/2022	2/28/2023
	212012023
If contract is off-cycle, specify the contract term (?)	
1 year	
Fiscal Year* (?)	Amount* (?)
2022	\$ 49,000.00
	The second secon
Funding Source*	
County	
•	

Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	✓ New Contract/Agreement
Memorandum of Understanding	 Amendment to Existing Contract
☐ Affiliation or Preceptor	Service/Maintenance
□ BAA/DUA	IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Serv	ices Being Provided* (?)
Required service to provide the World Cafe model CIC re project (Healthy Minds Healthy Communities)	lated intervention for the ARPA
Contract Owner*	
Jennifer Battle	
	*
Previous History of Contracting with Vendor/Contract	or [*]
○ Yes ○ No ● Unknown	
Vendor/Contractor a Historically Underutilized Busine	ess (HUB)* (?)
○ Yes ○ No ● Unknown	
Community Partnership * (?)	
○ Yes ○ No ⊚ Unknown	
Supporting Documentation Upload (?)	
TVI_THC_Proposal2022.pdf	2.18MB
Vendor/Contractor Contact Person	\circ
Name*	
Meg Davis	
Address*	
Street Address	
will have to get	
Address Line 2	
City	State / Province / Region
Housotn	Texas
Postal / Zip Code	Country
will have to get	United States
Phone Number*	
(832)588.0805	
Email*	
meg@thevisualinfluence.com	
Budget Section	O

Budget Unit Number* Amount Charged to Unit* Expense/GL Code No.* 7008 \$ 49,000.00 542000 Secondary Budget Manager **Budget Manager** Ricardo Campbell Erica S. Brown Provide Rate and Rate Descriptions if applicable * (?) attached Project WBS (Work Breakdown Structure)* (?) Requester Name **Submission Date** 2/15/2022 Jennifer A. Battle Budget Manager Approval(s) Approved by Approval Date Ricardo Campbell 2/15/2022 Procurement Approval File Upload (?) Approved by Approval Date Sharon Brauner 2/16/2022 Contract Owner Approval Approved by Approval Date Tennifer Battle 2/16/2022 Contracts Approval Approve* Yes No, reject entire submission Return for correction Approved by * Approval Date* Shaskijia Behn 2/16/2022

EXHIBIT F-9

March 2022 RENEWALS UNDER 50k

SNAPSHOT SUMMARY CONTRACT RENEWALS LESS THAN \$50,000

CONTRACTORS		PRODUCT/SERVICE	FY2021	FY2022	CONTRACT PERIOR	FUNDANO	DIDITAG OU	
CONTRACTORS FY22 CONTRACT RENEWALS	HUB/MWBE	DESCRIPTION	NTE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
ADMINISTRATION 1 HARMAN Connected Services	No	Adobe Flash Support Services for Access to Kronos	\$25,000.00	\$25,000.00	02/12/22- 02/12/23	GR	N/A	Annual Renewal of Agreement
CPEP/CRISIS SERVICES								
FORENSICS								
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES								
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI								
LEASES								
MENTAL HEALTH SERVICES								

HARRIS CENTER JO

Annual Renewal Evaluation

Evaluation of Current Fiscal Year Performance

Current Fiscal Year Contract Information Current Fiscal Year 2022 Contract ID#* 2021-0093 Contractor Name* HARMAN Connected Services Service Provided * (?) HARMAN provides Adobe Flash Support Services for access to Kronos. Term for Off-Cycle Only * 2/12/2021 - 2/12/2022 Procurement Method(s)* Check all that Apply Competitive Bid Competitive Proposal Request for Proposal Sole Source Request for Application Request for Qualification Request for Quote Tag-On Interlocal Consumer Driven Not Applicable (If there are no funds required) Other No Procurement Contract NTE* (?) \$25,000 Rate(s)/Rate(s) Description Unit(s) Served* 1130 G/L Code(s)* 551002 Current Fiscal Year Purchase Order Number* ST140909 Contract Requestor* Anthony Jones Contract Owner* Mustafa Cochinwala File Upload (?) Harman Connected - ID 2021-0093 - Limited License Agreement -2.34MB Partially Executed.pdf

○ Yes ● No	formance deficiencies within the cui	rrent fiscal year? ^
Were Services delivered as specifie ■ Yes □ No	d in the contract?*	
Did Contractor perform duties in a r ■ Yes ○ No	manner consistent with standards of	the profession?*
Did Contractor adhere to the contra ● Yes ○ No	cted schedule?*(?)	
Were reports, billing and/or invoice: ⊚ Yes ○ No	s submitted in a timely manner?* (?)	
Agency?* (?)	proper supporting documentation o	f time spent rendering services for the
	sistent with Agency policy and proce	edures?* (?)
Yes O NoMaintained legally required standarYes O No	ds for certification, licensure, and/or	training?* (?)
Renewal Determination		0
Is the contract being renewed for no	ext fiscal year with this Contractor?*	[†] (?)
Renewal Information for No	ext Fiscal Year	6
Budget Units and Amounts		
	Charged to each Budget C	Init
Budget Unit Number*	Amount Charged to Unit* \$ 25,000.00	Jnit Expense/GL Code No.* 553002
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.* 553002
Budget Unit Number* 1130 Budget Manager*	Amount Charged to Unit* \$ 25,000.00 Secondary Budg	Expense/GL Code No.* 553002
Budget Unit Number* 1130 Budget Manager*	Amount Charged to Unit* \$ 25,000.00 Secondary Budg	Expense/GL Code No.* 553002
Budget Unit Number* 1130 Budget Manager* Ricardo Campbell Fiscal Year* (?)	Amount Charged to Unit* \$ 25,000.00 Secondary Budg Erica S. Brown Amount* (?) \$ 25,000.00	Expense/GL Code No.* 553002
Budget Unit Number* 1130 Budget Manager* Ricardo Campbell Fiscal Year* (?) 2022 Next Fiscal Year Not to Exceed Amo	Amount Charged to Unit* \$ 25,000.00 Secondary Budg Erica S. Brown Amount* (?) \$ 25,000.00	Expense/GL Code No.* 553002
Budget Unit Number* 1130 Budget Manager* Ricardo Campbell Fiscal Year* (?) 2022 Next Fiscal Year Not to Exceed Amo 50,000.00 Contract Funding Source*	Amount Charged to Unit* \$ 25,000.00 Secondary Budg Erica S. Brown Amount* (?) \$ 25,000.00 Dount for Master Pooled Contracts	Expense/GL Code No.* 553002

Will the scope of the Services change?* Yes No	
Is the payment deadline different than net (45)?*	
Yes No	
Are there any changes in the Performance Targets?*	
○ Yes ◎ No	
Are there any changes to the Submission deadlines f	or notes or supporting documentation?*
Yes No File Upload (?)	
The opioad (i)	
Contract Owner	
Contract Owner* (?)	
Please Select Contract Owner Mustafa Cochinwala	
Budget Manager Approval(s)	\circ
Approved by	
Ricardo Campbell	
Maria Camprea	
Contract Owner Approval	
Approved by	
Mustafa Cochinwala	
Contracts Approval	
Approve*	
YesNo, reject entire submission	-
Return for correction	
Approved by *	
C O.	Approval Date*
Shaskyia Behn	2/28/2022

EXHIBIT F-10

March 2022 AMENDMENTS UNDER 50k

SNAPSHOT SUMMARY CONTRACT AMENDMENTS LESS THAN \$50,000

CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE DESCRIPTION	PREVIOUS AMOUNT	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
FY21/22 AMENDMENTS									
ADMINISTRATION									
Crothall Facilities Management,	No	Preventative Maintenance Services for medical equipment at NPC.	\$3,080.00	\$2,805.58	\$5,885.58	01/01/22- 12/31/22	GR	N/A	This Amendment is to change to full coverage level that will cover all labor, repairs, travel, parts, planned maintenance and electrical safety.
NETSPI, LLC	No	Network Penetration Testing Services	\$19,390.50	\$28,423.80	\$47,814.30	09/01/21- 08/31/22	GR	RFQuote	This Amendment is for a change order that was requested in FY21, but was not implemented in FY21; therefore funds are being requested for FY22. This request is a result of one or more of the following: Addition of Services 1. Change in number of systems or applications in scope 2. Change in regulatory requirements
Pingboard, Inc.	No	Real-time Organizational Charting and Planning Software Tool selected by the Executive Group	\$18,891.60	\$142.68	\$19,034.28	09/01/21- 08/31/22	GR	Tag-On	This Amendment is to increase funds for the additional increase in Users
CPEP/CRISIS SERVICES									
CRISIS SERVICES									
FORENSICS									
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES									
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI									
INTERLOCALS									
LEASES									
MENTAL HEALTH SERVICES									

Executive Contract Summary

Contract Section	
Contractor* Crothall Facilities Management, Inc	
Contract ID #* 6678	
Presented To * Resource Committee Full Board	
Date Presented* 3/15/2022	
Parties*(?) Crothall Facilities Management, Inc and The Harris Cente	r for Mental Health and IDD
Agenda Item Submitted For: * (?) Information Only (Total NTE Amount is Less than \$50,000.00+) Board Approval (Total NTE Amount is \$50,000.00+) Grant Proposal Revenue Other	000.00)
Procurement Method(s) * Check all that Apply	
Competitive Bid Request for Proposal Request for Application Request for Quote Interlocal Not Applicable (If there are no funds required)	Competitive Proposal Sole Source Request for Qualification Tag-On Consumer Driven Other
Funding Information * New Contract Amendment	
Contract Term Start Date * (?) 1/1/2022	Contract Term End Date * (?) 12/31/2022
If contract is off-cycle, specify the contract term (?)	
Current Contract Amount* \$ 3,080.00	

Increase Not to Exceed *	
\$ 2,805.58	
P	
Revised Total Not to Exceed (NTE) *	
\$ 5,885.58	
Fiscal Year* (?)	Amount*(?)
2023	\$ 5,885.58
Funding Source *	
General Revenue (GR)	
Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Serv	ices Being Provided * (?)
The current contract is for Planned Maintenance only. Ch	anging it to Full Coverage Level
will cover all labor, repairs, travel, parts, Planned Mainten	- ·
Director: Evelyn Locklin	
Contract Owner*	
Kim Kornmayer	
Previous History of Contracting with Vendor/Contract	tor*
Yes No Unknown	
Diogga and providing contrast datas and what consider	a wara manidad*
Please add previous contract dates and what service	s were provided
Currently under contract	
Vendor/Contractor a Historically Underutilized Busine	ess (HUB) * (?)
Yes No Unknown	
Community Partnership * (?)	
Yes No Unknown	
Supporting Documentation Upload (?)	
· · · · · · · · · · · · · · · · · · ·	
Vendor/Contractor Contact Person	
Name *	
Kenneth James	

Page 118 of 159

Address*

Street Address

1500 Liberty Ridge Dr.

Address Line 2

Suite 210

City

State / Province / Region

Wayne
Postal / Zip Code

PA Country

19087

United States

Phone Number * 631-972-5245

Email*

Kenneth.James@Crothall.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*

Amount Charged to Unit*

Expense/GL Code No.*

9206

\$ 1,402.79

553000

Budget Manager

Secondary Budget Manager

Jodel Oshman

Kimberly A. Kornmayer

Budget Unit Number*

Amount Charged to Unit*

Expense/GL Code No.*

9209

\$ 1,402.79

553000

Budget Manager

Secondary Budget Manager

Jodel Oshman

Kimberly A. Kornmayer

Provide Rate and Rate Descriptions if applicable *(?)

NA

Project WBS (Work Breakdown Structure) * (?)

NA

Requester Name

Submission Date

Patricia R. Singh

2/15/2022

Budget Manager Approval(s)

Approved by

Approval Date

Todel Oshman

2/15/2022

Contract Owner Approval

Approved by	
Kin Kop NMAYER	Approval Date 2/17/2022
Contracts Approval	
Approve*	
Yes	
O No, reject entire submission	
Return for correction	
Approved by*	
	Approval Date *
Shaskyia Behn	2/18/2022
-	

Marris Executive Contract Summary

Mental Health and IDD	······ ,
Contract Section	
Contractor* NETSPI	
Contract ID #* 7679	
Presented To * ■ Resource Committee □ Full Board	
Date Presented* 3/15/2022	
Parties* (?) NETSPI THC	
Agenda Item Submitted For: * (?) Information Only (Total NTE Amount is Less than \$50 Board Approval (Total NTE Amount is \$50,000.00+) Grant Proposal Revenue Other	,000.00)
Procurement Method(s)*	
Check all that Apply ☐ Competitive Bid ☐ Request for Proposal ☐ Request for Application ☑ Request for Quote ☐ Interlocal ☐ Not Applicable (If there are no funds required)	Competitive Proposal Sole Source Request for Qualification Tag-On Consumer Driven Other
Funding Information*	
New Contract	
Contract Term Start Date * (?) 9/1/2021	Contract Term End Date * (?) 8/31/2022
If contract is off-cycle, specify the contract term (?)	
Current Contract Amount* \$ 19,390.50	
Increase Not to Exceed* \$ 28,423.80	
Revised Total Not to Exceed (NTE)* \$ 47,814.30	

Address* Street Address 800 WASHINGTON AVE Address Line 2 City State / Province / Region **MINNEAPOLIS** Postal / Zip Code Country 55401 United States Phone Number* 8882700317 Email* Oguljan.Jumakuliyeva@netspi.com **Budget Section** Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit* Budget Unit Number* Expense/GL Code No.* 553003 1130 \$ 28,423.80 **Budget Manager** Secondary Budget Manager Ricardo Campbell Erica S. Brown Provide Rate and Rate Descriptions if applicable * (?) Addition of services \$28,423.80 USD Project WBS (Work Breakdown Structure)* (?) N/A Requester Name Submission Date Shawnti R. Boswell 2/16/2022 Budget Manager Approval(s) Approved by Approval Date Ricardo Campbell 2/16/2022 Procurement Approval File Upload (?) Approved by Approval Date Sign **Contract Owner Approval**

Approved by	Approval Date
Mustafa Cochinwala	2/17/2022
Museuga Communica	ETTTEGE
Contracts Approval	
Approve*	
Yes	
 No, reject entire submission 	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	2/17/2022

HARRIS Executive Contract Summary

Mental Health and IDD	
Contract Section	<u> </u>
Contractor* PINGBOARD, INC.	
Contract ID #* 7323	
Presented To* Resource Committee Full Board	
Date Presented* 3/15/2022	
Parties* (?) THE HARRIS CENTER, PINBOARD, INC.	
Agenda Item Submitted For: * (?) Information Only (Total NTE Amount is Less than \$50 Board Approval (Total NTE Amount is \$50,000.00+) Grant Proposal Revenue Other CONTRACT AMENDMENT	0,000.00)
Procurement Method(s)* Check all that Apply	
Competitive Bid Request for Proposal Request for Application Request for Quote Interlocal Not Applicable (If there are no funds required)	 Competitive Proposal Sole Source Request for Qualification Tag-On Consumer Driven Other
Funding Information* New Contract Amendment	
Contract Term Start Date * (?) 9/1/2021	Contract Term End Date* (?) 8/31/2022
If contract is off-cycle, specify the contract term (?)	
Current Contract Amount* \$ 18,891.60	
Increase Not to Exceed* \$ 142.68	
Revised Total Not to Exceed (NTE)* \$ 19,034.28	

2022	
2022 \$	19,034.28
Funding Source*	
General Revenue (GR)	
Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
■ BAA/DUA	IT/Software License Agreement
	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Services	Being Provided* (?)
ACCOUNT BALANCE \$71.34	
Contract Owner*	
Lesleigh Robertson	
Lesieigh Robertson	
Previous History of Contracting with Vendor/Contractor*	
Vendor/Contractor a Historically Underutilized Business ((HUB)* (?)
○ Yes ○ No ● Unknown	,
Community Partnership* (?)	
Supporting Documentation Upload (?)	
Vendor/Contractor Contact Person	
Name*	
PINGBOARD, INC	
Address*	
Street Address	
608 West Monroe Street	
Address Line 2	
SUITE A	
	te / Province / Region
Austin TX	
	intry
78704 US	
Phone Number*	
8777335157	
Email*	
BILLING@PINGBOARD.COM	
Budget Section	

Budget Units and Amou	unts Charged to e	ach Budget Un	nit
Budget Unit Number*	Amount Charge \$ 142.68	d to Unit*	Expense/GL Code No.* 553002
Budget Manager Brown, Erica		Secondary Budget Campbell, Ricardo	t Manager
Provide Rate and Rate Descrip	tions if applicable * (?)		
Project WBS (Work Breakdown	structure)* (?)		
Requester Name Turcios, Livia		Submission Date 1/31/2022	
Budget Manager Appro	oval(s)		•
Approved by			
Enica Brown		Approval Date 2/2/2022	
Procurement Approval			Ó
File Upload (?)			
Approved by		Approval Date	
Contract Owner Approx	/al	and the second s	<u> </u>
Approved by			
Terence Greeman		Approval Date 2/8/2022	
Contracts Approval			
Approve*			
YesNo, reject entire submissionReturn for correction			
Approved by *			
Shaskyia Behn		Approval Date* 2/8/2022	

EXHIBIT F-11

March 2022 Affiliation Agreements, Grants, MOU's and Revenues Information Only

CONTRACTORS	HUBs/MWBE	PRODUCT/SERVICE DESCRIPTION	ACTION TYPE	CONTRACT PERIOD	FUNDING	COMMENTS
FY22 CONTRACTS						
AFFILIATION AGREEMENTS						
Smart IRB/UT Health Science Center	No	Centralized Review of Research Proposals	New	02/14/22- 08/31/22	GR	The Agency proposes to enter into an agreement with Smart IRB to allow centralized review of Research proposals at no cost to the agency. UT Health Science Center would actually perform these reviews in return for one volunteer who would participate in their committee.
MOU						
2 Origins Learning Community	No	Enhancing Service Connections, Service Delivery, Early Childhood Systems, and Outcomes for Children and Families in the Community	New	02/22/22- 08/31/22	State Grant	The purpose is to establish a partnership/MOU with Origins Learning Community for the purpose of enhancing service connections, service delivery, early childhood systems, and outcomes for children and families in the community. Origins Learning Community will send appropriate referrals to the Agency ECI program. The ECI program will provide appropriate services for the children and families. Services include: Occupational Therapy, Physical Therapy, Speech-language Therapy, Specialized Skills Training (SST), Case Management, Service Coordination, Counseling, Services to children who are deaf or hard of hearing, Services to children who are visually impaired, Nutrition Services, and Nursing.
Memorial Hermann Community Benefit		Care Coordination				This Amendment is to provide placement of a bilingual care coordinator one day per week to address care coordination activities in a manner that is person and family-centered. Agency agrees to provide initial screening, intake, and as capacity permits appropriate treatment to clients referred to Agency for the provision of community-based mental health as substance use disorder services, and to establish and maintain records of such individuals' healthcare. The locations are: 1. Memorial Hermann Neighborhood Health Center-Greater Heights at 1800 W 26th St #103, Houston, Texas 77008 2. Memorial Hermann Neighborhood Health Center-Southwest at 7600 Beechnut St. Suite A, Houston, Texas 77074 3. Memorial Hermann Neighborhood Health Center-Northeast at 19333 US-59 #280, Humble, Texas
3 Corporation	No	Agreement	Amendment	02/13/21- 08/31/22	GR	77338

	CONTRACTORS	HUBs/MWBE	PRODUCT/SERVICE DESCRIPTION	ACTION TYPE	CONTRACT PERIOD	FUNDING	COMMENTS
4	Prevention Resource Center Region 6	No	Mental Health First Aid	New	03/01/22- 08/31/22	Federal Funds	The Community Training Department with the Agency provides Mental Health First Aid courses to entities who request them.
	REVENUE						
5		No	Data Support IRB-Approved Research	New	02/21/22- 05/31/22	Private Pay Source	This Agreement is providing data to support IRB- approved research effort to build a culturally sensitive and appropriate suicide assessment for African American teens.
6	Harris County	No	Competency and Sanity Evaluations	Interlocal/ Revenue Renewal (\$1,204,247.00)	03/01/22- 02/28/23	County Funds	Annual Renewal of Agreement FY22: \$602,124.00 FY23: \$602,123.00
7	Harris County	No	Community Initiated Care Program Services	New Interlocal/ Revenue (\$8,931,880.00)	11/01/21- 11/30/24	County Funds	This Agreement is a request by the Office of County Administration for approval of a three-year Interlocal Agreement with the Agency in the amount of \$8,931,880.00 for the development of a Community Initiated Care Program providing Behavioral Health-related Cutreach, Training, and Services in response to the Mental Health Impacts of the COVID-19 Pandemic. \$3,010,700.00 allocated in year 1; \$2,960,590.00 allocated in year 2; \$2,960,590.00 allocated in year 3
	The state of the s		Trogram contico	(00,001,000.00)	1,10,12,1,110,12,1		, , , , , , , , , , , , , , , , , , ,
					-		
							
	V5.17 - 1.1 (1.1 - 1.1 -						

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Man	7177 18 2	mind:	27777	1101

Executive Contract Summary

Mental Health and IDD	
Contract Section	<u> </u>
Contract Section	_
Contractor*	
Smart IRB/UTHSC	
Contract ID #*	
2022-0349	
Presented To*	
Resource Committee Sull Board	
Full Board	
Date Presented*	
3/15/2022	
Parties* (?)	
UTHSC and The Harris Center	
* (2)	
Agenda Item Submitted For: * (?)	0.000.00
✓ Information Only (Total NTE Amount is Less than \$5 ■ Board Approval (Total NTE Amount is \$50,000.00+)	0,000.00)
Grant Proposal	
Revenue	
Other	
Procurement Method(s) *	
Check all that Apply	
☐ Competitive Bid☐ Request for Proposal	 ☐ Competitive Proposal ☐ Sole Source
Request for Application	Request for Qualification
Request for Quote	☐ Tag-On
☐ Interlocal	Consumer Driven
✓ Not Applicable (If there are no funds required)	☐ Other
Funding Information*	
New Contract	

Contract Term Start Date * (?)	Contract Term End Date * (?)
2/14/2022	8/31/2022
If contract is off-cycle, specify the contract term (?)	
Fiscal Year* (?)	Amount* (?)
2022	\$ 0.00
Funding Source*	
General Revenue (GR)	

Contract Description / Type * (?)				
Personal/Professional Services	Consultant			
Consumer Driven Contract	New Contract/Agreement			
Memorandum of Understanding	Amendment to Existing Contract			
 ✓ Affiliation or Preceptor ☐ BAA/DUA 	Service/Maintenance			
☐ BAA/DUA ☐ Pooled Contract	☐ IT/Software License Agreement ☐ Lease			
Renewal of Existing Contract	Other			
The state of the s				
Justification/Purpose of Contract/Description of Serv	ices Being Provided* (?)			
The Harris Center proposes to enter into an agreement was review of Research proposals at no cost to the agency. Use actually perform these reviews in return for one volunteer committee.	T Health Science Center would			
Contract Owner*				
Dr. Scott Hickey				
Previous History of Contracting with Vendor/Contrac	***			
	toi			
Vendor/Contractor a Historically Underutilized Busine	ess (HUB)* (?)			
Community Partnership* (?)				
Yes No Unknown				
Specify Name*				
Smart IRB				
Supporting Documentation Upload (?)				
SMART_IRB_Agreement_Sample_Agreement.cleaned (1).pdf 515.33KB			
Vendor/Contractor Contact Person	⊙			
Name*				
Smart IRB c/o Harvard Catalyst				
Address*				
Street Address				
Harvard Medical School				
Address Line 2				
401 Park Drive				
City	State / Province / Region			
Boston	MA			
Postal / Zip Code	Country			
02215	United States			
Phone Number*				
unavailable				
Email*				
help@smartirb.org				
Budget Section	<u> </u>			

Budget Units and Amounts Charged to each Budget Unit			
Budget Unit Number* 1148	Amount Charged to Un \$ 0.00	Expense 542000	/GL Code No.*
Budget Manager Campbell, Ricardo		ndary Budget Manager n, Erica	
Provide Rate and Rate Descriptions	if applicable * (?)		
Project WBS (Work Breakdown Stru N/A	cture)* (?)		
Requester Name Hickey, Scott	Subm 2/9/20	nission Date 022	
Budget Manager Approval(s)	4.54	Ô
Approved by Ricardo Campbell	Appro 2/9/20	oval Date 022	
Procurement Approval	on the state of th	ali da waa kana dhaa ahaa ahaa ahaa ahaa ahaa ahaa a	
File Upload (?)			
Approved by Sign	Appro	oval Date	
Contract Owner Approval			0
Approved by Scott Hickey	Appre 2/9/20	oval Date 022	
Contracts Approval			
Approve* Yes No, reject entire submission Return for correction			
Approved by *	Appro	oval Date*	
Shaskyia Behn	2/10/2	2022	

Riarris Executive Contract Summary

Mental Health and IDD	
Contract Contract	
Contract Section	
Contractor*	
Origins Learning Community	
Contract ID #*	
2022-0350	
Presented To*	
Resource Committee	
○ Full Board	
Date Presented*	
3/15/2022	
4	
Parties* (?)	
Origins Learning Community and The Harris Center for M	lental Health and IDD
Agenda Item Submitted For: * (?)	
☑ Information Only (Total NTE Amount is Less than \$50)	000.00)
Board Approval (Total NTE Amount is \$50,000.00+)	(300.00)
Grant Proposal	
Revenue	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	Competitive Proposal
Request for Proposal	Sole Source
Request for Application	Request for Qualification
Request for Quote	☐ Tag-On
Interlocal	✓ Consumer Driven
Not Applicable (If there are no funds required)	✓ Other Professional Service agreement
Funding Information *	
New Contract	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
2/22/2022	8/31/2022
If contract is off-cycle, specify the contract term (?)	
N/A	
N/A	
Fiscal Year* (?)	Amount* (?)
2022	\$ 0.00
The second secon	
Funding Source*	
State Grant	

Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	✓ New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
■ BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	✓ Other Professional Service Agreement
Justification/Purpose of Contract/Description of Services Being Provided * (?) The purpose is to establish a partnership/MOU with Origins Learning Community for the purpose of enhancing service connections, service delivery, early childhood systems, and outcomes for children and families in the community. Origins Learning Community will send appropriate referrals to the Harris Center for Mental Health and IDD ECI program. The ECI	
program will provide appropriate services for the children an include: Occupational therapy Physical therapy Speech-language therapy	d families. Services can
Specialized Skills Training (SST) Case management Service Coordination Counseling	
Services to children who are deaf or hard of hearing Services to children who are visually impaired Nutrition Services	
Nursing	
Origins Learning Community is seeking to establish a grant through DFPS for the improvement of services for children and families in the local community.	
Contract Owner* Mike Downey	
Previous History of Contracting with Vendor/Contractor	*
○ Yes ® No ○ Unknown	
Vendor/Contractor a Historically Underutilized Business (HUB) * (?) ○ Yes ○ No ● Unknown	
Community Partnership * (?) ● Yes ○ No ○ Unknown	
Specify Name* Origins Learning Community	
Supporting Documentation Upload (?)	
Origins Learning Community - Home.html	52.65KB
Vendor/Contractor Contact Person	
Name* Regina Puckett	

Address* Street Address 4630 Cashel Glen Drive Address Line 2 City State / Province / Region Houston Texas Postal / Zip Code Country 77069 USA Phone Number* 281-703-2539 Email* regina@originslearningcommuity.org **Budget Section** Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit* Expense/GL Code No.* Budget Unit Number* 3360 \$ 0.00 N/A **Budget Manager** Secondary Budget Manager Adams-Austin, Mamie Downey, Michael Provide Rate and Rate Descriptions if applicable * (?) N/A Project WBS (Work Breakdown Structure)* (?) N/A Requester Name Submission Date Childs, Margo 2/9/2022 Budget Manager Approval(s) Approved by Approval Date Mamie Oddams-Austin 2/9/2022 Procurement Approval File Upload (?) Approved by Approval Date Sign Contract Owner Approval

Approved by

Michael Downey

Approval Date

2/14/2022

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

Approved by *

Shaskyia Behn

Approval Date*

2/14/2022

HARRIS Executive Contract Summary

Mental Health and IDD	
Contract Section	<u> </u>
Contractor*	
Memorial Hermann Community Benefit Corporation	
Contract ID #*	
2021-0094	
Presented To *	
Resource Committee	
⊚ Full Board	
Date Presented*	
3/15/2022	
Parties* (?)	
Memorial Hermann Community Benefit Corporation and	The Harris Center for Mental Health and IDD Services
Agenda Item Submitted For:* (?)	
✓ Information Only (Total NTE Amount is Less than \$50	0,000,000
Board Approval (Total NTE Amount is \$50,000.00+)	
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
☐ Competitive Bid	☐ Competitive Proposal
Request for Proposal	☐ Sole Source
Request for Application	Request for Qualification
Request for Quote	☐ Tag-On
Interlocal	Consumer Driven
✓ Not Applicable (If there are no funds required)	Other
Funding Information*	
New Contract Amendment	
Contract Term Start Date * (?)	Contract Term End Date * (?)
2/1/2022	8/31/2022
If contract is off-cycle, specify the contract term (?)	
Current Contract Amount*	
\$ 0.00	
Increase Not to Exceed*	
\$ 0.00	
Revised Total Not to Exceed (NTE)*	
\$ 0.00	

Fiscal Year* (?) 2022	Amount* (?) \$ 0.00
Funding Source* Private Pay Source	
Contract Description / Type* (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
■ BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	✓ Other Care Coordination Agreement
Justification/Purpose of Contract/Description of Serv	ices Being Provided* (?)
Access Points: Southwest - 7600 Beechnut, Ste A, Houst West 26th Street, Ste 101, Houston 77008; Humble - 193 77338	ton, 77074; Greater Height - 1800
Placement of a bilingual care coordinator one day per we activities in a manner that is person and family-centered. screening, intake, and as capacity permits appropriate tre Agency for the provision of community-based mental hea services, and to establish and maintain records of such in	Agency agrees to provide initial eatment to clients referred to lth as substance use disorder
Contract Owner* Mike Downey	
Previous History of Contracting with Vendor/Contract • Yes O No O Unknown	tor*
Please add previous contract dates and what services current: 09-01-2021 to 08-31-2022	s were provided*
Vendor/Contractor a Historically Underutilized Busine ○ Yes ○ No ● Unknown	ess (HUB)* (?)
Community Partnership* (?) ○ Yes ○ No ○ Unknown	
Supporting Documentation Upload (?) Care coordination Agreement - The Harris Center for Mer IDD - May 2021.pdf	ntal Health and 1.64MB
Vendor/Contractor Contact Person	
Name* Christalyn Williams, LCSW-S	

Address* 18838 South Memorial Drive Humble TX 77338 US Phone Number* 713-814-2474 office / 713-704-3855 fax Email* christalyn.williams@memorialhermann.org **Budget Section** Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit* Budget Unit Number* Expense/GL Code No.* 2200 000000 \$ 0.00 **Budget Manager** Secondary Budget Manager Debbie C. Shelby Angelica D. Loera Provide Rate and Rate Descriptions if applicable * (?) 0.00 Project WBS (Work Breakdown Structure)* (?) 0.00 Submission Date Requester Name 3/7/2022 Debbie C. Shelby Budget Manager Approval(s) Approved by Approval Date Debbie Chambers Shelby 3/7/2022 **Contract Owner Approval** Approved by Approval Date Michael Downey 3/7/2022 Contracts Approval

Approve*

- Yes
- O No, reject entire submission
- O Return for correction

Approved by *

Shaskyia Behn

Approval Date*

3/7/2022

HARRIS CENTER for

Executive Contract Summary

Mental Health and IDD	
Contract Section	
Contractor*	
Prevention Resource Center Region 6	
Contract ID #*	
2022-0354	
Presented To*	
Resource Committee Full Board	
- Full Board	
Date Presented*	
3/15/2022	
Parties* (?)	
The Harris Center for Mental Health and IDD and Preven	tion Resource Center Region 6
Agenda Item Submitted For: * (?)	
☐ Information Only (Total NTE Amount is Less than \$50	,000.00)
Board Approval (Total NTE Amount is \$50,000.00+)	
Grant Proposal	
Revenue	
✓ Other MOU	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	☐ Competitive Proposal
Request for Proposal	Sole Source
Request for Application	Request for Qualification
Request for Quote	☐ Tag-On
Interlocal	Consumer Driven
☐ Not Applicable (If there are no funds required)	✓ Other n/a
Funding Information*	
New Contract Amendment	
Contract Term Start Date* (?)	Contract Term End Date* (?)
3/1/2022	8/31/2022
If contract is off-cycle, specify the contract term (?)	
Fiscal Year* (?)	Amount* (?)
2022	\$ 0.00
Funding Source*	
Federal	

Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Ser	vices Being Provided * (?)
The Community Training Department provides Mental H who request them.	
Contract Owner*	
Keena Pace	
Reena Pace	
Previous History of Contracting with Vendor/Contracting	ctor*
○ Yes ○ No ⑨ Unknown	
Vendor/Contractor a Historically Underutilized Busir	1000 (HIID) * (2)
	less (nob) (ii)
○ Yes ○ No ● Unknown	
Community Partnership* (?)	
○ Yes ○ No ⑨ Unknown	
Supporting Decumentation Unlead (2)	
Supporting Documentation Upload (?)	0.10.0.116
PRC 6 MOU_CA FY2022 20211004 (1).pdf	340.64KB
Vendor/Contractor Contact Person	
Name*	
Mary H. Beck	
Address*	
Street Address	
The Council on Recovery	
Address Line 2	
303 Jackson Hill Street	Over 1D and a 1D and a
City Houston	State / Province / Region
	TX
Postal / Zip Code 77007	Country Harris County
77007	nams county
Phone Number*	
713-942-4100	
Email*	
mbeck@councilonrecovery.org	
Budget Section	
Budget Units and Amounts Charged to	each Budget Unit

Budget Unit Number* Amount Charged to Unit* Expense/GL Code No.* 7003 \$ 0.00 543058 **Budget Manager** Secondary Budget Manager Ricardo Campbell Erica S. Brown Provide Rate and Rate Descriptions if applicable * (?) n/a Project WBS (Work Breakdown Structure) * (?) Requester Name Submission Date Carroll C. Prasad 2/16/2022 Budget Manager Approval(s) Approved by Approval Date Ricardo Campbell 2/16/2022 Procurement Approval File Upload (?) Approved by Approval Date Sign **Contract Owner Approval** Approved by Approval Date 2/16/2022 Contracts Approval Approve* Yes No, reject entire submission Return for correction Approved by * Approval Date* Shaskyia Behn 2/17/2022

Executive Contract Summary Contract Section Contractor* Scott Hickey to Contract with U of Houston Psychology Contract ID #* 2022-0357 Presented To* Resource Committee Full Board Date Presented* 3/15/2022 Parties* (?) U of Houston and Harris Center Agenda Item Submitted For: * (?) ✓ Information Only (Total NTE Amount is Less than \$50,000.00) Board Approval (Total NTE Amount is \$50,000.00+) Grant Proposal ✓ Revenue Other Procurement Method(s)* Check all that Apply Competitive Bid Competitive Proposal Request for Proposal Sole Source Request for Qualification Request for Application Request for Quote Tag-On Consumer Driven Interlocal Not Applicable (If there are no funds required) Other Funding Information* New Contract Amendment Contract Term Start Date * (?) Contract Term End Date * (?) 2/21/2022 5/31/2022 If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2022

Funding Source*

Private Pay Source

Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Ser	vices Being Provided* (?)
Providing data to support IRB-approved research effort t	
appropriate suicide assessment for African American tee	to transcend to the secretariate • Herear repeated statement
Contract Owner*	
Dr. Scott Hickey	
Previous History of Contracting with Vendor/Contracting	etor*
○ Yes ● No ○ Unknown	5.01
Tes No Unknown	
Vendor/Contractor a Historically Underutilized Busin	ness (HUB)* (?)
○ Yes ○ No ⑨ Unknown	
2	
Community Partnership* (?)	
Yes O No O Unknown	
Specify Name*	
University of Houston Psychology	
Supporting Documentation Upload (?)	
Vendor/Contractor Contact Person	
Name*	
Olga Litvinova, University of Houston Office of Contracts	: &
Grants	
Address*	
Street Address	
4800 Calhoun Road	
Address Line 2	
316 E. Cullen Building	Ctate / Province / Deglan
City Houston	State / Province / Region TX
Postal / Zip Code	Country
77004-2610	US
Phone Number*	
832-842-8851	
Email*	
ostickli@Central.UH.EDU	
Budget Section	

Budget Units and Amounts	s Charged to e	each Budget Ur	nit
Budget Unit Number* 1148	Amount Charge \$ 0.00	d to Unit*	Expense/GL Code No.* 542000
Budget Manager Ricardo Campbell		Secondary Budget Erica S. Brown	t Manager
Provide Rate and Rate Descriptions U of H will pay \$5,000.00 for this serv correct the GL Code above. Thanks			
Project WBS (Work Breakdown Street Hickey will perform	ucture)* (?)		
Requester Name Scott Hickey, PHD		Submission Date 2/21/2022	
Budget Manager Approval	(s)		
Approved by Ricardo Campbell		Approval Date 2/22/2022	
Procurement Approval			<u> </u>
File Upload (?)			
Approved by Sign		Approval Date	
Contract Owner Approval			0
Approved by Scott Hickey		Approval Date 2/24/2022	
Contracts Approval			
Approve* Yes No, reject entire submission Return for correction Approved by *			
Shaskyia Behn		Approval Date * 2/24/2022	

HARRIS CENTER for

Annual Renewal Evaluation

Current Fiscal Year Contract Information Current Fiscal Year 2022 Contract ID#* 6761 Contractor Name* Harris County Service Provided * (?) Competency and Sanity Evaluations of Harris County Inmates Housed in HC Detention Facilities and Defendants Out on Bonds Term for Off-Cycle Only* 03/01/22-02/28/23 Procurement Method(s)* Competitive Bid Competitive Proposal Request for Proposal Sole Source Request for Application Request for Qualification Request for Quote Tag-On ✓ Interlocal Consumer Driven □ Not Applicable (If there are no funds required) ✓ Other Revenue Contract NTE* (?) \$1,204,247 Rate(s)/Rate(s) Description Unit(s) Served* N/A G/L Code(s)* Current Fiscal Year Purchase Order Number* N/A Contract Requestor* Sheenia Williams-Wesley Contract Owner* Monalisa Jiles File Upload (?)

Evaluation of Current Fiscal Year Performance

A

Have there been any significant per Yes No	formance deficien	cies within the curre	ent fiscal year?*
Were Services delivered as specifie Yes No	d in the contract?	*	
Did Contractor perform duties in a r Yes No	nanner consistent	with standards of ti	ne profession?*
Did Contractor adhere to the contra ⊚ Yes ○ No	cted schedule?*	?)	
Were reports, billing and/or invoices • Yes • No	s submitted in a ti	mely manner?* (?)	
Did Contractor provide adequate or Agency?* (?) • Yes • No	proper supporting	g documentation of t	time spent rendering services for the
Did Contractor render services cons	sistent with Agend	cy policy and proced	ures?* (?)
Maintained legally required standar	ds for certification	n, licensure, and/or to	raining?* (?)
Renewal Determination			
Is the contract being renewed for no	ext fiscal year with	this Contractor?*	?)
Renewal Information for Ne	ext Fiscal Yea	r	•
Budget Units and Amounts	Charged to e	each Budget Un	iit
Budget Unit Number* 6205	Amount Charge \$ 1,204,247.00	d to Unit [*]	Expense/GL Code No.* n/a
Budget Manager* Sheenia L. Williams-Wesley		Secondary Budget Monalisa Jiles	Manager*
Fiscal Year* (?)		Amount* (?)	
2022 Fiscal Year* (?)		\$ 602,124.00 Amount* (?)	
2023		\$ 602,123.00	
Next Fiscal Year Not to Exceed Amo	ount for Master Po	oled Contracts	
Contract Funding Source* County			
Contract Content Changes			^

Are there any required changes to the contract language?* (?) Yes No
Will the scope of the Services change?*
○ Yes ● No
Is the payment deadline different than net (45)?*
Yes No
Are there any changes in the Performance Targets?* Yes No
Are there any changes to the Submission deadlines for notes or supporting documentation?*
○ Yes ● No
File Upload (?)
Contract Owner
Contract Owner* (?)
Monalisa Jiles
Budget Manager Approval(s)
Approved by
Sheenia Williams-Wesley
Contract Owner Approval
Approved by
Monalisa Tiles
Contracts Approval
Approve*
YesNo, reject entire submission
Return for correction
Approved by *
Shaskyia Behn 3/4/2022

HARRIS Executive Contract Summary

Mental Health and IDD	
Contract Section	⊙
Contractor*	
Harris County	
Contract ID #*	
2021-0259	
Presented To *	
Resource Committee	
○ Full Board	
Date Presented*	
3/15/2022	
Parties* (?)	
Harris County and The Harris Center for Mental Health a	and IDD
Agenda Item Submitted For: * (?)	
☐ Information Only (Total NTE Amount is Less than \$50	0,000,000
Board Approval (Total NTE Amount is \$50,000.00+)	,,000.00)
Grant Proposal	
✓ Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
☐ Competitive Bid	☐ Competitive Proposal
Request for Proposal	☐ Sole Source
Request for Application	Request for Qualification
Request for Quote	☐ Tag-On
✓ Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	☐ Other
Funding Information*	
New Contract Amendment	
Contract Term Start Date * (?)	Contract Term End Date * (?)
11/1/2021	11/30/2024
If contract is off-cycle, specify the contract term $(?)$	
Fiscal Year* (?)	
Fiscal Year* (?) 2022	
2022	

Fiscal Year* (?)	
2024	
Funding Source*	
County	

Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding Affiliation or Preceptor	Amendment to Existing Contract Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Servi	ces Being Provided* (?)
Request by the Office of County Administration for approv	al of a three-year interlocal
agreement with The Harris Center for Mental Health and IDD in the amount of	\$8 931 880 for development of a
Community	50,501,000 for development of a
Initiated Care program providing behavioral health-related	outreach, training, and services
in response to the	
mental health impacts of the COVID-19 pandemic.	
\$3,010,700.00 allocated in year 1;	
\$2,960,590.00 allocated in year 2;	
\$2,960,590.00 allocated in year 3;	
Contract Owner*	
Jennifer Battle	
	ý.
Previous History of Contracting with Vendor/Contract	or"
Yes ○ No ○ Unknown	
Please add previous contract dates and what services	were provided*
Unknown	
VandariOanterata a Historia III. Hada di III.	4111P) * (3)
Vendor/Contractor a Historically Underutilized Busine	ss (HUB) (7)
Community Partnership * (?)	
Yes ○ No ○ Unknown	
Specify Name*	
Harris County	
section and a contraction of the	
Supporting Documentation Upload (?)	
Harris County ILA 0008_1_21GEN2950_Harris Center_CI	C 19.81MB
Program_FINAL CAO Fully Executed (00000003).pdf	19.0 TWID
Mandad Carte and Carte and Carte	
Vendor/Contractor Contact Person	•
Name*	
Leah Barton/Harris County Office of County Administration	

Address*				
1001 Preston Street				
Suite 500				
Houston	TX			
77002-1839	US			
Phone Number* N/A				
Email*				
leah.barton@harriscountytx.gov				entra de la constanta de la co
Budget Section		enterior de la companya de la compa		3
Pudget Unite and Amount	Charged to each	Dudget Uni	:4	
Budget Units and Amounts			·	
Budget Unit Number* 7008	Amount Charged to U \$ 3,010,700.00	nit*	Expense/GL Code No.* 435060	
Budget Manager		ondary Budget	Manager	
Kevin N. Ilejay	Rica	rdo Campbell		
Provide Rate and Rate Descriptions \$3,010,700.00 allocated in year 1; \$2,960,590.00 allocated in year 2;	s if applicable* (?)			
\$2,960,590.00 allocated in year 3; Project WBS (Work Breakdown Stru	ictura)*(2)			
N/A	acture) (1)			
Requester Name	Sub	mission Date		
Janai L. Smith	3/3/2	2022		
Budget Manager Approval	(s)			<u>^</u>
Approved by				
Kevin Aejay	App 3/3/2	roval Date		
O Gran Originy	3,3,1	.022		
Procurement Approval	na Maraka na hisa mataka mataka mata na Nasa in mata			2
File Upload (?)				
Approved by	Арр	roval Date		
Sign				0.004
Contract Owner Approval				2

Approved by	Approval Date
Tennifer Battle	3/3/2022
Contracts Approval	
Approve*	
Yes	
YesNo, reject entire submission	
No, reject entire submissionReturn for correction	
No, reject entire submission	Approval Date*

EXHIBIT F-12

ABBREVIATION LIST

Not Competent to stand trial HCJ 46B

A ACT **Assertive Community Treatment**

Activities of Daily Living ADL

Aid to Families with Dependent Children **AFDC**

Assisted Living facility ALF

Adult Needs and Strengths Assessment ANSA

Assisted out-patient treatment AOT

Adult Protective Services APS

Association for Retarded Citizens ARC .

Alcohol Use Disorders Identification Test **AUDIT-C**

BABY CANS Baby Child Assessment needs (3-5 years)

Behavioral Health Organization BHO

Brief Bipolar Disorder Symptom Scale **BDSS Brief Negative Symptom Assessment** BNSA

Child and Adolescent Needs and Strengths CANS

Child and Adolescent Psychiatric Emergency Services CAPES

Child and Adolescent Psychlatric Services CAPS

Client Assessment and Registration CARE

Commission on Accreditation of Rehabilitation Facilities CARF

Child and Adolescent Services CAS Children's Behavioral Checklist CBCL

Community Behavioral Health Network CBHN

Cognitive behavior therapy CBT

Certified Community Behavioral Health Clinic CCBHC

Clinical case review CCR

Chronic Consumer Stabilization Initiative CCSI

Crisis Counseling Unit CCU

Children's Health Insurance Plan CHIP Chronically III and Disabled Children CIDC Crisis Intervention Response Team CIRT

Clinical Institute Withdrawal Assessment for Alcohol CIWA

Children's Medication Algorithm Project CMAP

Clinical Management for Behavioral Health Services **CMBHS**

Centers for Medicare and Medicaid CMS

Continuity of Care COC

COD Co-Occurring Disorders Unit

Co-occurring Psychiatric and Substance Abuse Disorders COPSD

Council on Recovery COR

Comprehensive Psychiatric Emergency Programs CPEP Charleston Psychiatric Outpatient Satisfaction Scale CPOSS

Children's Protective Services CPS

Community Resource Coordination Group CRCG

Crisis Residential Unit CRU **Community Service Center** CSC

Community Supervision and corrections department CSCD

Community Support plan CSP Crisis Stabilization Unit CSU **Community Youth Services** CYS

Department of Family and Protective Services DFPS Department of Health and Human Services **DHHS Determination of Intellectual Disability** DID Daily Living Activities-20 Item Version **DLA-20**

Dangerousness review board DRB

Diagnostic and Statistical Manual of Mental Disorders, 5th Edition DSM-5

Delivery System Reform Incentive Payment Program DSRIP

E ECI Early Childhood Intervention

Early Onset EO

Early Periodic Screening Diagnosis and Treatment **EPSDT**

Forensic Assertive Community Team FACT

Flex Funds FF

Full Scale Intelligence Quotient **FSIQ** Jail -Forensic Single Portal **FSPA**

Fagerstrom Test for Nicotine Dependence FTND

Fiscal Year FY

GAF

Global Assessment of Functioning

General Revenue GR.

Hamilton Rating Scale for Anxiety HAM-A Harris County Juvenile Probation Department **HCJPD** Harris County Psychiatric Center HCPC Harris County Psychiatric Intervention HCPI Harris County Protective Services for Children and Adults **HCPS** Home and Community Services HCS Home and Community Services - OBRA HCS-O Harris County Sheriff's Office HCSO Harris Health System HH Health Human Services HHS Health and Human Services Commission **HHSC** Health Maintenance Organization **OMH** Homeless Outreach Team HOT **Houston Police Department** HPD **Houston Recovery Center** HRC Inventory for Client and Agency Planning **ICAP** Interim Care Clinic ICC Intermediate Care Facility for Intellectual Disability **ICF-ID** Individual Education Plan IEP Individual Family Support Plan **IFSP** In Home Respite IHR Innovative Resource Group IRG Individualized recovery plan IRP **Juvenile Detention Center** JDC Juvenile Justice Alternative Education Program JJAEP Job Satisfaction Scale JSS K Legislative Appropriations Request **LAR** Local IDD Authority LIDDA Local Mental Health Authority **LMHA** Level of Care - LOC A= Authorized and LOC R= Calculated LOC Length of Stay LOS Licensed Professional of the Healing Arts

LPHA

LSA

Local Service Area

Medicare Access and CHIP Reauthorization Act MACRA Mental Retardation Adult Psychiatric Services MAPS

Medicaid Managed Care Report (Business Objects) **MBOW**

Managed Care Organization MCO Mobil Crisis Outreach Team **MCOT**

Multnomah Community Assessment Scale MCAS

Multiple Disabilities Unit MDU Mental Health Warrant MHW

Minnesota Multiphasic Personality Inventory 2nd Edition MMPI-2

Montreal Cognitive Assessment MoCA

Maximum security unit MSU

N

National Alliance for the Mentally III **NAMI**

New Employee Orientation NEO

Not Guilty for Reason of Insanity (46C) NGRI

Neuro-Psychiatric Center NPC

Northwest Community Service Center NWCSC

<u>O</u> OSAR

Outreach Screening Assessment and Referral

Overt Agitation Severity Scale OASS

Out of Home Respite OHR

Office of Violent Sexual Offenders Management OVSOM

P PAP Patient Assistance Program (for Prescriptions)

Preadmission Screening and Annual Residential Review **PASARR** Project to Assist in the Transition from Homelessness PATH

Personal Care Home PCH Patient care monitoring PCM Person Directed Plan PDP Plan-Do-Study-Act **PDSA**

Psychiatric Emergency Services PES

Post Hospitalization Crisis Residential Unit **PHCRU** Patient Health Questionnaire-9 Item Version PHQ-9

Patient Health Questionnaire-9 Modified for Adolescents PHQ-A

Performance Improvement PI Performance Improvement Plan PIP

Prevention and Management of Aggressive Behavior **PMAB**

Plan of Care POC

Perceptions of Care-Inpatient PoC-IP Professional Quality of Life Scale ProQOL Positive Symptom Rating Scale **PSRS** Parent Satisfaction Scale **PSS**

QAIS

Quality Assurance and Improvement System

QMHP

Qualified Mental Health Professional

QI

Quality Improvement

QIDS-C

Quick Inventory of Depressive Symptomology-Clinician Rated

<u>R</u>

RC **Rehab Coordination** Release of Information ROI **Recovery Manager** RM

RTC

Residential Treatment Center

Service Authorization and Monitoring SAM

Substance Abuse and Mental Health Services Administration SAMHSA

Service Coordination SC

Southeast Community Service Center SECSC Southeast Family Resource Center SEFRC Sequential Multiple Analysis tests SMAC

State mental health facility SMHF **Skilled Nursing Facility** SNF Service Package (SP1, etc) SP Single portal authority SPA

State living facility **SSLC**

Southwest Community Service Center **SWCSC** Southwest Family Resource Center **SWFRC**

Substance Use Disorder SUD

T TAC Texas Administrative code

Temporary Assistance for Needy Families TANF

Texas Correctional Office on Offenders with Medical or Mental Impairments TCOOMMI

Texas Department of Criminal Justice TDCJ

Texas Health Kids THKC **Texas Health Steps THSteps** Trauma informed Care TIC

Texas Medication Algorithm Project TMAP

TMHP Texas Medicaid & Healthcare partnership
TJJD Texas Juvenile Justice Department
TRR Texas Resiliency and Recovery
TWC Texas Workforce Commission

U UR Utilization Review

V-SSS Visit-Specific Satisfaction Scale

W

X

Y