

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

#### REVISED Full Board Meeting June 28, 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 Tuesday, May 24, 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)
    - FY2022 Year-to-Date Budget Report May (EXHIBIT F-2 Steve Evans)
  - B. Foundation Committee Report and/or Action (*J. Lykes, Chair*)

#### VI. CONSENT AGENDA

- A. FY'22 Year-to-Date Budget Report-May (EXHIBIT F-3 Steve Evans)
- B. June 2022 Contract Amendments Over 100K (EXHIBIT F-4 Silvia Tiller)
- C. June 2022 Contract Renewals Over 100K (EXHIBIT F-5 Silvia Tiller)

#### VII. CONSIDER AND RECOMMEND ACTION

- A. Perimeter Fence Installation-6160 South Loop (EXHIBIT F-6 Steve Evans)
- B. Marketing and Consulting-Healthy Minds, Healthy Communities (EXHIBIT F-7 Steve Evans)

#### 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.
- \* In accordance with §551.072 of the Texas Government Code, discussion about the lease of real property located at 4400

Harrisburg Boulevard, Houston, Tx 77011. Wayne Young, CEO and Silvia Tiller, Director of Contracts and Real Estate

- \* In accordance with §551.072 of the Texas Government Code, discussion about the purchase of real property located at 5959 Long Drive, Houston, TX . Silvia Tiller, Director of Contracts and Real Estate
- \* In accordance with §551.071 of the Texas Government Code, for consultation with attorney about legal matters related to programs to assist small businesses and/or minority- and women-owned businesses with contracting with the Harris Center in which the duty of the attorney to the government body under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas clearly conflicts with this chapter. Kendra Thomas, General Counsel
- \* In accordance with §551.071 of the Texas Government Code, for consultation with attorney about legal issues related to a loan agreement with the City of Houston for the 6168 South Loop East construction in which the duty of the attorney to the government body under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas clearly conflicts with this chapter. Wayne Young, CEO, Silvia Tiller, Director of Contracts and Real Estate and Kendra Thomas, General Counsel
- \* In accordance with §551.071 of the Texas Government Code, for consultation with attorney on a matter related to a proposed contract award for CSP-6168 South Loop East Apartment in which the duty of the attorney to the government body under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas clearly conflicts with this chapter. Steve Evans, Controller, Nina Cook, Director of Purchasing, Carrie Rys, Chief Administrative Officer, and Kendra Thomas, General Counsel
- \* In accordance with §551.071 of the Texas Government Code, for consultation with attorney about contemplated litigation related to a HVAC contract dispute. Carrie Rys, Chief Administrative Officer, Silvia Tiller, Director of Contracts & Real Estate and Kendra Thomas, General Counsel
- X. RECONVENE INTO OPEN SESSION
- XI. CONSIDER AND TAKE ACTION AS A RESULT OF THE EXECUTIVE SESSION
- XII. INFORMATION ONLY

- A. June 2022 New Contracts Under 100K (EXHIBIT F-8)
- B. June 2022 Contract Amendments Under 100K (EXHIBIT F-9)
- C. June 2022 Renewals Under 100K (EXHIBIT F-10)
- D. June 2022 Affiliation Agreements, Grants, MOU's and Revenues Information Only (EXHIBIT F-11)
- E. Update TANF May 2022 Report (EXHIBIT F-12)
- F. Moving from a Compliance Focus Program to a Culture of Quality: The Harris Center Case Study (EXHIBIT F-13)
- G. Persons with IDD and Involvement in the Criminal Justice System: Community Services, Diversion and Incarceration (EXHIBIT F-14)
- H. Abbreviations List (EXHIBIT F-15)

XIII. ADJOURN

Veronica Franco, 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:** May 24, 2022

TRUSTEES

**IN ATTENDANCE:** Mr. Shaukat Zakaria, Chair

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

Mr. Jim Lykes Robin Gearing PhD

Judge Bonnie Hellums-videoconference

**TRUSTEES ABSENT:** Sheriff E. Gonzalez

#### I. Declaration of Quorum

Mr. Shaukat Zakaria, Chairperson, called the meeting to order at 9:00 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: WOMACK SECOND: LYKES

#### With unanimous affirmative votes

**BE IT RESOLVED** the Minutes of the Regular Board of Trustees meeting held on Tuesday, April 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
  - I. FY'22 Year-to-Date Budget Report- April

Mr. Womack provided an overview of the topics discussed and the decisions made at the Resource Committee meeting on May 17, 2022.

- B. Quality Committee Report and/or Action- G. Santos, Chair Dr. Santos provided an overview of the topics discussed and the decisions made at the Quality Committee meeting on May 17, 2022.
- C. Program Committee Report and/or Action-B. Hellums, Chair Mrs. Hellums provided an overview of the programs presented at the Program Committee meeting on May 17, 2022.
- D. Foundation Committee Report and/or Action-J. Lykes, Chair Mr. Lykes provided the Board of Trustees an update about the Foundation report.

#### VI. Consent Agenda

- A. Approve FY'21 Year-to-Date Budget Report-April
- B. May 2022 New Contracts Over 50K
- C. May 2022 Contract Amendments Over 50K
- D. May 2022 Contract Renewals Over 50K
- E. NEW/SUBSTANTIAL POLICIES
  - 1. Center Related Meeting Expense
  - 2. Development and Management for Mental Health and IDD Services Wait/Interest List
  - 3. Least Restrictive Interventions and Management of Aggressive Behavior
  - 4. Screening and Assessment for Mental Health, Substance Use and Intellectual and Development Disabilities (IDD) Services
  - 5. Whistleblower
  - 6. Writing off Self Pay Balances

#### F. MINOR/NO CHANGES

1. Improvement of Consumer Care Committee

MOTION: Dr. Santos moved to approve Consent Agenda items A through E-2 and E-4 through F-1. E-3 was not approved by the Governance Committee to move forward for Full Board approval.

**SECOND: Dr. Gearing seconded the motion** 

BE IT RESOLVED, with unanimous affirmative vote, Consent Agenda items E-1 through E-2 and E-4 through F-1 were approved agenda items.

#### VII. Review and Comment

- **A. Selected 2022 Interim Charges-**Amanda Jones presented the Selected 2022 Interim Charges presentation to the Full Board.
- **B. Staff Compensation Update-**Carrie Rys and Sean Kim presented the Staff Compensation Update to the Full Board.

#### VIII. Board Chair's Report

Mr. Zakaria provided a Board report.

#### IX. Executive Session -

At 10:30 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 §551.072 of the Texas Government Code, Discussion about lease of real property located at 4400 Harrisburg Boulevard, Houston, TX 77011. Wayne Young, CEO and Silvia Tiller, Director of Contracts and Real Estate.
- In accordance with §551.072 of the Texas Government Code, Discussion about the purchase of real property to replace Southeast Clinic located at 5901 Long Drive, Houston, TX- Silvia Tiller, Director of Contracts & Real Estate
- In accordance with §551.072 of the Texas Government Code, Discussion about the purchase of real property to replace Northwest Clinic located at 3737 Dacoma, Houston, TX- Silvia Tiller, Director of Contracts & Real Estate
- In accordance with §551.071 of the Texas Government Code, for consultation with attorney on a matter in which the duty of the attorney to the government body under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas clearly conflicts with this chapter. Kendra Thomas, General Counsel
- In accordance with §551.074 of the Texas Government Code, to deliberate about the evaluation and duties of the Harris Center Board of Trustees. S. Zakaria, Board Chair

#### X. Reconvene into Open Session

At 12:18 p.m., the Board of Trustees reconvened into open session.

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

A. Following consultation with attorney regarding the award of a contract for the Neuropsychiatric Center (NPC) Site Renovation-Project PUR #PUR-FY22-0207 in

which the duty of the attorney to the government body under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas clearly conflicts with Ch. 551 of the Texas Government Code.

#### **MOTION BY: SANTOS**

Dr. Santos moved to award the contract for the Neuropsychiatric Center (NPC) Site Renovation-Project #PUR-FY22-0207 to O'Donnell Snider.

**SECOND: MOORE** 

**VOTE: Yes- 5 No- 1** (Mr. Womack)

#### With affirmative votes

**BE IT RESOLVED** the Full Board shall award the contract for the Neuropsychiatric Center (NPC) Site Renovation-Project # PUR-FY22-0207 to O'Donnell Snider.

#### XII. ADJOURN

MOTION: SANTOS SECOND: GEARING

Motion passed with unanimous affirmative votes.

The meeting was adjourned at 12:19 PM.

Respectfully submitted,

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

# EXHIBIT F-2



Financial Report For the Ninth Month and Year to Date Ended May 31, 2022

Fiscal Year 2022

Presented to the Resource Committee of the Board of Trustees on June 28, 2022

#### The Harris Center for Mental Health & IDD

June 28, 2022

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

The monthly financial report for May 31, 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.

Steve Evans

Interim Chief Financial Officer

#### The Harris Center for Mental Health and IDD Financial Summary For the Ninth Month and Year to Date Ended May 31, 2022

M	lonth (,000)						
		Actual	-	Budget	Variance		
Revenues	\$	24,181	\$	21,662	\$	2,518	
Expenditures		30,578		25,698		(4,880)	
Excess of Revenues over (under) Expenditures before Other Sources	\$	(6,397)	\$	(4,035)	\$	(2,362)	

Year-to-date (,000)										
		Actual	В	udget	Va	riance				
ess of Revenues over (under) Expenditures after Other Sources	\$	(105)	\$	335	\$	(440)				
Expenditures after Other Sources	<u>\$</u>	(105)	\$	335	\$					

#### The Harris Center for Mental Health and IDD Comparison of Revenue and Expenses - Actual to Budget For the Ninth Month and Year to Date Ended May 31, 2022

		Month Ended M	1ay 31, 2022		Nine Months Ended May 31, 2022						
			Variand Favorable or (Ur	-	_		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	\$ 5,390,352	\$ 4,667,313	.,	15%	\$ 44,239,151	\$ 41,991,227		5%			
PAP / Samples	867,202	1,025,912	(158,710)	-15%	6,675,381	9,233,128	(2,557,747)	-28%			
Interest	34,536	4,166	30,370	729%	102,615	37,494	65,121	174%			
State General	9,862,580	9,869,236	(6,656)	0%	88,925,655	88,832,515	93,140	0%			
State Grants	1,119,762	1,298,931	(179,169) <b>d</b>	-14%	10,897,806	11,690,380	(792,574)	-7%			
Federal Grants	3,946,700	2,041,360	1,905,340 <b>e</b>	93%	26,064,896	18,976,702	7,088,194	37%			
3rd party billings	2,959,722	2,755,515	204,207	7%	18,927,885	24,216,486	(5,288,601)	-22%			
Total Revenue	24,180,854	21,662,433	2,518,421 <b>f</b>	12%	195,833,389	194,977,932	855,457	0%			
Total Evnances											
Total Expenses: Salaries and Fringe	20,593,945	17,842,388	(2,751,557)	-15%	165,960,885	159,046,395	(6,914,490)	-4%			
Travel	20,595,945 144,294	17,042,300	13,961	-15% 9%	853,969	1,703,898	(6,914,490) 849,929	-4 <i>%</i> 50%			
Contracts and Consultants	1,802,380	1,818,046	15,666	9% 1%	15,869,577	16,429,586	560.009	3%			
	, ,	, ,	,		, ,	, ,	,	3% 2%			
HCPC Contract	2,317,441	2,369,793	52,352	2%	20,899,318	21,328,137	428,819				
Supplies and Drugs	1,280,645	1,365,584	84,939	6%	10,237,301	12,269,516	2,032,215	17%			
Equipment (Purch, Rent, Maint)	445,815	512,956	67,141	13%	4,085,490	4,818,858	733,368	15%			
Building (Purch, Rent, Maint)	485,922	554,529	68,607 <b>h</b>	12%	5,031,619	5,045,611	13,992	0%			
Vehicle (Purch, Rent, Maint)	51,860	37,258	(14,602)	-39%	443,477	336,112	(107,365)	-32%			
Telephone and Utilities	292,565	262,018	(30,547)	-12%	2,447,016	2,251,341	(195,675)	-9%			
Insurance, Legal, Audit	126,894	144,811	17,917	12%	1,331,090	1,389,483	58,393	4%			
Other	3,029,785	581,952	(2,447,833) i	-421%	7,654,832	5,289,776	(2,365,056)	-45%			
Claims Denials	6,533	50,040	43,507	87%	75,282	451,083	375,801	83%			
Total Expenses	30,578,079	25,697,630	(4,880,449) <b>j</b>	-19%	234,889,856	230,359,796	(4,530,060)	-2%			
Excess of Revenues over (under)											
Expenditures before Other Sources	(6,397,225) <b>a</b>	(4,035,197)	(2,362,028)		(39,056,467)	(35,381,864)	(3,674,603)				
Funds from other sources:											
Use of fund balance - CapEx	165,689	-	165,689		2,211,645	-	2,211,645				
Use of fund balance - COVID-19	-	-	-		982,500	-	982,500				
Fund Balance DSRIP	432,764	432,764	-		3,993,108	3,993,108	-				
Waiver 1115 Revenues	3,695,765	3,695,765	-		31,723,357	31,723,357	-				
DSRIP Transition	-	-	-		-	-	-				
COVID-19 FMAP Allocation	-	-	-		-	-	-				
Insurance Proceeds	5,930	-	5,930		20,682	-	20,682				
Proceeds from Sale of Assets	-	-	-		20,000	-	20,000				
Excess of Revenues over (under)				•							
Expenditures after Other Sources	\$ (2,097,077)	\$ 93,332	\$ (2,190,409)		\$ (105,175) <b>I</b>	<b>b</b> \$ 334,601	\$ (439,776)				
•	=======================================	=========	:======		========	========	:=======				

#### The Harris Center for Mental Health and IDD Comparative Balance Sheet As of May 31, 2022

		Ending	Balanc	ce	Incre	ase/(Decrease)	
	A	pril 30, 2022		May 31, 2022		May	
Assets							
Cash and Cash Equivalents	\$	113,288,784	\$	95,534,386	\$	(17,754,398)	
Inventory - includes RX		268,940		282,162		13,222	b
Prepaid Expenses		4,755,312		1,124,090		(3,631,222)	С
A/R Medicaid, Medicare, 3rd Party		13,531,864		14,889,067		1,357,203	
Less Bad Debt Reserve		(6,905,823)		(6,905,823)		-	
A/R Other		16,765,928		18,257,096		1,491,168	d
A/R DSRIP		19,995,240		22,900,567		2,905,327	
Total Current Assets		161,700,245		146,081,545		(15,618,700)	
Land		6,432,036		6,432,036		-	
Building		25,389,494		25,389,494		-	
Building Improvements		21,153,240		21,153,240		-	
Furniture and Fixtures		6,898,327		6,885,609		(12,718)	
Vehicles		1,569,768		1,569,768		-	
Construction in Progress		18,776,981		18,958,527		181,546	
Total Property, Plant & Equipment		80,219,846		80,388,674		168,828	
TOTAL ASSETS	\$	241,920,091	\$	226,470,219	\$	(15,449,872)	
Liabilities and Fund Balance							
Unearned Income Accrued Payroll and Accounts Payables Current Portion Long Term Debt	\$	27,573,074 25,746,610	\$	15,224,304 25,712,338	\$	(12,348,770) (34,272)	
Total Current Liabilities		53,319,684	-	40,936,642		(12,383,042)	
State Escheatment Payable Total Non Current Liabilities		43,480 43,480		51,923 51,923		8,443 8,443	
TOTAL LIABILITIES		53,363,164		40,988,565		(12,374,599)	
TOTAL LIABILITIES		33,303,104		40,900,000		(12,374,333)	
General Fund Balance Nonspendable		17,898,048		17,336,255		(561,793)	g
Investment in Inventories		268,940		282,162		13,222	
Investment In Fixed Assets		80,219,846		80,388,674		168,828	
Assigned:							
Current Capital Projects		18,578,591		18,412,902		(165,689)	
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		- (100 = 0.1)	
Waiver 1115		60,113,673		59,680,909		(432,764)	h
COVID-19 eFMAP Reserve		904,067		904,067		-	
Compensated Absences Total		4,854,354 186,565,025		4,854,354 185,586,829		(978,196)	
		,,		,,		(,)	
Year to Date Excess Revenues over (under) Expenditures		1,991,902		(105,175)		(2,097,077)	
TOTAL FUND BALANCE		188,556,927		185,481,654		(3,075,273)	
TOTAL LIABILITIES AND FUND BALANCE	\$	241,920,091	\$	226,470,219	\$	(15,449,872)	

#### The Harris Center for Mental Health and IDD Notes to the Preliminary Financial Reports For Month and Year to Date Ended May 31, 2022

- I. Comparison of Revenue and Expenses
  - a. For the month of May 2022, the ninth month of the fiscal year, the Harris Center is reporting excess Expenditures over Revenues of \$6,397,225.
  - b. The year-to-date amount translates to Excess Expenditures over Revenues of \$105,175 after use of fund balance, fund balance CapEx, fund balance DSRIP, Waiver 1115 revenues and insurance proceeds are considered.
  - Harris County and Local is favorable to budget by \$723,039 primarily due to recognition of a \$350,000 credit from Blue Cross Blue Shield for Wellness activities and receipt of funds from Cullen Trust.
  - d. State Grants are unfavorable to budget by \$179,169 due to timing of construction expenses for the Healthy Community Grant and timing of ECI insurance collections.
  - e. Federal grants are favorable to budget by \$1,905,340 due to federal grants awarded after the original budget was approved by the Board.
  - f. Total Revenue is favorable to budget by \$2,518,421.
  - h. Building is favorable to budget due to timing of construction expenses.
  - Other is unfavorable to budget due to expenses associated with the TANF Pandemic Assistance grant which was awarded after the Board approved original budget and payment of annual maintenance agreement for Epic software.
  - j. Total Expenses are unfavorable to budget by \$4,880,449.

#### The Harris Center for Mental Health and IDD Notes to the Preliminary Financial Statements For Month and Year to Date Ended May 31, 2022

#### 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)
	4/30/2022		5/31/2022	May
Cash-General Fund Bank of America	\$ 6,666,123		6,840,565	\$ 174,442
Cash-General Fund Chase	51,016,100		43,996,812	(7,019,288)
Cash-BOA ACH Vendor	313,607		174,282	(139,325)
Cash-Pharmacy Chase	5,938		8,815	2,877
Cash-FSA-Discovery	186,339		178,702	(7,637)
Petty Cash	5,700		5,700	-
Investments-TexPool General Fund	1,002,173		1,002,702	529
Investments-TexPool Self Insurance	2,290,285		2,291,496	1,211
Investments-TexPool Prime	26,644,931		23,963,249	(2,681,682)
Investments-Texas Class	25,157,588		17,072,063	(8,085,525)
	\$ 113,288,784	\$	95,534,386	\$ (17,754,398)

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 I	Bala	ance	(Decrease)		
	4/30/2022		May			
Inventory-Central Supplies	\$ 28,052		28,052	\$	-	
Supplies Used	(24,295)		(11,073)		13,222	
Inventory-Drugs	265,183		265,183		-	
Total Inventory	\$ 268,940	\$	282,162	\$	13,222	

c. Prepaid Expenses decreased due to HCPC Activity.

#### II. Comparative Balance Sheet (continued)

#### d. Accounts Receivable increased in May.

	Ending	Balance	Increase (Decrease)
	4/30/2022	5/31/2022	May
Villas at Bayou Park	60,433	60,433	-
Pear Grove	39,937	46,997	7,060
Pasadena Cottages	73,028	73,638	610
Employee	-	-	-
Pecan Village	4,401	4,401	-
Acres Homes Garden	94,321	149,466	55,145
Foundation	-	6,224	6,224
NAMI of Greater Houston	-	312	312
General Accounts Receivable	155,941	9,523	(146,418)
Pharmacy PBM	8,099	8,391	292
Harris County Projects	996,613	1,137,238	140,625
Harris County Juvenile Probation	628,465	676,668	48,203
Harris County Community Supervision	1,376,929	1,233,063	(143,866)
Harris County Sheriff's Department	3,892,890	3,676,953	(215,937)
ICFMR	191,636	218,776	27,140
TCOOMMI-Special Needs	774,233	643,950	(130,283)
TDCJ-Parole	123,000	82,000	(41,000)
TDCJ-Substance Abuse	83,335	66,668	(16,667)
TCOOMMI-Juvenile	250,943	90,365	(160,578)
Jail Diversion	1,198,351	1,908,228	709,877
ECI	1,007,604	557,808	(449,796)
ECI Respite	704	1,408	704
ECI SNAP	20,635	18,528	(2,107)
Federal CHH Navigation	279,776	119,556	(160,220)
Federal Aot	224,250	121,183	(103,067)
ARPA-COH-MCOT RR Expansion	-	249,085	249,085
ARPA-COH-Core HPD Expansion	-	63,179	63,179
Fed SAMHSA CCBHC Expansion	-	105,593	105,593
PATH-Mental Health Block Grant	132,147	220,922	88,775
MH Block Grant-Coordinated Specialty Care	157,163	160,717	3,554
TANF PEAF	463,687	1,252,913	789,226
DSHS SAPT Block Grant	176,018	138,541	(37,477)
AR State TCMHCC	99,250	111,656	12,406
Enhanced Community Coordinator	67,630	50,885	(16,745)
Subtotal, A/R-Other	\$ 12,581,419	\$ 13,265,268	\$ 683,849

#### The Harris Center for Mental Health and IDD Notes to the Preliminary Financial Statements For Month and Year to Date Ended May 31, 2022

#### II. Comparative Balance Sheet (continued)

#### d. Accounts Receivable Other (Continued)

					Increase
		Ending	Bala	ance	(Decrease)
	4	1/30/2022		5/31/2022	May
DSHS Mental Heath First Aid	\$	34,484	\$	23,847	\$ (10,637)
HHSC ZEST-Zero Suicide		108,884		187,400	78,516
HCC Open Door		1,093,954		1,060,022	(33,931)
HCS		22,416		22,416	-
Tx Home Living Waiver		304,138		316,217	12,079
Federal DSHS Disaster Assistance		-			-
DPP-BHS		1,243,784		1,282,035	38,251
Helpline Contracts		95,583		121,543	25,960
City of Houston-CCSI		25,268		50,537	25,269
City of Houston-DMD		10,332		10,332	-
City of Houston-911 CCD Amended		39,832		41,845	2,013
A/R - HHSC Projects		1,205,834		1,875,634	669,800
Local TCDD C19 Vac Stipend		-		-	
Grand Total A/R - Other	\$	16,765,928	\$	18,257,096	\$ 1,491,168

- e. Unearned Income decreased due to expenditure of State GR funds.
- f. Accrued Payroll and Accounts Payable decreased because of payment timing related to accounts payable, payroll, and employee fringe benefit liabilities.
- g. General Fund Balance decreased due to operations.
- h. Waiver 1115 Reserves decreased due to use of budgeted DSRIP reserves for operations.
- i. Days of Operations in Reserve for Total Agency is 119 days versus 129 days for the prior month.

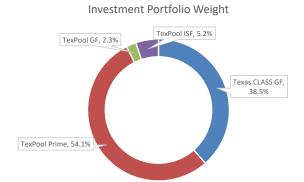
#### III. Investment Portfolio

- Total investments as of May 31, 2022 are \$44,329,512 of which 100% is in government pools.
   (Texas Class 39% and TexPool 61%)
- b. Investments this month yielded interest income of \$34,535.

#### The Harris Center for Mental Health and IDD Investment Portfolio May 31, 2022

#### **Local Government Investment Pools (LGIPs)**

	Begir	nning Balance		Transfer In		Transfer Out	Int	terest Income		Ending Value	Portfolio %	Yield
Texas CLASS Texas CLASS General Fund	•	25.157.588	\$	1,000,000	Ф	(9,100,000)	¢	14,475	Ф	17.072.063	38.5%	0.813%
rexas CLASS General Fund	φ	23,137,300	φ	1,000,000	φ	(9,100,000)	φ	14,475	φ	17,072,003	30.370	0.01370
TexPool												
TexPool Prime		26,644,931	\$	-	\$	(2,700,000)		18,319		23,963,250	54.1%	0.813%
TexPool General Fund		1,002,173						530		1,002,703	2.3%	0.623%
TexPool Internal Service Fund		2,290,285						1,211		2,291,496	5.2%	0.623%
TexPool Sub-Total		29,937,389		-		(2,700,000)		20,060		27,257,449	61.5%	0.790%
Total Investments	\$	55,094,977	\$	1,000,000	\$	(11,800,000)	\$	34,535	\$	44,329,512	100%	0.799%



3 Month Weighted Average Maturity (Days)
3 Month Weighted Average Yield of The Harris Center Investment Portfolio
3 Month Rolling Weighted Average Daily Treasury Bill Rate (4 weeks)
1.00
0.507%
0.347%

This Investment Portfolio Report of The Harris Center for Mental Health and IDD as of May 31,2022 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.

Approved:

Hayden Hernandez, Accounting and Preasury Manager

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

Report for May 2022

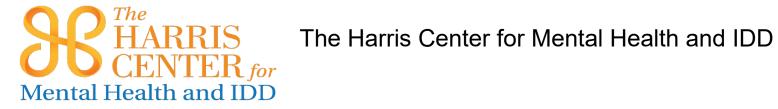
Vendor	Description	Monthly Not-To- Exceed*	May-22	YTD Total Through May
Lincoln Financial Group	Retirement Funds (401a, 403b, 457)	\$2,400,000	\$1,612,139	\$14,479,775
Blue Cross Blue Shield of TX	Health and Dental Insurance	\$2,600,000	\$3,091,975**	\$11,622,769

<sup>\*</sup> 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 May payments of Liabilities for Employee Benefits = 10% of Expenditures.

<sup>\*\*</sup>Note: The May Blue Cross Blue Shield Group payment exceeded the agreed upon monthly Not-To-Exceed amount not requiring Board signature. To satisfy the Board Resolution in regards to the Not-To-Exceed amount of \$2,600,000 for the month, the Blue Cross Blue Shield payment in the amount of \$3,091,975 on May 25th was submitted for Board signature.

# EXHIBIT F-3



Financial Report For the Ninth Month and Year to Date Ended May 31, 2022

Fiscal Year 2022

Presented to the Resource Committee of the Board of Trustees on June 28, 2022

#### The Harris Center for Mental Health & IDD

June 28, 2022

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

The monthly financial report for May 31, 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.

Steve Evans

Interim Chief Financial Officer

#### The Harris Center for Mental Health and IDD Financial Summary For the Ninth Month and Year to Date Ended May 31, 2022

Mo	onth (,000)							
		Actual Budget				Variance		
Revenues	\$	24,181	\$	21,662	\$	2,518		
Expenditures		30,578		25,698		(4,880)		
Excess of Revenues over (under) Expenditures before Other Sources	\$	(6,397)	\$	(4,035)	\$	(2,362)		

Year-to-date (,000)										
		Actual		Budget	/	/ariance				
Excess of Revenues over (under) Expenditures after Other Sources	<u> </u>	(105)	\$	335	\$	(440)				
Exponditures after earlier estates	<u> </u>	(100)	<u> </u>		<u> </u>	(110)				

#### The Harris Center for Mental Health and IDD Comparison of Revenue and Expenses - Actual to Budget For the Ninth Month and Year to Date Ended May 31, 2022

		Month Ended M	1ay 31, 2022	Nine Months Ended May 31, 2022						
			Variand Favorable or (Ur	-	_		Variance Favorable or (Unfa			
	<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	\$ 5,390,352	\$ 4,667,313	\$ 723,039 <b>c</b>	15%	\$ 44,239,151	\$ 41,991,227		5%		
PAP / Samples	867,202	1,025,912	(158,710)	-15%	6,675,381	9,233,128	(2,557,747)	-28%		
Interest	34,536	4,166	30,370	729%	102,615	37,494	65,121	174%		
State General	9,862,580	9,869,236	(6,656)	0%	88,925,655	88,832,515	93,140	0%		
State Grants	1,119,762	1,298,931	(179,169) <b>d</b>	-14%	10,897,806	11,690,380	(792,574)	-7%		
Federal Grants	3,946,700	2,041,360	1,905,340 <b>e</b>	93%	26,064,896	18,976,702	7,088,194	37%		
3rd party billings	2,959,722	2,755,515	204,207	7%	18,927,885	24,216,486	(5,288,601)	-22%		
Total Revenue	24,180,854	21,662,433	2,518,421 <b>f</b>	12%	195,833,389	194,977,932	855,457	0%		
Total Expenses:										
Salaries and Fringe	20,593,945	17,842,388	(2,751,557)	-15%	165,960,885	159,046,395	(6,914,490)	-4%		
Travel	144,294	158,255	13,961	9%	853,969	1,703,898	849,929	50%		
Contracts and Consultants	1,802,380	1,818,046	15,666	1%	15,869,577	16,429,586	560.009	3%		
HCPC Contract	2,317,441	2,369,793	52,352	2%	20,899,318	21,328,137	428,819	2%		
Supplies and Drugs	1,280,645	1,365,584	84,939	6%	10,237,301	12,269,516	2,032,215	17%		
Equipment (Purch, Rent, Maint)	445,815	512,956	67,141	13%	4,085,490	4,818,858	733,368	15%		
Building (Purch, Rent, Maint)	485,922	554,529	68,607 <b>h</b>	12%	5,031,619	5,045,611	13,992	0%		
Vehicle (Purch, Rent, Maint)	51,860	37,258	(14,602)	-39%	443,477	336,112	(107,365)	-32%		
,	,	,	\ ' '		,	2,251,341	, , ,	-32% -9%		
Telephone and Utilities	292,565	262,018	(30,547)	-12%	2,447,016		(195,675)	-9% 4%		
Insurance, Legal, Audit	126,894	144,811	17,917	12%	1,331,090	1,389,483	58,393			
Other	3,029,785	581,952	(2,447,833) i	-421%	7,654,832	5,289,776	(2,365,056)	-45%		
Claims Denials	6,533	50,040	43,507	87% 	75,282	451,083	375,801	83%		
Total Expenses	30,578,079	25,697,630	(4,880,449) <b>j</b>	-19%	234,889,856	230,359,796	(4,530,060)	-2%		
Excess of Revenues over (under)										
Expenditures before Other Sources	(6,397,225) <b>a</b>	(4,035,197)	(2,362,028)		(39,056,467)	(35,381,864)	(3,674,603)			
Funds from other sources:										
Use of fund balance - CapEx	165,689	-	165,689		2,211,645	-	2,211,645			
Use of fund balance - COVID-19	-	-	-		982,500	-	982,500			
Fund Balance DSRIP	432,764	432,764	-		3,993,108	3,993,108	-			
Waiver 1115 Revenues	3,695,765	3,695,765	-		31,723,357	31,723,357	-			
DSRIP Transition	-	-	-		-	-	-			
COVID-19 FMAP Allocation	-	-	-		-	-	-			
Insurance Proceeds	5,930	-	5,930		20,682	-	20,682			
Proceeds from Sale of Assets	, <u>-</u>	-	-		20,000	-	20,000			
Excess of Revenues over (under)										
Expenditures after Other Sources	\$ (2,097,077)	\$ 93,332	\$ (2,190,409)		\$ (105,175) <b>I</b>	<b>b</b> \$ 334,601	\$ (439,776)			
•	=======================================	=========	:=====		========	========	:=======			

#### The Harris Center for Mental Health and IDD Comparative Balance Sheet As of May 31, 2022

		Ending	Balanc	ce	Incre	ase/(Decrease)	
	A	pril 30, 2022		May 31, 2022		May	
Assets						•	
Cash and Cash Equivalents	\$	113,288,784	\$	95,534,386	\$	(17,754,398)	а
Inventory - includes RX		268,940		282,162		13,222	b
Prepaid Expenses		4,755,312		1,124,090		(3,631,222)	С
A/R Medicaid, Medicare, 3rd Party		13,531,864		14,889,067		1,357,203	
Less Bad Debt Reserve		(6,905,823)		(6,905,823)		-	
A/R Other		16,765,928		18,257,096		1,491,168	d
A/R DSRIP		19,995,240		22,900,567		2,905,327	
Total Current Assets		161,700,245		146,081,545		(15,618,700)	
Land		6,432,036		6,432,036		-	
Building		25,389,494		25,389,494		-	
Building Improvements		21,153,240		21,153,240		_	
Furniture and Fixtures		6,898,327		6,885,609		(12,718)	
Vehicles		1,569,768		1,569,768		-	
Construction in Progress		18,776,981		18,958,527		181,546	
Total Property, Plant & Equipment		80,219,846		80,388,674		168,828	
TOTAL ASSETS	\$	241,920,091	\$	226,470,219	\$	(15,449,872)	
Liabilities and Fund Balance		, ,					
Unearned Income Accrued Payroll and Accounts Payables Current Portion Long Term Debt	\$	27,573,074 25,746,610	\$	15,224,304 25,712,338	\$	(12,348,770) (34,272)	e f
Total Current Liabilities		53,319,684		40,936,642		(12,383,042)	
State Escheatment Payable Total Non Current Liabilities		43,480 43,480		51,923 51,923		8,443 8,443	
TOTAL LIABILITIES		53,363,164		40,988,565		(12,374,599)	
General Fund Balance Nonspendable		17,898,048		17,336,255		(561,793)	g
Investment in Inventories		268,940		282,162		13,222	
Investment In Fixed Assets		80,219,846		80,388,674		168,828	
Assigned:							
Current Capital Projects		18,578,591		18,412,902		(165,689)	
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		60,113,673		59,680,909		(432,764)	h
COVID-19 eFMAP Reserve		904,067		904,067		-	
Compensated Absences Total		4,854,354 186,565,025		4,854,354 185,586,829		(978,196)	
Total		100,303,023		100,000,029		(970,190)	
Year to Date Excess Revenues over (under) Expenditures		1,991,902		(105,175)		(2,097,077)	
TOTAL FUND BALANCE		188,556,927		185,481,654		(3,075,273)	
TOTAL LIABILITIES AND FUND BALANCE	\$	241,920,091	\$	226,470,219	\$	(15,449,872)	

#### The Harris Center for Mental Health and IDD Notes to the Preliminary Financial Reports For Month and Year to Date Ended May 31, 2022

- I. Comparison of Revenue and Expenses
  - a. For the month of May 2022, the ninth month of the fiscal year, the Harris Center is reporting excess Expenditures over Revenues of \$6,397,225.
  - b. The year-to-date amount translates to Excess Expenditures over Revenues of \$105,175 after use of fund balance, fund balance CapEx, fund balance DSRIP, Waiver 1115 revenues and insurance proceeds are considered.
  - Harris County and Local is favorable to budget by \$723,039 primarily due to recognition of a \$350,000 credit from Blue Cross Blue Shield for Wellness activities and receipt of funds from Cullen Trust.
  - d. State Grants are unfavorable to budget by \$179,169 due to timing of construction expenses for the Healthy Community Grant and timing of ECI insurance collections.
  - e. Federal grants are favorable to budget by \$1,905,340 due to federal grants awarded after the original budget was approved by the Board.
  - Total Revenue is favorable to budget by \$2,518,421.
  - h. Building is favorable to budget due to timing of construction expenses.
  - Other is unfavorable to budget due to expenses associated with the TANF Pandemic Assistance grant which was awarded after the Board approved original budget and payment of annual maintenance agreement for Epic software.
  - j. Total Expenses are unfavorable to budget by \$4,880,449.

#### The Harris Center for Mental Health and IDD Notes to the Preliminary Financial Statements For Month and Year to Date Ended May 31, 2022

#### 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	Ва	lance	(Decrease)
	4/30/2022		5/31/2022	May
Cash-General Fund Bank of America	\$ 6,666,123		6,840,565	\$ 174,442
Cash-General Fund Chase	51,016,100		43,996,812	(7,019,288)
Cash-BOA ACH Vendor	313,607		174,282	(139,325)
Cash-Pharmacy Chase	5,938		8,815	2,877
Cash-FSA-Discovery	186,339		178,702	(7,637)
Petty Cash	5,700		5,700	-
Investments-TexPool General Fund	1,002,173		1,002,702	529
Investments-TexPool Self Insurance	2,290,285		2,291,496	1,211
Investments-TexPool Prime	26,644,931		23,963,249	(2,681,682)
Investments-Texas Class	25,157,588		17,072,063	(8,085,525)
	\$ 113,288,784	\$	95,534,386	\$ (17,754,398)

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 I	Bala	ance	(Decrease)
	4/30/2022		05/31/2022	May
Inventory-Central Supplies	\$ 28,052		28,052	\$ -
Supplies Used	(24,295)		(11,073)	13,222
Inventory-Drugs	265,183		265,183	
Total Inventory	\$ 268,940	\$	282,162	\$ 13,222

c. Prepaid Expenses decreased due to HCPC Activity.

#### II. Comparative Balance Sheet (continued)

#### d. Accounts Receivable increased in May.

	Ending	; Balance	Increase (Decrease)
	4/30/2022	5/31/2022	May
Villas at Bayou Park	60,433	60,433	-
Pear Grove	39,937	46,997	7,060
Pasadena Cottages	73,028	73,638	610
Employee	-	-	-
Pecan Village	4,401	4,401	-
Acres Homes Garden	94,321	149,466	55,145
Foundation	-	6,224	6,224
NAMI of Greater Houston	-	312	312
General Accounts Receivable	155,941	9,523	(146,418)
Pharmacy PBM	8,099	8,391	292
Harris County Projects	996,613	1,137,238	140,625
Harris County Juvenile Probation	628,465	676,668	48,203
Harris County Community Supervision	1,376,929	1,233,063	(143,866)
Harris County Sheriff's Department	3,892,890	3,676,953	(215,937)
ICFMR	191,636	218,776	27,140
TCOOMMI-Special Needs	774,233	643,950	(130,283)
TDCJ-Parole	123,000	82,000	(41,000)
TDCJ-Substance Abuse	83,335	66,668	(16,667)
TCOOMMI-Juvenile	250,943	90,365	(160,578)
Jail Diversion	1,198,351	1,908,228	709,877
ECI	1,007,604	557,808	(449,796)
ECI Respite	704	1,408	704
ECI SNAP	20,635	18,528	(2,107)
Federal CHH Navigation	279,776	119,556	(160,220)
Federal Aot	224,250	121,183	(103,067)
ARPA-COH-MCOT RR Expansion	-	249,085	249,085
ARPA-COH-Core HPD Expansion	-	63,179	63,179
Fed SAMHSA CCBHC Expansion	-	105,593	105,593
PATH-Mental Health Block Grant	132,147	220,922	88,775
MH Block Grant-Coordinated Specialty Care	157,163	160,717	3,554
TANF PEAF	463,687	1,252,913	789,226
DSHS SAPT Block Grant	176,018	138,541	(37,477)
AR State TCMHCC	99,250	111,656	12,406
Enhanced Community Coordinator	67,630	50,885	(16,745)
Subtotal, A/R-Other	\$ 12,581,419	\$ 13,265,268	\$ 683,849

#### The Harris Center for Mental Health and IDD Notes to the Preliminary Financial Statements For Month and Year to Date Ended May 31, 2022

#### II. Comparative Balance Sheet (continued)

#### d. Accounts Receivable Other (Continued)

						Increase	
		Ending	Bala	ance		(Decrease)	
	4	1/30/2022		5/31/2022	May		
DSHS Mental Heath First Aid	\$	34,484	\$	23,847	\$	(10,637)	
HHSC ZEST-Zero Suicide		108,884		187,400		78,516	
HCC Open Door		1,093,954		1,060,022		(33,931)	
HCS		22,416		22,416		-	
Tx Home Living Waiver		304,138		316,217		12,079	
Federal DSHS Disaster Assistance		-				-	
DPP-BHS		1,243,784		1,282,035		38,251	
Helpline Contracts		95,583		121,543		25,960	
City of Houston-CCSI		25,268		50,537		25,269	
City of Houston-DMD		10,332		10,332		-	
City of Houston-911 CCD Amended		39,832		41,845		2,013	
A/R - HHSC Projects		1,205,834		1,875,634		669,800	
Local TCDD C19 Vac Stipend		-		-			
Grand Total A/R - Other	\$	16,765,928	\$	18,257,096	\$	1,491,168	

- e. Unearned Income decreased due to expenditure of State GR funds.
- f. Accrued Payroll and Accounts Payable decreased because of payment timing related to accounts payable, payroll, and employee fringe benefit liabilities.
- g. General Fund Balance decreased due to operations.
- h. Waiver 1115 Reserves decreased due to use of budgeted DSRIP reserves for operations.
- i. Days of Operations in Reserve for Total Agency is 119 days versus 129 days for the prior month.

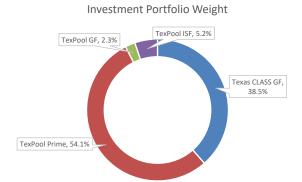
#### III. Investment Portfolio

- a. Total investments as of May 31, 2022 are \$44,329,512 of which 100% is in government pools. (Texas Class 39% and TexPool 61%)
- b. Investments this month yielded interest income of \$34,535.

#### The Harris Center for Mental Health and IDD Investment Portfolio May 31, 2022

#### **Local Government Investment Pools (LGIPs)**

	Begii	nning Balance		Transfer In		Transfer Out	Ir	nterest Income		Ending Value	Portfolio %	Yield
Texas CLASS Texas CLASS General Fund	<u> </u>	25.157.588	\$	1,000,000	Φ.	(9,100,000)	¢	14,475	Φ.	17.072.063	38.5%	0.813%
rexas CLASS General Fund	φ	23,137,300	φ	1,000,000	φ	(9,100,000)	φ	14,473	φ	17,072,003	30.370	0.01370
TexPool												
TexPool Prime		26,644,931	\$	-	\$	(2,700,000)		18,319		23,963,250	54.1%	0.813%
TexPool General Fund		1,002,173						530		1,002,703	2.3%	0.623%
TexPool Internal Service Fund		2,290,285						1,211		2,291,496	5.2%	0.623%
TexPool Sub-Total	'	29,937,389		-		(2,700,000)		20,060		27,257,449	61.5%	0.790%
Total Investments	\$	55,094,977	\$	1,000,000	\$	(11,800,000)	\$	34,535	\$	44,329,512	100%	0.799%



3 Month Weighted Average Maturity (Days)
3 Month Weighted Average Yield of The Harris Center Investment Portfolio
3 Month Rolling Weighted Average Daily Treasury Bill Rate (4 weeks)
1.00
0.507%
0.347%

This Investment Portfolio Report of The Harris Center for Mental Health and IDD as of May 31,2022 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.

Approved:

Hayden Hernandez, Accounting and Treasury Manager

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

#### Report for May 2022

Vendor	Description	Monthly Not-To- Exceed*	May-22	YTD Total Through May
Lincoln Financial Group	Retirement Funds (401a, 403b, 457)	\$2,400,000	\$1,612,139	\$14,479,775
Blue Cross Blue Shield of TX	Health and Dental Insurance	\$2,600,000	\$3,091,975**	\$11,622,769

<sup>\*</sup> 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 May payments of Liabilities for Employee Benefits = 10% of Expenditures.

<sup>\*\*</sup>Note: The May Blue Cross Blue Shield Group payment exceeded the agreed upon monthly Not-To-Exceed amount not requiring Board signature. To satisfy the Board Resolution in regards to the Not-To-Exceed amount of \$2,600,000 for the month, the Blue Cross Blue Shield payment in the amount of \$3,091,975 on May 25th was submitted for Board signature.

### EXHIBIT F-4

# June 2022 AMENDMENTS OVER 100k

#### SNAPSHOT SUMMARY CONTRACT AMENDMENTS \$100,000.00 AND MORE

June 2022 FISCAL YEAR 2022

	CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE DESCRIPTION	PREVIOUS NTE AMOUNT	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	FY22/23 AMENDMENTS									
	ADMINISTRATION									
1	Aptean	No	Amendment to Professional Services Agreement.	\$290,771.47	\$36,000.00	\$326,771.47	6/1/2022 - 5/31/2023	General Revenue (GR)	Competitive Bid	This Amendment is to increase the NTE to provide miscellaneous remote and/or on-site Consulting Services. Training has been included within the revised SOW on an as needed basis.
2	Allen Austin Lowe & Powers, Inc. dba Allen Austin	No	Interim Leadership and Consulting Services	\$73,900.00	\$32,000.00	\$105,900.00	05/29/22- 07/23/22	General Revenue (GR)	2254 Qualifications	This Amendment is to increase the NTE to cover the expansion period of the HR Interim role.
	CPEP/CRISIS SERVICES		Constant Correct	410,000.00	<b>V</b> 02,000.00	V100,000.00	GOLDILL GITZOILL	Trevende (Orr)	2204 Qualifications	pendo di tre invintenni role.
3	P-Substance Abuse	N/A	Amendment to Pooled Ageement	\$62,726.00	\$46,080.00	\$108,806.00	9/1/2021 - 8/31/2022	County	Request for Application	This Amendment is to increase the NTE and Purchase Order to refect actual expenses projected to fiscal year end (08/31/2022). The average monthly spend has been \$11,520 over the last 3 months due to an increase in census. The requested increase is \$11,520 per month for the remaining 4 months which is a total increase of \$46,080 for FY22.
	FORENSICS									
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES									
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI									
	LEASES									
	MENTAL HEALTH SERVICES									

### HARRIS Executive Contract Summary

Mental Health and IDD	
Contract Section	$\odot$
Contractor* Aptean Contract ID #*	
6115  Presented To*	
Resource Committee Full Board	
Date Presented* 6/21/2022	
Parties* (?) Aptean & The Harris Center for Mental Health and IDD	
Agenda Item Submitted For: * (?)  ☐ Information Only (Total NTE Amount is Less than \$10  ☑ Board Approval (Total NTE Amount is \$100,000.00+)  ☐ Grant Proposal  ☐ Revenue  ☐ SOW-Change Order-Amendment#  ☐ 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* (?) 6/1/2022	Contract Term End Date* (?) 5/31/2023
If contract is off-cycle, specify the contract term (?) 6/1/2022 - 5/31/2023	
Current Contract Amount* \$ 290,771.47	
Increase Not to Exceed* \$ 36,000.00	
Revised Total Not to Exceed (NTE)* \$ 326,771.47	

Fiscal Year* (?)	Amount* (?)				
2022	\$ 36,000.00				
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 Serv	vices Being Provided* (?)				
This Statement of Work (SOW) has been created to prov					
on-site consulting services, to include training if needed.					
available for small tasks or projects that do not require st	andalone work orders.				
Contract Owner*					
Mustafa Cochinwala					
Previous History of Contracting with Vendor/Contrac	ctor*				
○ Yes   No ○ Unknown					
VandariOantraatan a Historiaalla Hadamtiliaad Busin	(LUP) * /2)				
Vendor/Contractor a Historically Underutilized Business (HUB)* (?)					
○ Yes ○ No ◉ Unknown					
Community Partnership* (?)	Community Partnership* (?)				
○ Yes ○ No ● Unknown					
Supporting Documentation Upload (?)					
The Harris Center for Mental Health IDD_(2022-05-17)M					
_Order Form.pdf	454.21KB				
Vendor/Contractor Contact Person					
Name *					
Sammie Simpson					
Address*					
Street Address					
4325 Alexander Drive					
Address Line 2					
Suite 100					
City	State / Province / Region				
Alpharetta	GA				
Postal / Zip Code	Country				
30022-3740	US				
Phone Number*					
678-259-8651					

Email*			
Sammie.Simpson@aptean.com			
Budget Section		A STATE OF THE STA	
Budget Units and Amounts	Charged to e	each Budget Un	nit
Budget Unit Number*	Amount Charge	d to Unit*	Expense/GL Code No.*
1147	\$ 36,000.00		900060
Budget Manager Brown, Erica		Secondary Budget Campbell, Ricardo	t Manager
MINERAL THE THE PROPERTY OF TH			
Provide Rate and Rate Descriptions 160 hours @ \$225.00 per hour = \$36,0			
Project WBS (Work Breakdown Stru IT21.1147.06 - ROSS Phase II Enhand			
Requester Name		Submission Date	
Jones, Anthony		5/18/2022	
Budget Manager Approval(	( <b>S</b> )	taati ti Martiiraa aha aha aha aha aha aha	
Approved by		Approval Date	
Ekica Bhown		5/19/2022	
Procurement Approval	Marine and American Control of the Control		<u> </u>
File Upload (?)			
Approved by		Approval Date	
Sign		Approval Date	
Contract Owner Approval	ig 1		•
Approved by			
Mustafa Cochinnala		Approval Date 5/23/2022	
Contracts Approval			
Approve*			
<ul><li>Yes</li><li>No, reject entire submission</li></ul>			
Return for correction			

Approved by \*

Shaskyia Behn

**Approval Date\*** 5/23/2022



# Right Executive Contract Summary

Mental Health and IDD	
Contract Section	
Contractor*	
Allen Austin Lowe & Powers, INC dba/Allen Austin	
Contract ID #*	
2022-0346	
Presented To*	
Resource Committee	
Full Board	
Date Presented*	
6/28/2022	
Parties*(?)	
	al Francisco Occasio
Allen Austin Lowe and Powers Inc. dba Allen Austin Glob	oal Executive Search
Agenda Item Submitted For:* (?)	
	0,000.00)
Board Approval (Total NTE Amount is \$100,000.00+)	*************************************
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 2254 Qualifications
*	
Funding Information*	
New Contract  Amendment	
Contract Term Start Date * (?)	Contract Term End Date * (?)
5/29/2022	7/23/2022
	1720/2022
If contract is off-cycle, specify the contract term (?)	
Current Contract Amount*	
\$ 73,900.00	
Increase Not to Exceed*	
\$ 32,000.00	
Revised Total Not to Exceed (NTE)*	
\$ 105,900.00	

Fiscal Year* (?)	Amount* (?)			
2022	\$ 105,900.00			
Funding Source*				
General Revenue (GR)				
General Nevenue (GN)				
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	vices Being Provided* (?)			
Interim Leadership and Consulting Services to continue I				
Human Resources	Savid Wykes interim folde in			
Contract Owner*				
Wayne Young				
Previous History of Contracting with Vendor/Contrac	tor*			
Yes    No    Unknown				
<b>5</b>	*			
Please add previous contract dates and what services were provided*				
2/7/2022 to 3/7/2022				
Vendor/Contractor a Historically Underutilized Business (HUB) * (?)				
○ Yes ○ No ◎ Unknown				
Community Partnership * (?)				
○ Yes ○ No ● Unknown				
Supporting Documentation Upload (?)				
Vonder/6-14-0-4-15				
Vendor/Contractor Contact Person				
Name*				
Allen Austin Lowe and Powers Inc. d/b/a Allen Austin Glo	bal			
Executive Search				
Address*				
Street Address				
4801 Woodway Drive				
Address Line 2				
Suite 130W				
City	State / Province / Region			
Houston	TX			
Postal / Zip Code	Country			
77056-1884	United States			
	Office Otates			

Phone Number\* 8326542087 Email\* acretu@allenaustin.com **Budget Section** Budget Units and Amounts Charged to each Budget Unit **Budget Unit Number\*** Amount Charged to Unit\* Expense/GL Code No.\* 1101 592000 \$ 32,000.00 **Budget Manager** Secondary Budget Manager Brown, Erica Campbell, Ricardo Provide Rate and Rate Descriptions if applicable \* (?) \$175.00 Per Hour up to a maximum of (37) hours per week or \$5400 total spent whichever is less. Project WBS (Work Breakdown Structure)\* (?) Requester Name Submission Date Franco, Veronica 6/15/2022 Budget Manager Approval(s) Approved by Approval Date Frica Brown 6/15/2022 **Contract Owner Approval** Approved by Approval Date 6/15/2022 Contracts Approval Approve\* Yes No, reject entire submission Return for correction Approved by \* Approval Date\* Shaskyia Behn 6/15/2022

# **Executive Contract Summary Contract Section** Contractor\* P-Substance Abuse Contract ID #\* 7277 Presented To\* Resource Committee Full Board Date Presented\* 6/21/2022 Parties\* (?) The Harris Center for Mental Health & IDD and Pooled Vendors Agenda Item Submitted For: \* (?) ☐ Information Only (Total NTE Amount is Less than \$100,000.00) ☑ Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# Other Procurement Method(s)\* Check all that Apply Competitive Bid Competitive Proposal Sole Source Request for Proposal 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 \* (?) 8/31/2022 9/1/2021 If contract is off-cycle, specify the contract term (?) Current Contract Amount\* \$ 62,726.00 Increase Not to Exceed\* \$ 46,080.00

Revised Total Not to Exceed (NTE)\*

\$ 108,806.00

Fiscal Year* (?)	Amount* (?)			
200 - 200 -				
2022	\$ 108,806.00			
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			
Treflewar of Existing Contract	- Culci			
Justification/Purpose of Contract/Description of Serv	vices Being Provided * (?)			
Program is requesting to increase the NTE and Purchas	e Order closer to actual expenses			
projected to fiscal year end (08/31/2022). At the end of N	March, the program had \$8,000 of			
the \$46,080 contracted amount remaining. The program				
over the last 3 months due to the increase in census thu				
\$11,520 per month for the remaining 4 months for an inc	rease of \$46,080.			
Contract Owner*				
Kim Kornmayer				
x contradrate the side-contradrate of the 100 °C				
Previous History of Contracting with Vendor/Contract	Previous History of Contracting with Vendor/Contractor*			
Please add previous contract dates and what services were provided*				
	Existing FY22 P.O. CT141488 as well as FY19-FY21			
- And the state of				
Vendor/Contractor a Historically Underutilized Business (HUB)* (?)				
○ Yes ○ No ● Unknown				
Community Partnership * (?)				
○ Yes ○ No ● Unknown				
Commention Decommentation Unlead (2)				
Supporting Documentation Upload (?)				
Vendor/Contractor Contact Person				
Name*				
Vendor Pool				
Address*				
Street Address				
N/A				
Address Line 2				
N/A				
City	State / Province / Region			
N/A	N/A			
Strawers				
Postal / Zip Code	Country			
N/A	N/A			

Phone Number*			
N/A			
Email*			
na@notanemailaddress.com			
Budget Section			
Budget Units and Amounts	Charged to e	ach Budget Un	nit
Budget Unit Number* 9405	Amount Charged \$ 108,806.00	d to Unit*	Expense/GL Code No.* 543043
Budget Manager Ramirez, Priscilla		Secondary Budget Oshman, Jodel	t Manager
Provide Rate and Rate Descriptions No change. As dictated by RFA.	if applicable * (?)		
Project WBS (Work Breakdown Stru N/A	icture)* (?)		
Requester Name		Submission Date	
Ramirez, Priscilla		5/27/2022	
Budget Manager Approval	(s)		<u> </u>
Approved by			
		Approval Date	
Priscilla M. Ramirez		5/27/2022	
Contract Owner Approval			
Approved by		g Design o	
Kin KOKNMAYER		Approval Date 5/31/2022	
/ "" / " / " / " / " / " / " / " / " /		010 112022	
Contracts Approval			
Approve*  Yes  No, reject entire submission Return for correction			
Approved by *		as a	
0, 1, 0,		Approval Date*	
Shaskyia Behn		6/3/2022	

# EXHIBIT F-5

# June 2022 RENEWALS OVER 100k

SNAPSHOT SUMMARY CONTRACT RENEWALS \$100,000.00 AND MORE June 2022 FISCAL 2022-2023

CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE DESCRIPTION	FY2022 NTE AMOUNT	FY2023 NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
FY23 CONTRACT RENEWALS								
ADMINISTRATION								
Johnson Controls Fire Protection, LP	No	Inspections Services Agency Wide	\$245,802.00	\$160,000.00	9/1/2022-8/31/2023	General Revenue (GR)	Request for Proposal	Annual renewal of Agency-Wide Life Safety Systems/Inspections Services Agreement.
Knight Security Systems, LLC	No	Agency-Wide Access Control and Other System Related Services including Pharmacy Intrusion Alarm Monitoring Services.	\$165,000.00	\$145,000.00	9/1/2021-8/31/2026	General Revenue (GR)	Request for Proposal	Annual renewal of Agency-Wide Access Control and Other System Related Services Agreement including Pharmacy Intrusion Alarm Monitoring Services.
Metropolitan Landscape Management, Inc.	No	Agency-Wide Grounds Keeping Services	\$183,593.00	\$200,000.00	9/1/2022-8/31/2023	General Revenue (GR)	Tag-On	Annual renewal of Agency-Wide Grounds Keeping Services Agreement.
P-Master Pool for Facility Specialty Services	No	Painting, Flooring, Restoration/Waterproofing, Glazing, Roofing, General Contractor, Door Hardware, Paving/Striping, Doors and Fencing Services.	\$790,836.00	\$300,000.00	9/1/2022-8/31/2033	General Revenue (GR)	Request for Proposal	Annual request for funding of Master Pool for Facility Specialty Services.
P-Master Pool RFQ Professional Services	No	Architect, Environmental, Environmental, Electrical, Plumbing and Mechanical Services	\$250,000.00	\$300,000.00	9/1/2022-8/31/2023	General Revenue (GR)	Request for Qualification	Annual request for funding of Master Pool for Professional Services.
Universal Protection Service, LP dba Allied Universal Security Services	No	Agency Wide Security Guard Services-RFP	\$814,390.28	\$814,390.28	9/1/2022-8/31/2023	General Revenue (GR)	Request for Proposal	Annual renewal of Agency-Wide Security Guard Services Agreement.
PPG Global, LLC	Yes	Personal Protective Equipment (PPE) Supply Services	\$350,000.00	\$100,000.00	9/1/2022-8/31/2023	General Revenue (GR)		Annual renewal of Agency-wide personal protective equipment (PPE) supply Services Agreement.
Right Now Termite & Pest Control, Inc.	Yes	Agency-Wide Pest Control and Bed Bug Treatment	\$118,000.00	\$118,000.00	9/1/2022-8/31/2023	General Revenue (GR)	Request for Proposal	Annual renewal of agency-wide pest control and bed bug treatment Agreement.
University of Texas Health Science Center-Houston Department of Psychiatry and Behavorial Science	No	Psychiatric Resident Training for the ACT Team	\$100,647.36	\$100,647.36	07/01/22- 06/30/23	State	Sole Source	Annual renewal of Psychiatric Resident Training for the ACT Team
CDED/CDISIS SEDVICES				Reference to the second of		3		
Baylor College of Medicine	No	Physical Medical Evaluations	\$100,000.00	\$100,000.00	9/1/2022-8/31/2023	General Revenue (GR)	N/A	Annual renewal of Physical Medical Evaluations.
FORENSICS								
Amber Burks, MD d/b/a Texas Telepsychiatry Solutions, PLLC	No	Tele-Psychiatry Services	\$208,000.00	\$208,000.00	9/1/2022 - 8/31/2023	County	N/A	Annual renewal of Tele-Psychiatry Services for children and adolescents placed in Harris County placement facilities (Katy Leadership, Youth Village and BBRC).
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI								
	FY23 CONTRACT RENEWALS ADMINISTRATION  Johnson Controls Fire Protection, LP  Knight Security Systems, LLC  Metropolitan Landscape Management, Inc.  P-Master Pool for Facility Specialty Services  P-Master Pool RFQ Professional Services  Universal Protection Service, LP dba Allied Universal Security Services  PPG Global, LLC  Right Now Termite & Pest Control, Inc.  University of Texas Health Science Center-Houston Department of Psychiatry and Behavorial Science  CPEP/CRISIS SERVICES  Baylor College of Medicine  FORENSICS  Amber Burks, MD d/b/a Texas Telepsychiatry Solutions, PLLC  INTELLECTUAL DEVELOPMENTAL	FY23 CONTRACT RENEWALS ADMINISTRATION  Johnson Controls Fire Protection, LP  No  Knight Security Systems, LLC  Metropolitan Landscape Management, Inc.  P-Master Pool for Facility Specialty Services  No  P-Master Pool RFQ Professional Services  Universal Protection Service, LP dba Allied Universal Security Services  No  PPG Global, LLC  Yes  Right Now Termite & Pest Control, Inc. University of Texas Health Science Center-Houston Department of Psychiatry and Behavorial Science  No  CPEP/CRISIS SERVICES  Baylor College of Medicine  No  INTELLECTUAL DEVELOPMENTAL	FY23 CONTRACT RENEWALS ADMINISTRATION  Johnson Controls Fire Protection, LP  Knight Security Systems, LLC  Metropolitan Landscape Management, Inc.  P-Master Pool for Facility Specialty Services Universal Protection Services, LP  dba Allled Universal Security Services  Right Now Termite & Pest Control, Inc.  University of Texas Health Science Center-Houston Department of Psychiatry and Behavorial Science  Baylor College of Medicine  ADMINISTRATION  Life Safety Systems/ Life Safety Systems/ Inspections Services Agency Wide  Agency-Wide Access Control and Other System Related Services including Pharmacy Intrusion Alarm Monitoring Services.  Agency-Wide Grounds Keeping Services  Painting, Flooring, Restoration/Waterproofing, Glazing, Roofing, General Contractor, Door Hardware, Paving/Striping, Doors and Fencing Services.  Architect, Environmental, Envir	FY23 CONTRACT RENEWALS ADMINISTRATION  Johnson Controls Fire Protection, LP  Knight Security Systems, LLC  Metropolitan Landscape Management, Inc.  Mo  P-Master Pool for Facility Specialty Services P-Master Pool RFQ Professional Services Universal Protection Services Universal Protection Services  Universal Pool RFQ Professional Services  Universal Protection Services  Universal Pool RFQ Professional Services  Universal Protection Service, LP das Allied Universal Security Services  Universal Protection Service, LP Deba Allied Universal Security Services  Universal Pool RFQ Professional Services  Universal Protection Service, LP Deba Allied Universal Security Services  Universal Pool RFQ Professional Services  University of Texas Health Science Center-Houston Department of Psychiatry and Behavorial Science  P-Services  Red Bug Treatment  No  Physical Medical Evaluations  Physical Medical Evaluations  Services  Amber Burks, MD d/b/a Texas Telepsychiatry Solutions, PLLC  INTELLECTUAL DEVELOPMENTAL	CONTRACTORS	CONTRACT RENEWALS   ADMINISTRATION   Life Safety Systems   Inspecions Services Agency   Wide   S245,802.00   \$160,000.00   \$9/1/2022-8/31/2023   \$160,000.00   \$1/1/2022-8/31/2023   \$160,000.00   \$1/1/2022-8/3	CONTRACT PERIOD   FUNDING   FV23 CONTRACT PERIOD   FUNDING   FV23 CONTRACT PERIOD   FUNDING   FV23 CONTRACT PERIOD   FUNDING   FV23 CONTRACT PERIOD   FV23 CON	CONTRACTORS

SNAPSHOT SUMMARY CONTRACT RENEWALS \$100,000.00 AND MORE

June 2022 FISCAL 2022-2023

	CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE: DESCRIPTION	FY2022 NTE AMOUNT	FY2023 NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	LEASES					4			
			_						
_	MENTAL HEALTH SERVICES						ļ		
12	The Council on Recovery-OSAR	No	Substance Abuse Services in accordance with the OSAR Grant Program.	\$793,354.00	\$793,354.00	9/1/2022-8/31/2023	State Grant	CD	Annual renewal of Substance Abuse Services Agreement in accordance with the OSAR Grant Program requirements.
13	University of Houston, on behalf of The Center for Mental Health Research and Innovation in Treatment Engagement and Service	No	Annual evaluation of The Houston AOT (Assisted Outpatient Treatment) Program	\$125,000.00	\$139,647.00	7/31/2022-7/30/2023	Federal Grant		Annual renewal of the Houston AOT (Assisted Outpatient Treatment) Program Agreement through the University of Houston, on behalf of The Center for Mental Health Research and Innovation in Treatment Engagement and Service Program.
	JD, CPEP2, CDP Summary								
14	Aramark Correctional Service, LLC	No	Jail Diversion, Respite, Rehab & Re-Entry Facility Food Service	\$410,000.00	\$410,000.00	9/1/2022-8/31/2023	County	Request for Proposal	Annual renewal of the Jail Diversion, Respite, Rehab & Re-Entry Facility Food Service
	The University of Texas Health		Outpatient Competency			·	l	1	Annual renewal of Outpatient
15	Science Center at Houston-HCPC	No No	Restoration ("OCR")	\$295,003.00	\$295,003.00	9/1/2022-8/31/2023	County	Sole Source	Competency Restoration ("OCR").
16	Master Pool-Jail Diversion Inpatient Bed	No	Inpatient Psychiaric Bed Services for the Jail Diversion Services	\$54,385.00	\$90,000.00	9/1/2022 - 8/31/2023	County	Request for Proposal	Annual renewal of the Inpatient Psychiatric Bed Services Master Pool for Jail Diversion Services,
			<u> </u>						
							ļ		
_									
							<del>                                     </del>		
				-			<del> </del>		
			<del> </del>						
_						1000			
						1		<u> </u>	
		<u> </u>	-						
		ļ					ļ		
		ļ	ļ					<b></b>	
				<u> </u>					
			<b></b>					ļ	
	ļ					<u> </u>			
		I		1	ł	I	I	I	i



# **Annual Renewal Evaluation**

Mental Health and IDD	
Current Fiscal Year Contract Information	
Current Fiscal Year	
2022	
Contract ID#*	
7213	
Contractor Name*	
Johnson Controls Fire Protection, LP	
Service Provided * (?)	
Life Safety Systems/ Inspections Services Agency Wide	
Term for Off-Cycle Only*	
N/A	
Agenda Item Submitted For: (?)	
☐ Information Only (Total NTE Amount is Less than \$100,	000.00)
☑ Board Approval (Total NTE Amount is \$100,000.00+)	
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
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  IT (a. 6)  IT (a
BAA/DUA	☐ IT/Software License Agreement
<ul><li>□ Pooled Contract</li><li>☑ Renewal of Existing Contract</li></ul>	Lease Other
Neticwal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busines	s (HUB) (?)
Yes	
<ul><li>No</li></ul>	
Unknown	
Please provide an explanation	
N/A	

	Contract NTE* (?) \$245,802.00 (includes FY22 amendments)
	Rate(s)/Rate(s) Description See Exhibit B-Rates
	Unit(s) Served* 1899
	G/L Code(s)* 569010
	Current Fiscal Year Purchase Order Number*
	Contract Requestor* Lisa Cantu-Espinoza
	Contract Owner* Todd McCorquodale
	File Upload (?) Exhibit B Johnson Controls Rates for FY22.pdf 61.16KB
4	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes ● No
	Were Services delivered as specified in the contract?*  ● Yes ○ No
	Did Contractor perform duties in a manner consistent with standards of the profession?*  ■ Yes ○ No
	Did Contractor adhere to the contracted schedule?* (?)  Yes No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  ■ Yes □ No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
	● Yes ○ No
	Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
	Maintained legally required standards for certification, licensure, and/or training?* (?)  Yes No
	Renewal Determination
	s the contract being renewed for next fiscal year with this Contractor?* (?)  Yes  No
	Renewal Information for Next Fiscal Year

Budget Units and Amounts	Charged to each	n Budget Un	it	
Budget Unit Number* 1899	Amount Charged to \$ 160,000.00	Unit*	Expense/GL Code No.* 569010	
Budget Manager* Brown, Erica		condary Budget mpbell, Ricardo	Manager*	
Fiscal Year* (?) 2023		nount* (?) 60,000.00		
Next Fiscal Year Not to Exceed Amo	ount for Master Pooled	Contracts		
Contract Funding Source* General Revenue (GR)				
Contract Content Changes			0	
Are there any required changes to t  Yes No	he contract language?	* (?)		
Will the scope of the Services change?*  ○ Yes ● No				
Is the payment deadline different th  Yes  No	an net (45)?*			
Are there any changes in the Performance Targets?*  Ves  No				
Are there any changes to the Submission deadlines for notes or supporting documentation?*  Yes No				
File Upload (?)				
Contract Owner			O	
Contract Owner* (?)				
Todd McCorquodale		ATTENDED TO THE REAL PROPERTY.		
Budget Manager Approval	(s)		<u> </u>	
Approved by				
Enica Brown				
Contract Owner Approval	Alexander and the second secon		•	

Approved by

Fodd McCorquodale

# Contracts Approval

# Approve\*

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

Approved by \*

Belinda Stude

Approval Date\*
5/12/2022



#### **Annual Renewal Evaluation**

Current Fiscal Year Contract Information	n 🔿
Construction to the experience of the control of th	
Current Fiscal Year	
2022	
Contract ID#*	
2021-0171	
Contractor Name *	
Knight Security Systems, LLC	
Service Provided * (?)	
Agency-Wide Access Control and Other System Related	Services including Pharmacy
Intrusion Alarm Monitoring Services.	
Renewal Term Start Date*	Renewal Term End Date*
9/1/2021	8/31/2026
Town for Off Cools Only (For Defending Only)	
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)	
Information Only (Total NTE Amount is Less than \$10	00,000.00)
Board Approval (Total NTE Amount is \$100,000.00+)	
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
Contract Description / Type	
Contract Description / Type  Personal/Professional Services	Consultant
Consumer Driven Contract	<ul> <li>☐ Consultant</li> <li>☐ New Contract/Agreement</li> </ul>
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
Vendor/Contractor a Historically Underutilized Busin	less (HUB) (2)
Yes	
No	
Unknown	

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 165,000.00  Rate(s)/Rate(s) Description
Unit(s) Served* 1190, 1126
G/L Code(s)* 900040, 553001
Current Fiscal Year Purchase Order Number* CT141423
Contract Requestor* Sarah Harper
Contract Owner* Todd McCorquodale
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
Were Services delivered as specified in the contract?*  ■ Yes □ No
Did Contractor perform duties in a manner consistent with standards of the profession?*   No
Did Contractor adhere to the contracted schedule? * (?)  ■ Yes □ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
Yes No Maintained legally required standards for certification, licensure, and/or training?* (?)
Yes    No
Renewal Determination  A sthe contract being renewed for part fixed year with this Contractor (2)
Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes O No

Renewal Information for	Next Fiscal Year		<b>O</b>
Budget Units and Amour	its Charged to eacl	n Budget Un	it
Budget Unit Number* 1817	Amount Charged to \$ 145,000.00	Unit*	Expense/GL Code No.* 553001
Budget Manager* Brown, Erica		condary Budget mpbell, Ricardo	Manager*
Fiscal Year* (?) 2023		nount* (?) 45,000.00	
Next Fiscal Year Not to Exceed A	mount for Master Pooled	Contracts	
Contract Funding Source* General Revenue (GR)			
Contract Content Change	Alexander (Mentilania Carana) a letter de la contra del la contra de la contra de la contra del la contra del la contra de la contra del la cont		<u>~</u>
Are there any required changes t  Yes  No	o the contract language?	* (?)	
Will the scope of the Services cha	ange?*		
Is the payment deadline different  Yes No	than net (45)?*		
Please provide the net days*			
Are there any changes in the Per	formance Targets?*		
Are there any changes to the Sub	omission deadlines for no	tes or supportin	g documentation?*
File Upload (?)			
Contract Owner	and the state of t		
Contract Owner* (?)			
Please Select Contract Owner Todd McCorquodale			
Budget Manager Approva	al(s)		<u> </u>

Approved by	
Erica Brown	
Contract Owner Approval	
Approved by	
Todd McCorquodale	
Contracts Approval	
Approve*	A Commence of the Commence of
Yes	
No, reject entire submission	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/23/2022



# **Annual Renewal Evaluation**

Current Fiscal Year Contract Information	n 📀
Current Fiscal Year 2022	
Contract ID#* 2021-0116	
Contractor Name*  Metropolitan Landscape Management, Inc.	
Service Provided* (?) Agency-Wide Grounds Keeping Services	
Term for Off-Cycle Only* N/A	
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$10  Board Approval (Total NTE Amount is \$100,000.00+)  Grant Proposal  Revenue  SOW-Change Order-Amendment#  Other	00,000.00)
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 Tag-on through Choice Partners Contract# 20/030MR-3
Contract Description / Type  Personal/Professional Services Consumer Driven Contract Memorandum of Understanding Affiliation or Preceptor BAA/DUA Pooled Contract Renewal of Existing Contract	<ul> <li>Consultant</li> <li>New Contract/Agreement</li> <li>Amendment to Existing Contract</li> <li>✓ Service/Maintenance</li> <li>IT/Software License Agreement</li> <li>Lease</li> <li>Other</li> </ul>
Vendor/Contractor a Historically Underutilized Busin  Yes  No Unknown  Please provide an explanation N/A	ess (HUB) (?)

Contract NTE* (?) \$183,593.00
Rate(s)/Rate(s) Description Varies
Unit(s) Served* 1899
G/L Code(s)* 569003
Current Fiscal Year Purchase Order Number* CT141457
Contract Requestor* Sarah Harper
Contract Owner* Todd McCorquodale
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
Yes  No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes • No
Renewal Information for Next Fiscal Year

Budget Units and Amounts Charged to each Budget Unit			
Budget Unit Number* 1899	Amount Charged to Unit* \$ 200,000.00	Expense/GL Code No.* 569003	
Budget Manager* Brown, Erica	Secondary Bu Campbell, Rica	udget Manager* ardo	
Fiscal Year* (?) 2023	Amount* (?) \$ 200,000.00		
Next Fiscal Year Not to Exceed A	mount for Master Pooled Contracts		
Contract Funding Source* General Revenue (GR) Contract Content Change	es		
Are there any required changes to Yes  No			
Will the scope of the Services ch  Yes  No	ange?*		
Is the payment deadline different  Yes No	than net (45)?*		
Are there any changes in the Per  Yes  No	formance Targets?*		
Are there any changes to the Sul	omission deadlines for notes or sup	porting documentation?*	
File Upload (?)			
Contract Owner			
Contract Owner* (?)			
Todd McCorquodale			
Budget Manager Approv	al(s)		
Approved by			
Enica Brown			
Contract Owner Approva		$\odot$	

Approved by

Fodd McCorquodale

# Contracts Approval

#### Approve\*

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

Approved by \*

Belinda Stude

Approval Date\*

5/12/2022



# MARRIS Annual Renewal Evaluation

Mental Health and IDD	
Current Fiscal Year Contract Information	nn A
Current Fiscal Year 2022	
Contract ID#*	
2021-0272	
Contractor Name*	
P-Master Pool for Facility Specialty Services	
Service Provided * (?)	
Painting, Flooring, Restoration/Waterproofing, Glazing, Hardware, Paving/Striping, Doors and Fencing Services	
Renewal Term Start Date *	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)	
Information Only (Total NTE Amount is Less than \$1	
Board Approval (Total NTE Amount is \$100,000.00+	)
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#  Other	
- 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  Not Applicable (If there are no funds required)	Consumer Driven
Not Applicable (If there are no funds required)	Other
Contract Description / Type	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> </ul>
Affiliation or Preceptor	☐ Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	✓ Other Annual Funding Only
Vendor/Contractor a Historically Underutilized Busin	ness (HUB) (?)
○ Yes	
<ul><li>No</li></ul>	
Unknown	

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 790,836.00
Rate(s)/Rate(s) Description Varies
Unit(s) Served* 1899
G/L Code(s)* 557001
Current Fiscal Year Purchase Order Number* CT141884
Contract Requestor* Sarah Harper
Contract Owner* Todd McCorquodale
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*   Yes  No
Were Services delivered as specified in the contract?*  • Yes • No
Did Contractor perform duties in a manner consistent with standards of the profession?*  ● Yes ○ No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
Did Contractor render services consistent with Agency policy and procedures?* (?)  ⊚ Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes • No

Renewal Information for N	ext Fiscal Year	0
Budget Units and Amounts	s Charged to each Budget	t Unit
Budget Unit Number* 1899	Amount Charged to Unit* \$ 300,000.00	Expense/GL Code No.* 557001
Budget Manager* Brown, Erica	Secondary Bu Campbell, Rica	adget Manager*  ardo
Fiscal Year* (?) 2023	Amount* (?) \$ 300,000.00	
Next Fiscal Year Not to Exceed Am	ount for Master Pooled Contracts	
Contract Funding Source* General Revenue (GR)		
Contract Content Changes	5	<b>⊘</b>
Are there any required changes to  Yes No	the contract language?* (?)	
Will the scope of the Services char	ige?*	
Is the payment deadline different the Yes No	nan net (45)?*	
Are there any changes in the Perfo	rmance Targets?*	
Are there any changes to the Subm	nission deadlines for notes or supp	porting documentation?*
File Upload (?)		
Contract Owner		6
Contract Owner* (?) Please Select Contract Owner		
Todd McCorquodale  Budget Manager Approval	(9)	
Approved by	(9)	NAME OF THE PROPERTY OF THE PR
Ekica Brown		

Contract Owner Approval	<u> </u>
Approved by	
Todd McCorquodale	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
<ul> <li>Return for correction</li> </ul>	
Approved by *	
	Approval Date*
Shaskyia Behu	5/23/2022



# Marris Annual Renewal Evaluation

Mental Health and IDD	
Current Fiscal Year Contract Informatio	n 📀
Current Fiscal Year	
2022	
Contract ID#*	
2022-0309	
Contractor Name *	
P-Master Pool RFQ Professional Services	
Service Provided * (?)	
Architect, Environmental, Environmental, Electrical, Plun	nbing and Mechanical Services
Renewal Term Start Date*	Renewal Term End Date*
9/1/2022	8/31/2023
	0.0112020
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)	00,000,000
<ul> <li>☐ Information Only (Total NTE Amount is Less than \$10</li> <li>☑ Board Approval (Total NTE Amount is \$100,000.00+)</li> </ul>	
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
Market and the second	
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
<ul> <li>Interlocal</li> <li>Not Applicable (If there are no funds required)</li> </ul>	☐ Consumer Driven ☐ Other
Not Applicable (if there are no funds required)	Coulei Coulei
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
Popular of Existing Contract	Lease
Renewal of Existing Contract	✓ Other Annual Funding Only
Vendor/Contractor a Historically Underutilized Busin	ess (HUB) (?)
○ Yes	
No	
Unknown	

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 250,000.00
Rate(s)/Rate(s) Description Varies
Unit(s) Served* 1899
G/L Code(s)* 569015, 557001
Current Fiscal Year Purchase Order Number* CT141877
Contract Requestor* Sarah Harper
Contract Owner* Todd McCorquodale
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*   Yes  No
Were Services delivered as specified in the contract?*  ■ Yes □ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
Yes    No  Pid Contractor and decompliance of the Advance of
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  ■ Yes □ No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)

#### Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 1899 \$ 125,000.00 557001 Budget Manager\* Secondary Budget Manager\* Brown, Erica Campbell, Ricardo Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 569015 1899 \$ 75,000.00 **Budget Manager\*** Secondary Budget Manager\* Brown, Erica Campbell, Ricardo **Budget Unit Number\*** Expense/GL Code No.\* Amount Charged to Unit\* 1899 \$ 100,000,00 569008 Budget Manager\* Secondary Budget Manager\* Brown, Erica Campbell, Ricardo Fiscal Year\* (?) Amount\*(?) 2023 \$ 300,000.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts 300,000.00 for P-Master Pool RFQ Professional Services Contract Funding Source\* General Revenue (GR) **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)?\* 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* (?) Please Select Contract Owner	
Todd McCorquodale	
Budget Manager Approval(s)	
Approved by	
Exica Brown	
Contract Owner Approval	<b>⊙</b>
Approved by	
Todd McCorquodale	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/23/2022

Contract NTE (Old Text Field For Reference) (?)	
Contract NTE* (?) \$ 814,390.28	
Rate(s)/Rate(s) Description	
Unit(s) Served* 1808, 1809, 1814, 1820, 1849, 1858, 1869, 1817	
G/L Code(s)* 583000	
Current Fiscal Year Purchase Order Number* CT141539	
Contract Requestor* Eggla MacKinney	
Contract Owner* Anthony Robinson	
File Upload (?)	
Evaluation of Current Fiscal Year Pe	erformance
Have there been any significant performance de	eficiencies within the current fiscal year?*
Yes  No	
Please Explain * Guards have not performed to par. They have not s to the site and did not notify anyone of their absence failed to display professional behavior	2000-01410-007-07
Were Services delivered as specified in the con  • Yes  • No	tract?*
Did Contractor perform duties in a manner cons  ● Yes ○ No	sistent with standards of the profession?*
Did Contractor adhere to the contracted schedu	<b>lle?*</b> (?)
Were reports, billing and/or invoices submitted	in a timely manner?* (?)
Agency?* (?)	porting documentation of time spent rendering services for the
Yes    No     No     Did Contractor render services consistent with	Agency policy and procedures?* (?)
Yes  No	
Maintained legally required standards for certifi  Yes No	cation, licensure, and/or training?* (?)

#### Renewal Determination Is the contract being renewed for next fiscal year with this Contractor?\* (?) Yes No Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 1808 \$ 153,790.40 583000 Secondary Budget Manager\* Budget Manager\* Brown, Erica Campbell, Ricardo Amount Charged to Unit\* Expense/GL Code No.\* Budget Unit Number\* 583000 1809 \$ 80.659.20 Budget Manager\* Secondary Budget Manager\* Brown, Erica Campbell, Ricardo Amount Charged to Unit\* Expense/GL Code No.\* Budget Unit Number\* 583000 1814 \$ 69.760.00 **Budget Manager\*** Secondary Budget Manager\* Brown, Erica Campbell, Ricardo Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 1817 \$ 183,000.00 583000 **Budget Manager\*** Secondary Budget Manager\* Brown, Erica Campbell, Ricardo Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 1820 583000 \$ 135,367.68 **Budget Manager\*** Secondary Budget Manager\* Brown, Erica Campbell, Ricardo Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 1849 \$ 40,288.00 583000 **Budget Manager\*** Secondary Budget Manager\* Brown, Erica Campbell, Ricardo Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 1869 \$ 151,525.00 583000 Budget Manager\* Secondary Budget Manager\* Brown, Erica Campbell, Ricardo Fiscal Year\* (?) Amount\* (?) 2023 \$ 814,390.28

# Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* General Revenue (GR) **Contract Content Changes** Are there any required changes to the contract language?\* (?) Yes No Please Explain\* Rate is expected to increase from \$16.90 p/h to \$17.35 p/h and one site (1814) is expected to add another guard 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?\* Are there any changes to the Submission deadlines for notes or supporting documentation?\* Yes No File Upload (?) Exhibit A1 - Contracted Rates.PNG 343.28KB **Contract Owner**

Contract Owner\* (?)

Please Select Contract Owner

Anthony Robinson

# Budget Manager Approval(s)

1

Approved by

Exica Brown

Approved by	
D. Anthony Robinson	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	6/3/2022



### **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 2021-0127 Contractor Name\* PPG Global, LLC Service Provided \* (?) Personal Protective Equipment (PPE) Supply Services Term for Off-Cycle Only\* N/A Agenda Item Submitted For: (?) Information Only (Total NTE Amount is Less than \$100,000.00) Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# Other Procurement Method(s)\* Competitive Bid Competitive Proposal Request for Proposal Sole Source Request for Qualification Request for Application Request for Quote Tag-On Interlocal Consumer Driven Not Applicable (If there are no funds required) Other Emergency Use 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) Yes O No Unknown Please provide the HUB status HUB - State.

Contract NTE* (?) \$350,000.00
Rate(s)/Rate(s) Description Varies
Unit(s) Served* 2379
G/L Code(s)* 549001
Current Fiscal Year Purchase Order Number* CT141298
Contract Requestor* Eggla MacKinney
Contract Owner* Anthony Robinson
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*   Yes  No
Were Services delivered as specified in the contract?*  ■ Yes □ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  ● Yes ○ No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ■ Yes □ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? $^{\star}$ (?)
<ul> <li></li></ul>
<ul> <li>Yes No</li> <li>Maintained legally required standards for certification, licensure, and/or training?* (?)</li> </ul>
Yes    No
Renewal Determination  Is the contract being renewed for next fiscal year with this Contractor?* (?)
● Yes ○ No
Renewal Information for Next Fiscal Year

Budget Units and Amounts Charged to each Budget Unit				
Budget Unit Number* 2379	Amount Charged to Uni \$ 100,000.00	t* Expense/GL Cod 549001	le No.*	
Budget Manager* Campbell, Ricardo	Secon Brown	idary Budget Manager* , Erica		
Fiscal Year* (?) 2023	<b>Amou</b> \$ 100,	nt* (?) 000.00		
Next Fiscal Year Not to Exceed Amo	ount for Master Pooled Co	ntracts		
Contract Funding Source* General Revenue (GR) Contract Content Changes	3		<b>⊘</b>	
Are there any required changes to to Yes   No	dia notari se ilikin 2007, et apropi in 200 dia anteriori i ettik si den			
Will the scope of the Services chan  Yes  No	ge?*			
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			<u> </u>	
Contract Owner* (?)				
Anthony Robinson				
Budget Manager Approval	(s)		<b>•</b>	
Approved by				
Ricardo Campbell				
Contract Owner Approval			<b>O</b>	

Approved by

D. Anthony Robinson

## Contracts Approval

### Approve\*

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

Approved by \*

Belinda Stude

Approval Date\*

5/10/2022



OO CENTER for Mental Health and IDD	
Current Fiscal Year Contract Information	<u> </u>
Current Fiscal Year	ti anktormanisti ana kilanga kanana kilanga kilanga panga katilangan kananga kananga kanangan ana anta ang kan
2022	
Contract ID#*	
7786	
Contractor Name* Right Now Termite & Pest Control, Inc.	
Service Provided* (?)	
Agency-Wide Pest Control and Bed Bug Treatment	
Term for Off-Cycle Only * N/A	
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100  Board Approval (Total NTE Amount is \$100,000.00+)  Grant Proposal  Revenue  SOW-Change Order-Amendment#  Other	0,000.00)
Procurement Method(s)*	
Competitive Bid	☐ Competitive Proposal
	☐ Sole Source
Request for Application	Request for Qualification
Request for Quote	☐ Tag-On
<ul><li>Interlocal</li><li>Not Applicable (If there are no funds required)</li></ul>	☐ Consumer Driven ☐ Other
The transfer of the tendence of tendence of the tendence of the tendence of tendence of tendeco of tendence of tendence of tendence of tendence of tendence of	
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
<ul><li>☐ Pooled Contract</li><li>✓ Renewal of Existing Contract</li></ul>	☐ Lease ☐ Other
Notice and Existing Contract	
Vendor/Contractor a Historically Underutilized Busine	ss (HUB) (?)
Yes	
○ No	
Unknown	
Please provide the HUB status	
HUB - State.	

Contract NTE * (?) \$118,000.00
Rate(s)/Rate(s) Description See exhibits A1 and A2
Unit(s) Served* 1899, 9211
G/L Code(s)* 569005
Current Fiscal Year Purchase Order Number* CT141553
Contract Requestor* Sarah Harper
Contract Owner* Todd McCorquodale
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
Were Services delivered as specified in the contract?*   • Yes • No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  ● Yes ○ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
Yes      No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  ● Yes ○ No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes • No
Renewal Information for Next Fiscal Year

Budget Units and Amo	unts Charged to each Bud	get Unit
Budget Unit Number* 1899	Amount Charged to Unit* \$ 118,000.00	Expense/GL Code No.* 569005
Budget Manager* Brown, Erica	Secondary Campbell,	/ Budget Manager* Ricardo
Fiscal Year* (?) 2023	Amount* \$ 118,000.	
Next Fiscal Year Not to Exceed	l Amount for Master Pooled Contra	cts
Contract Funding Source* General Revenue (GR) Contract Content Char	iges	
Are there any required change	es to the contract language?* (?)	
Will the scope of the Services  ○ Yes   ○ No	change?*	
Is the payment deadline difference of Yes No	ent than net (45)?*	
Are there any changes in the F	Performance Targets?*	
Are there any changes to the S	Submission deadlines for notes or	supporting documentation?*
File Upload (?)		
Contract Owner	erikkon di aktorikan kan di aktorikan di aktorikan di aktorikan di aktorikan di aktorikan di aktorikan di aktor	
Contract Owner* (?)		
Todd McCorquodale		
Budget Manager Appro	oval(s)	<b>○</b>
Approved by		
Erica Brown		
Contract Owner Appro	val	

Approved by

Fodd McCorquodale

## Contracts Approval

#### Approve\*

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

Approved by \*

Belinda Stude

Approval Date\*

5/11/2022



Mental Health and IDD	
Current Fiscal Year Contract Information	n 💍
Current Fiscal Year	
2022	
Contract ID#*	
7209	
Contractor Name *	
UTHSC-Houston Department of Psychiatry and Behavor	ial Sciences
Service Provided * (?)	
Psychiatric Resident Training for the ACT Team	
Term for Off-Cycle Only*	
07/01/22-06/30/23	
Agenda Item Submitted For: (?)	
☐ Information Only (Total NTE Amount is Less than \$10	00 000 00)
■ Board Approval (Total NTE Amount is \$100,000.00+)	
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
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
Vendor/Contractor a Historically Underutilized Busin	ess (HUB) (?)
○ Yes	
○ No	
<ul><li>Unknown</li></ul>	
Contract NTE* (?)	
\$100,647.36	

Rate(s)/Rate(s) Description 63.54 per hour
Unit(s) Served* 2208
G/L Code(s)* 540504
Current Fiscal Year Purchase Order Number* CT141246
Contract Requestor* Angelica Loera
Contract Owner*  Dr. Muzquiz
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Were Services delivered as specified in the contract?*  ■ Yes □ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  ■ Yes □ No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ■ Yes □ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? $^{\star}$ (?)
⊚ Yes ○ No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes • No
Renewal Information for Next Fiscal Year
Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number* 2208	Amount Charge \$ 100,647.36	ed to Unit*	Expense/GL Code No.* 540504
Budget Manager* Shelby, Debbie		Secondary Budg Loera, Angelica	et Manager*
Fiscal Year* (?) 2022		Amount* (?) \$ 17,282.88	
Fiscal Year* (?) 2023		Amount* (?) \$ 83,364.48	
Next Fiscal Year Not to Exceed Am \$100,647.36 Contract Funding Source*	ount for Master Po	poled Contracts	
Contract Content Changes	ar a market and the state of th		<u> </u>
Are there any required changes to  Yes No	the contract langu	age?^ (?)	
Will the scope of the Services char	nge?*		
Is the payment deadline different to  Yes No	han net (45)?*		
Please provide the net days* 30			
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* (?)			
Dr. Muzquiz Budget Manager Approva	l(s)		٥
Approved by			
Debbie Chambers Shelby			





# HARRIS Annual Renewal Evaluation

Mental Health and IDD	
Current Fiscal Year Contract Information	on O
Current Fiscal Year	
2022	
Contract ID#*	
7521	
Contractor Name*	
Baylor College of Medicine Department of Family and C	Community Medicine
Service Provided* (?)	
Physical Medical Evaluations.	
Renewal Term Start Date *	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)	
☐ Information Only (Total NTE Amount is Less than \$1	00,000.00)
✓ Board Approval (Total NTE Amount is \$100,000.00+	)
☐ 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
<ul> <li>Interlocal</li> <li>Not Applicable (If there are no funds required)</li> </ul>	<ul> <li>Consumer Driven</li> <li>✓ Other Contract: Physical/Medical Evaluation</li> </ul>
Not Applicable (if there are no funds required)	Services
Contract Description / Type	
Personal/Professional Services	☐ Consultant
Consumer Driven Contract	New Contract/Agreement
<ul> <li>Memorandum of Understanding</li> </ul>	Amendment to Existing Contract
Affiliation or Preceptor	☐ Service/Maintenance
BAA/DUA	IT/Software License Agreement
Pooled Contract	Lease
✓ Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busin	ness (HUB) (?)
○ Yes	
<ul><li>No</li></ul>	
Unknown	

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 100,000.00
Rate(s)/Rate(s) Description  \$8,333.33 per month for Physical Examination, 2-5 Estimated Physical Examinations per day
Unit(s) Served* 9209
G/L Code(s)* 543011
Current Fiscal Year Purchase Order Number* CT141323
Contract Requestor* Patricia Singh
Contract Owner* Kim Kornmayer
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*   No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
Yes No Did Contractor render services consistent with Agency policy and procedures?* (?)
Yes    No  Maintained legally required standards for certification, licensure, and/or training?* (?)
● Yes ○ No  Renewal Determination

Is the contract being renewed for next fiscal year with this Contractor?* (?)					
Yes  No					
Renewal Information for Next Fiscal Year					
Budget Units and Amo	unts Charged to each Budget	t Unit			
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*			
9209	\$ 100,000.00	543011			
Budget Manager*		ıdget Manager*			
Oshman, Jodel	Kornmayer, Kir	mberly			
We amily make the post of the to analyze the contribution of the c					
Fiscal Year* (?)	Amount* (?)				
2023	\$ 100,000.00				
New Fire No. 1	I A				
100000.00	Amount for Master Pooled Contracts				
Contract Funding Source*					
General Revenue (GR)					
Contract Content Chan	GOS				
Contract Content Chan	iges .				
Are there any required change	s to the contract language?* (?)				
○ Yes ● No					
Will the scope of the Services	change?*				
○ Yes ◉ No					
Is the payment deadline differen	ent than net (45)?*				
○ Yes   ● No					
Are there any changes in the F	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				
Contract Owner* (?)					
Please Select Contract Owner					
Kim Kornmayer	Kim Kornmayer				
Budget Manager Approval(s)					

Approved by

Godd Oshman

Contract Owner Approval

Approved by

Fin Fornmayer

Contracts Approval

Approve\*

Yes

No, reject entire submission

Return for correction

Approved by\*

Approval Date\*

Shaskyra Bohn

Starkyra Bohn



Mental Health and IDD	1011		
Current Fiscal Year Contract Informatio	n 💍		
Current Fiscal Year			
2022			
Contract ID#*			
7697			
Contractor Name*			
Amber Burks, MD d/b/a Texas Telepsychiatry Solutions,	PLLC		
Service Provided * (?)			
Tele-Psychiatry Services to children and adolescent Har	ris County juveniles within the		
placement facilities (Katy Leadership, Youth Village and			
Renewal Term Start Date*	Renewal Term End Date*		
9/1/2022	8/31/2023		
Term for Off-Cycle Only (For Reference Only)			
N/A			
Agenda Item Submitted For: (?)			
☐ Information Only (Total NTE Amount is Less than \$10	00,000.00)		
■ Board Approval (Total NTE Amount is \$100,000.00+)			
Grant Proposal			
Revenue			
SOW-Change Order-Amendment#			
Other 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 ☐ Consumer Driven		
Not Applicable (If there are no funds required)	▼ Other Professional Services		
Contract Description / Type			
Contract Description / Type	Consultant		
<ul> <li>✓ Personal/Professional Services</li> <li>☐ Consumer Driven Contract</li> </ul>	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		
	Other		
Vendor/Contractor a Historically Underutilized Busin	ness (HUB) (?)		
○ Yes			
No			
<ul><li>Unknown</li></ul>			

Contract NTE (Old Text Field For Reference) (?) \$208,000.00
Contract NTE* (?) \$ 208,000.00
Rate(s)/Rate(s) Description \$200.00 per hour for a minimum of 20 hours per week.
Unit(s) Served* 6901
G/L Code(s)* 540503
Current Fiscal Year Purchase Order Number* CT141564
Contract Requestor* Sheenia Williams-Wesley
Contract Owner* Monalisa Jiles
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? $^{\star}$ $^{(?)}$
● Yes ⊝ No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)
● Yes ○ No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)

Yes
No

Renewal Information for Next Fiscal Year				
Budget Units and Amou	nts Charged to each B	udget Unit		
Budget Unit Number*	Amount Charged to Unit	Expense/GL Code No.* 540503		
Budget Manager* Williams-Wesley, Sheenia		dary Budget Manager* Ionalisa		
Fiscal Year* (?) 2023	Amour \$ 208,0			
Next Fiscal Year Not to Exceed A	Amount for Master Pooled Co	ntracts		
Contract Funding Source* County				
Contract Content Chang	es	<u> O</u>		
Are there any required changes  ○ Yes   ○ No	to the contract language?* (?			
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?*				
File Upload (?)				
Contract Owner				
Contract Owner* (?) Please Select Contract Owner				
Monalisa Jiles  Budget Manager Approv	/al(s)			
Approved by		da salaman mana adalah an salaman mana da mana salaman salaman mana da mana da mana da mana da mana da mana da		
Shenia Williams-Wesley				





Mental Health and IDD	
Current Fiscal Year Contract Information	
Current Fiscal Year	
2022	
Contract ID#*	
2021-0186	
Contractor Name *	
The Council on Recovery-OSAR	
Service Provided* (?)	
Substance Abuse Services in accordance with the OSAR	Grant Program.
Renewal Term Start Date* 9/1/2022	Renewal Term End Date* 8/31/2023
9/1/2022	0/31/2023
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)	
Information Only (Total NTE Amount is Less than \$10	0,000.00)
☑ Board Approval (Total NTE Amount is \$100,000.00+)	
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#  Other	
Procurement Method(s)*	
Check all that Apply	Commentative December
Competitive Bid	<ul><li>Competitive Proposal</li><li>Sole Source</li></ul>
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 OSAR Grant Program
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
Vendor/Contractor a Historically Underutilized Busine	ess (HUB) (?)
○ Yes	
No	
Unknown	

Contract NTE (Old Text Field Fo	or Reference) (?)
Contract NTE* (?) \$ 793,354.00	
Rate(s)/Rate(s) Description	
Unit(s) Served* 2234	
G/L Code(s)* 543061	
Current Fiscal Year Purchase C CT141507	Order Number*
Contract Requestor* Lance Britt	
Contract Owner*  Lance Britt	
File Upload (?)	
Evaluation of Current F	iscal Year Performance
Have there been any significan  ○ Yes   ○ No	t performance deficiencies within the current fiscal year?*
Were Services delivered as spe ● Yes ○ No	ecified in the contract?*
Did Contractor perform duties <ul> <li>Yes</li> <li>No</li> </ul>	in a manner consistent with standards of the profession?*
Did Contractor adhere to the co	ontracted schedule?* (?)
Were reports, billing and/or inv	voices submitted in a timely manner?* (?)
Did Contractor provide adequated Agency?* (?)	ate or proper supporting documentation of time spent rendering services for the
	s consistent with Agency policy and procedures?* (?)
Maintained legally required sta  ■ Yes   No	andards for certification, licensure, and/or training?* (?)
Renewal Determination	
Is the contract being renewed to Yes No	for next fiscal year with this Contractor?* (?)

## Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 2234 \$ 793,354.00 543061 Budget Manager\* Secondary Budget Manager\* Shelby, Debbie Loera, Angelica Fiscal Year\* (?) Amount\* (?) 2023 \$ 793,354.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* State Grant **Contract Content Changes** Are there any required changes to the contract language?\* (?) Yes No Will the scope of the Services change?\* O 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\* (?) Please Select Contract Owner Lance Britt Budget Manager Approval(s) Approved by Debbie Chambers Shelby



Mental Health and IDD		
Current Fiscal Year Contract Information	0	
Current Fiscal Year		
2022		
Contract ID#*		
7768		
Contractor Name*		
University of Houston, on behalf of The Center for Mental in Treatment Engagement and Service	Health Research and Innovation	
Service Provided* (?)		
Annual evaluation of The Houston AOT (Assisted Outpatie	ent Treatment) Program	
Town for Off Cools Only*		
Term for Off-Cycle Only * 7/31/2021 - 7/30/2022		
Agenda Item Submitted For: (?)		
☐ Information Only (Total NTE Amount is Less than \$100	,000.000,	
■ Board Approval (Total NTE Amount is \$100,000.00+)		
☐ 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	
<ul> <li>Not Applicable (If there are no funds required)</li> </ul>	Other Grant Funded     ■	
Contract Description / Type		
Personal/Professional Services	Consultant	
Consumer Driven Contract	New Contract/Agreement	
Memorandum of Understanding     Affiliation or Procentor	<ul> <li>☐ Amendment to Existing Contract</li> <li>☐ Service/Maintenance</li> </ul>	
<ul> <li>☐ Affiliation or Preceptor</li> <li>☐ BAA/DUA</li> </ul>	☐ IT/Software License Agreement	
Pooled Contract	Lease	
Renewal of Existing Contract	☐ Other	
Vendor/Contractor a Historically Underutilized Busine	ss (HUB) (?)	
○ Yes		
No		
Unknown		
Please provide an explanation		
N/A		

Contract NTE* (?) \$125,000.00	
Rate(s)/Rate(s) Description	
Unit(s) Served* 2177	
G/L Code(s)* 543053	
Current Fiscal Year Purchase Order Number* FY22 PO CT141267	
Contract Requestor* Lance Britt	
Contract Owner*  Lance Britt	
File Upload (?)	
Evaluation of Current Fiscal Year Performance	Ô
Have there been any significant performance deficiencies within the curre  Yes No	nt fiscal year?*
Were Services delivered as specified in the contract?*  ● Yes ○ No	
Did Contractor perform duties in a manner consistent with standards of the standards of th	ne profession?*
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No	
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No	
Did Contractor provide adequate or proper supporting documentation of t	ime spent rendering services for the
● Yes ⊝ No	
Did Contractor render services consistent with Agency policy and proced  • Yes  • No	ures?* (?)
Maintained legally required standards for certification, licensure, and/or tr	raining?* (?)
Renewal Determination	•
Is the contract being renewed for next fiscal year with this Contractor?*	?)
Renewal Information for Next Fiscal Year	0

Budget Units and Amounts Charged to each Budget Unit			
Budget Unit Number* 2177	Amount Charged to Unit* \$ 125,000.00	Expense/GL Code No.* 543053	
Budget Manager* Shelby, Debbie	Secondary Bu Shelby, Debbie	dget Manager*	
Fiscal Year* (?)	Amount* (?)		
2023	\$ 125,000.00		
Next Fiscal Year Not to Exceed An	nount for Master Pooled Contracts		
Contract Funding Source* Federal Grant			
Contract Content Change	es.	<u>^</u>	
Are there any required changes to	the contract language?* (?)		
Will the scope of the Services cha	inge?*		
Is the payment deadline different	than net (45)?*		
Are there any changes in the Perf	ormance Targets?*		
Are there any changes to the Submission deadlines for notes or supporting documentation?*  Yes  No			
File Upload (?)			
Contract Owner		•	
Contract Owner* (?)			
Lance Britt			
Budget Manager Approva	al(s)		
Approved by			
Debbie Chambers Shelby			
Contract Owner Approval			

Approved by

Lance Britt

## Contracts Approval

### Approve\*

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

Approved by \*

Shaskyia Behn

Approval Date\*

5/5/2022



## Marris Annual Renewal Evaluation

O CENTER or Mental Health and IDD	
Current Fiscal Year Contract Information	
Current Fiscal Year	
2022	
Contract ID#*	
7849	
Contractor Name*	
Aramark Correctional Service, LLC	
Service Provided* (?)	
Jail Diversion, Respite, Rehab & Re-Entry Facility Food S	ervice
Renewal Term Start Date*	Renewal Term End Date* 8/31/2023
9/1/2022	0/3/1/20/23
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)	
Information Only (Total NTE Amount is Less than \$100	0,000.00)
☑ Board Approval (Total NTE Amount is \$100,000.00+)	
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	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
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
Vendor/Contractor a Historically Underutilized Busine	ess (HUB) (?)
○ Yes	
● No	
Unknown	

	Contract NTE (Old Text Field For Reference) (?)
	Contract NTE* (?) \$ 410,000.00  Rate(s)/Rate(s) Description
	Unit(s) Served* 9403, 9264, 9261, 9502
	G/L Code(s)* 543013
	Current Fiscal Year Purchase Order Number* CT141604
	Contract Requestor* Priscilla Ramirez
	Contract Owner* Kim Kornmayer
	File Upload (?)
THE RESIDENCE AND ADDRESS OF THE PERSONS ASSESSED.	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes  ○ No
	Were Services delivered as specified in the contract?*
	Did Contractor perform duties in a manner consistent with standards of the profession?*    No
	Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* $(?)$
	<ul> <li>● Yes ○ No</li> <li>Did Contractor render services consistent with Agency policy and procedures?* (?)</li> </ul>
	<ul> <li>Yes O No</li> <li>Maintained legally required standards for certification, licensure, and/or training?* (?)</li> </ul>
	<ul><li>Yes ○ No</li><li>Renewal Determination</li></ul>
	Is the contract being renewed for next fiscal year with this Contractor?* (?)
	● Yes ○ No

Budget Unit Number* 1403	Amount Charged \$ 139,400.00	to Unit*	Expense/GL Code No.* 543013	
Budget Manager* Ramirez, Priscilla		Secondary Bu Oshman, Jode	dget Manager*	
Budget Unit Number* 9407	Amount Charged \$ 32,800.00	to Unit*	Expense/GL Code No.* 543013	
Budget Manager* Ramirez, Priscilla		Secondary Bu Oshman, Jode	dget Manager <sup>*</sup>	
Budget Unit Number* 0261	Amount Charged \$ 94,300.00	to Unit*	Expense/GL Code No.* 543013	
Budget Manager* Ramirez, Priscilla		Secondary Bu Oshman, Jode	dget Manager*	
Budget Unit Number* 0264	Amount Charged \$ 45,100.00	to Unit*	Expense/GL Code No.* 543013	
Budget Manager* Ramirez, Priscilla		Secondary Bu Oshman, Jode	dget Manager*	
Budget Unit Number*	Amount Charged \$ 32,800.00	to Unit*	Expense/GL Code No.* 543013	
Budget Manager* Ramirez, Priscilla		Secondary Bu	dget Manager*	
Budget Unit Number*	Amount Charged \$ 32,800.00	to Unit*	Expense/GL Code No.* 543013	
Budget Manager* Ramirez, Priscilla		Secondary Bu Oshman, Jode	idget Manager*	
Budget Unit Number*	Amount Charged \$ 32,800.00	to Unit*	Expense/GL Code No.* 543013	
Budget Manager* Ramirez, Priscilla		Secondary Bu Oshman, Jode	ıdget Manager* I	
Fiscal Year* (?) 2023		Amount* (?) \$ 410,000.00		

County

Contract Content Changes	
Are there any required changes to the contract language?* (?)  ○ Yes   ○ No	
Will the scope of the Services change?*	
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 supporti	ng documentation?*
File Upload (?)	
Contract Owner	•
Contract Owner * (?) Please Select Contract Owner	
Kim Kornmayer	
Budget Manager Approval(s)	0
Approved by	
Priscitta M. Ramirez	
Contract Owner Approval	0
Approved by	
Kin KOPNMAYEP	
Contracts Approval	
Approve*  • Yes  • No, reject entire submission  • Return for correction	
Approved by *	
Shaskyia Behn 5/26/2022	



Mental Health and 1717			
Current Fiscal Year Contract Information	0		
Current Fiscal Year 2022			
Contract ID#* 7537			
Contractor Name* The University of Texas Health Science Center at Houston	n-HCPC		
Service Provided * (?) Outpatient Competency Restoration ("OCR")			
Renewal Term Start Date* 9/1/2022	Renewal Term End Date* 8/31/2023		
Term for Off-Cycle Only (For Reference Only) N/A			
Agenda Item Submitted For: (?)  ☐ Information Only (Total NTE Amount is Less than \$100 ☐ Board Approval (Total NTE Amount is \$100,000.00+) ☐ Grant Proposal ☐ Revenue ☐ SOW-Change Order-Amendment# ☐ Other	0,000.00)		
Procurement Method(s)*			
Check all that Apply			
Competitive Bid	<ul><li>☐ Competitive Proposal</li><li>✓ Sole Source</li></ul>		
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		
Contract Description / Type			
✓ Personal/Professional Services	Consultant		
Consumer Driven Contract	New Contract/Agreement		
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> </ul>		
Affiliation or Preceptor	Service/Maintenance		
☐ BAA/DUA	☐ IT/Software License Agreement		
Pooled Contract	Lease		
Renewal of Existing Contract	Other		
Vendor/Contractor a Historically Underutilized Busine	ss (HUB) (?)		
○ Yes			
No			
○ Unknown			

Contract NTE (Old Text Field For Reference) (?) \$295,003.00
Contract NTE* (?) \$ 295,003.00
Rate(s)/Rate(s) Description \$24,583.03 per month
Unit(s) Served* 9407
G/L Code(s)* 543002
Current Fiscal Year Purchase Order Number* CT140741
Contract Requestor* Priscilla Ramirez
Contract Owner* Kim Kornmayer
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  ● Yes ○ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
● Yes ○ No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)
● Yes ○ No
● Yes ○ No  Renewal Determination

Renewal Information for I	Next Fiscal Year		Ć			
Budget Units and Amounts Charged to each Budget Unit						
Budget Unit Number* 9407	Amount Charged to U \$ 295,003.00	nit*	Expense/GL Code No.* 543071			
Budget Manager* Ramirez, Priscilla		ondary Budget man, Jodel	t Manager*			
Fiscal Year* (?) 2023		ount* (?) 5,003.00				
Next Fiscal Year Not to Exceed Ar	mount for Master Pooled C	Contracts				
Contract Funding Source* County						
Contract Content Change	es			9		
Are there any required changes to Yes No	o the contract language?*	(?)				
Will the scope of the Services cha	ange?*					
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				5		
Contract Owner* (?) Please Select Contract Owner						
Kim Kornmayer						
Budget Manager Approva	al(s)		Control of the second of the s	9		
Approved by						
Priscitta M. Ramirez						

Contract Owner Approval	
Approved by	
KIM KOPNMAYER	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
<ul> <li>Return for correction</li> </ul>	
*	
Approved by *	*
	Approval Date*
Approved by Shaskyia Behu	5/27/2022

0	AVI	te.		
8	Ran.	IAR	RI	S
O	on	EN	ND	Rim
Men	tal H	ealth	and	iiinii

#### Annual Renewal Evaluation

Mental Health and IDD	
Current Fiscal Year Contract Information	on 🔿
Current Fiscal Year	South Control of the English and Control of the Con
2022	
Contract ID#*	
7279	
Contractor Name*	
Master Pool-Jail Diversion Inpatient Bed	
Service Provided * (?)	
Inpatient Psychiaric Bed Services for the Jail Diversion	Services
Renewal Term Start Date *	Renewal Term End Date *
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
N/A	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$1	00,000.00)
Board Approval (Total NTE Amount is \$100,000.00+	)
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
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
<ul><li>BAA/DUA</li><li>✓ Pooled Contract</li></ul>	☐ IT/Software License Agreement
Renewal of Existing Contract	☐ Lease ☐ Other
. Conomai of Existing Contract	- VIIII
Vendor/Contractor a Historically Underutilized Busi	iness (HUB) (?)
○ Yes	
No     No	
○ Unknown	

	Contract NTE (Old Text Field For Reference) (?) \$54,385.00
	Contract NTE* (?) \$ 54,385.00
	Rate(s)/Rate(s) Description \$625.00 per bed day
	Unit(s) Served* 9405
	G/L Code(s)* 543044
	Current Fiscal Year Purchase Order Number* CT141332
	Contract Requestor*  Priscilla Ramirez
	Contract Owner* Kim Kornmayer
	File Upload (?)
	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year? ★  Yes  No
	Were Services delivered as specified in the contract?*   ● Yes ○ No
	Did Contractor perform duties in a manner consistent with standards of the profession?*
	Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes O No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
	Yes       No
	Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
	Maintained legally required standards for certification, licensure, and/or training?* (?)  ● Yes ○ No
STATE OF THE PERSON NAMED IN	Renewal Determination
	Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes • No

### Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit\* Expense/GL Code No.\* Budget Unit Number\* 9405 \$ 90,000.00 543044 Secondary Budget Manager\* Budget Manager\* Ramirez, Priscilla Oshman, Jodel Fiscal Year\* (?) Amount\*(?) 2023 \$ 90,000.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts 90000.00 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?\* O 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\* (?) Please Select Contract Owner Kim Kornmayer Budget Manager Approval(s) Approved by Priscilla M. Ramirez

Contract Owner Approval	C
Approved by	
KIN KOPNNAYER	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
	5/25/2022
Shaskyia Behn	

# EXHIBIT F-6



#### Award Recommendation REQUEST FOR PROPOSAL (RFP) PERIMETER FENCE AT 6160 SOUTH LOOP EAST

A Proposal Opening for The Harris Center Public Website was held on Tuesday, May 10, 2022.

Twenty-five (25) 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. Two (2) HUB vendors were located. One (1) proposal was received. One (1) proposal was deemed responsive and evaluated by the project team. The vendor who submitted a responsive proposal is Ram Telecom LLC.

The Project Team consisted of the following members: Rolanda Wilkes, Procurement Data Analyst, Frances Otto, Buyer II, Sharon Brauner, Purchasing Manager, James Blunt, Buyer II, Todd McCorquodale, Director of Facility Services and Transportation, and Oscar Garcia, Facilities Manager.

Four (4) areas were evaluated: Overall Program, Experience and Capacity, Financial Condition, and Price.

Based on the project team's evaluation of response received, it is recommended to award Ram Telecom LLC to install Perimeter Fence at 6160 South Loop East. This recommendation is based on the team's belief that Ram Telecom LLC can provide the services as outlined in the RFP document. Ram Telecom LLC is a HUB vendor.

The initial contract period is anticipated to begin upon award of contract FY2022. 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 \$253,300, subject to the appropriation and availability of funds. The total NTE (Not to Exceed) requested is \$253,300. The Funding Source is Capital Projects (1126), GL #900040. The project accounting code is FM22.1126.19.

Rolanda Wilkes

Rolanda Wilkes Date: 2022.05.25 10:14:16 -05'00'

Rolanda Wilkes, MBA Procurement Data Analyst Sharon

Digitally signed by Sharon

Brauner Date: 2022.05.25 Brauner 10:23:01 -05'00'

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

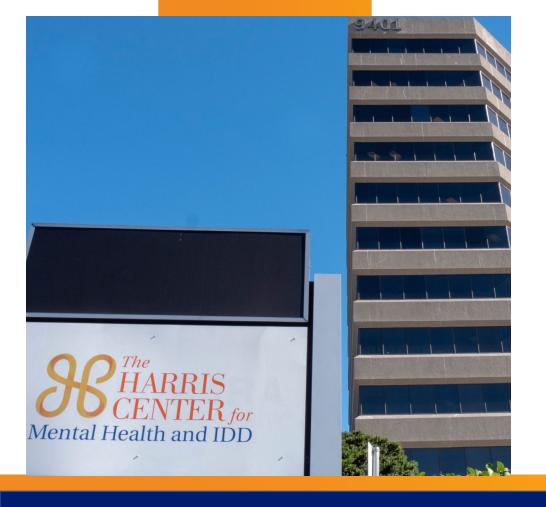
Purchasing Manager

Digitally signed by Steve Steve Evans Evans Date: 2022.05.26

09:59:29 -05'00'

Steve Evans Controller

Transforming Lives





# Perimeter Fence Install at 6160 South Loop East

June 21, 2022 Presented By: Steve Evans - Controller



## Request For Proposal – Evaluation Criteria

Evaluation Category	Relative Weight
Overall Program Concept	25%
Experience and Capacity	35%
Financial Condition	15%
Price	25%
TOTAL	100%



## **Request for Proposal – Proposal Evaluation Scores**

<b>Evaluation Team</b>	Vendor A		
Evaluator 1	3.00		
Evaluator 2	4.85		
Average Evaluation Score	3.92		

## RFP – Pricing and HUB/MWBE Status



	Vendor A		
Pricing Proposal*	\$253,300		
Vendor is HUB (Y/N)	Y		
HUB Subcontracting	NA		

Note: Pricing is included in evaluation criteria. HUB/MWBE status is for informational purposes only.

<sup>\*</sup>This pricing is Lump Sum.

# EXHIBIT F-7



#### Award Recommendation

REQUEST FOR PROPOSAL (RFP) - FY22-0224 MARKETING AND CONSULTING - HEALTHY MINDS, HEALTHY COMMUNITIES

A proposal opening for Marketing and Consulting - Healthy Minds, Healthy Communities was held on Thursday, April 7, 2022.

Twenty-three (23) 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. Sixteen (16) HUB vendors were located. Seven (7) proposals were received. Five (5) proposals were deemed responsive and evaluated by the project team. No "Notice Not to Participate" was received.

The Project Team consisted of the following members: Frances Otto, Buyer II, Sharon Brauner, Purchasing Manager, Sydney Mitchell, Digital Impact Lead and Janai Smith, Access Business Office Manager.

Four (4) areas were evaluated: Proposed Approach, Qualifications and Experience, Firm Capability and Cost.

Demos were requested of four vendors and held the week of April 18, 2022.

Based on the project team's evaluation of responses received, it is recommended to award a pool of two vendors: Langrand and A Time 4 Marketing. This recommendation is based on the team's belief that these two vendors will be the greatest value to The Harris Center. Both are HUB vendors.

The initial contract period is anticipated to begin upon award of contract for one (1) base year with two (2) 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 November 30, 2022, subject to budget approval. Subsequent contract years will begin on December 1st and end on November 30th.

The initial contract year budget requested is \$250,000.00, subject to the appropriation and availability of funds. The total NTE (Not to Exceed) requested for the three years is \$750,000.00, funded annually. The Funding Source is HMHC ARPA (7008).

Year One NTE- \$250,000.00 Year Two NTE- \$250,000.00 Year Three NTE- \$250,000.00

Digitally signed by Frances Otto Frances Otto Date: 2022.04.29 14:42:33 -05'00'

Frances Otto, CTCD Buyer II

Nina Cook Cook Date: 2022.04.29

Digitally signed by Nina 15:22:46 -05'00"

Nina Cook, MBA, CTPM Director of Purchasing

Digitally signed by Sean Sean Kim Kim Date: 2022.04.29

Sean Kim, MBA, CPA Chief Financial Officer Transforming Lives



June 21, 2022



## Marketing and Consulting – Healthy Minds Healthy Communities

Presented By: Steve Evans - Controller



## Request For Proposal – Evaluation Criteria

Evaluation Category	Relative Weight
Proposed Approach	40%
Qualifications and Experience	25%
Firm Capability	25%
Cost	10%
TOTAL	100%



## **Request for Proposal – Proposal Evaluation Scores**

<b>Evaluation Team</b>	Vendor A	Vendor B	Vendor C	Vendor D	Vendor E
Evaluator 1	4.50	4.75	3.85	2.30	2.70
Evaluator 2	4.80	4.50	3.55	2.35	3.25
Average Evaluation Score	4.65	4.63	3.70	2.33	2.98

After the Proposals were evaluated, four (4) vendors were selected for demos. They were vendors A, B, C and E.

The next slide will be the evaluation scores after the demos.



## Request for Proposal –Demo Evaluation Scores

<b>Evaluation Team</b>	Vendor A	Vendor B	Vendor C	Vendor E
Evaluator 1	4.65	3.00	3.85	1.50
Evaluator 2	4.80	1.85	3.80	2.10
Average Evaluation Score	4.73	2.43	3.83	1.80

## RFP – Pricing and HUB/MWBE Status



	Vendor A	Vendor B	Vendor C	Vendor E
Pricing Proposal*				
Vendor is HUB (Y/N)	Y	Y	Y	Y
HUB Subcontracting	NA	NA	NA	NA

<sup>\*</sup>This pricing is per hour on an as needed basis therefore amounts vary.

Note: Pricing is included in evaluation criteria. HUB/MWBE status is for informational purposes only.

## EXHIBIT F-8

# June 2022 NEW CONTRACTS UNDER 100k

#### SNAPSHOT SUMMARY NEW CONTRACTS LESS THAN \$100,000.00

June 2022 FISCAL YEAR 2022

	CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE DESCRIPTION	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	FY22 NEW CONTRACTS								
	ADMINISTRATION								
1 1	Mental Health Mental Retardation Authority of Brazos Valley	No	Crisis Intervention Helpline Services to Callers		\$81,000.00	9/1/2022 - 8/31/2023	County	N/A	New contract to provide Crisis Intervention Helpline Services fo consumer and community callers.
2	The Warring Group	No	New Professional Services Agreement for Marketing Services		\$10,000.00	5/15/2022 - 8/31/2022	General Revenue (GR)	Request for Proposal	A new Agreement to provide PR/Marketing Services which sha be conducted in phases. The intial phase shall include conducting an initial brand audit to identify communication opportunities for the organization.
3	BeIDT Health	No	New Professional Services Agreement for Recruiting Services.		\$70,000.00	5/20/2022 - 5/31/2025	General Revenue (GR)		A new agreement is to provide Physician Recruitment Services
	Vaste Management of Texas, Inc.	No	Agency Wide Nonhazardous Waste Collection and Removal/Dumpster Services.		\$70,372.00	9/1/2022-8/31/2023	General Revenue (GR)	Tag-On	New Tag - On Agreement to provide Nonhazardous Waste Collection and Removal/Dumpster Services agency-wide.
5	Bonfire Interactive Ltd.  CPEP/CRISIS SERVICES	No	Automation of Procurement Process Bonfire e-Sourcing Platform		\$9,375.00	06/01/22- 08/31/22	General Revenue (GR)	Tag-On DIR-TSO-4363	A new Agreement to enhance the solicitation process for goods and or services through the Purchasing Department. Due diligence was performed to acquire an eSourcing solution that will eliminate current manual process and allow the Harris Center Purchasing Team to automate and perform the procurement process via online platform versus a manual process. Bonfire is an eProcurement System designed to help teams increase efficiency and visibility into the entire procurement workflow.
	Of El foldiolo delevided								
30	FORENSICS								
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES								
6	Josefa Yanez Hernandez	No	Community First Choice (CFC) - Personal Assistance Services/Habilitation (PAS/HAB) and Respite		\$15,500.00	9/1/2022 - 8/31/2023	State	N/A	New Agreement to provide Community First Choice (CFC) - Personal Assistance Services/Habilitation (PAS/HAB) and Respite Services.
7	Juanita Dembo Batiste	No	Respite Services		\$14,835.00	9/1/2022-8/31/2023	State	N/A	New Agreement to provide Respite Services.
8	Katia Rubi Lemus	No	Community First Choice (CFC) - Personal Assistance Services/Habilitation (PAS/HAD) and Respite		\$25,910.00	9/1/2022-8/31/2023	State	N/A	New Agreement to provide Respite & Community First Choice (CFC)- Personal Assistance/Habilitation Service (PAS/HAB).
9	Maria Cervantes	No	CFC PAS/HAB Services and Respite		\$24,460.00	9/1/2022-8/31/2023	State	N/A	New Agreement to provide Consumers with CFC PAS/HAB and Respite Services.
10	Petra Trejo Martinez	No	Respite and/ or Community First Choice Personal Assistance/Habilitation services (CFC PAS/BAB);		\$5,950.00	8/31/2022-9/1/2023	State	N/A	New Agreement to provide Mental Health and IDD Respite and/ or Community First Choice Personal Assistance/Habilitation Services. (CFC PAS/BAB)

HARRIS CENTER for

#### Annual Renewal Evaluation

Current Fiscal Year Contract Information					
Current Fiscal Year 2022					
Contract ID#* 6626					
Contractor Name *  Mental Health Mental Retardation Authority of Brazos Valley					
Service Provided* (?) Crisis Intervention Helpline Services to Callers					
Renewal Term Start Date* 9/1/2022	Renewal Term End Date* 8/31/2023				
Term for Off-Cycle Only (For Reference Only) N/A					
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100,000.00)  Board Approval (Total NTE Amount is \$100,000.00+)  Grant Proposal  Revenue  SOW-Change Order-Amendment#  Other					
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				
Contract Description / Type					
Personal/Professional Services Consumer Driven Contract Memorandum of Understanding Affiliation or Preceptor BAA/DUA Pooled Contract Renewal of Existing Contract	Consultant  New Contract/Agreement  Amendment to Existing Contract  Service/Maintenance  IT/Software License Agreement  Lease  Other				
Vendor/Contractor a Historically Underutilized Business (HUB) (?)  Yes  No  Unknown					

Contract NTE (Old Text Field For Reference) (?) 81,000	
Contract NTE* (?) \$ 81,000.00	
Rate(s)/Rate(s) Description  (\$6,750.00) for call volume of 501 to 700 calls per month. If, volume of call(s) exceeds 10% of the current contracted range then said volume will be billed at Eleven Dollars (\$11.00) per call	
Unit(s) Served*	
G/L Code(s)* 0	
Current Fiscal Year Purchase Order Number* N/A	
Contract Requestor*  Janai Smith	
Contract Owner*  Jennifer Battle	
File Upload (?)	
	SHIP OF
Evaluation of Current Fiscal Year Performance	5
Evaluation of Current Fiscal Year Performance  Have there been any significant performance deficiencies within the current fiscal year?*  Yes No	2
Have there been any significant performance deficiencies within the current fiscal year?*	0
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*	0
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*	
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)	
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)	
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)	
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)  Yes No  Did Contractor render services consistent with Agency policy and procedures?*(?)	

Is the contract being renewed	for next fiscal year with this Contracto	r?* (?)				
Yes ○ No						
Renewal Information for Next Fiscal Year						
Budget Units and Amo	Budget Units and Amounts Charged to each Budget Unit					
Budget Unit Number* 7001	Amount Charged to Unit* \$ 81,000.00	Expense/GL Code No.* 420015				
Budget Manager* Ilejay, Kevin	, , ,					
Fiscal Year* (?)	Amount* (?)					
2023	\$ 81,000.00					
Next Fiscal Year Not to Exceed	d Amount for Master Pooled Contracts					
Contract Funding Source* County						
Contract Content Char	ges	<u> </u>				
	s to the contract language?* (?)					
○ Yes ® No						
Will the scope of the Services  Yes No	Will the scope of the Services change?*  ○ Yes ◎ No					
Is the payment deadline differen	ent than net (45)?*					
○ Yes ® No						
Are there any changes in the F	Performance Targets?*					
○ Yes ● No						
Are there any changes to the \$	Are there any changes to the Submission deadlines for notes or supporting documentation?*					
File Upload (?)						
Contract Owner						
Contract Owner* (?)						
Please Select Contract Owner						
Jennifer Battle	Jennifer Battle					
Budget Manager Approval(s)						

Approved by	
kevin ilejay	
Contract Owner Approval	
Approved by	
Tennifer Battle	
Contracts Approval	
Approve*	
<ul><li>Yes</li></ul>	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/26/2022
• • • • • • • • • • • • • • • • • • •	

## HARRIS CENTER,

#### **Executive Contract Summary**

Contract Section	
Contractor*	
The Warring Group	
Contract ID #*	
2022-0422	
Presented To*	
<ul><li>Resource Committee</li><li>Full Board</li></ul>	
Date Presented*	
6/21/2022	
Parties*(?)	
The Warring Group and The Harris Center for Mental Hea	alth and IDD
Agenda Item Submitted For: * (?)	
✓ Information Only (Total NTE Amount is Less than \$10	0,000.00)
<ul><li>☐ Board Approval (Total NTE Amount is \$100,000.00+)</li><li>☐ Grant Proposal</li></ul>	
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 Quote	Request for Qualification  Tag-On
Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	✓ Other Consultant
Funding Information*	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
5/15/2022	8/31/2022
If contract is off-cycle, specify the contract term (?)	
Fiscal Year* (?)	Amount* (?)
2022	\$ 2,999.00
Funding Source*	
General Revenue (GR)	

Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	✓ New Contract/Agreement
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> </ul>
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
<ul> <li>□ Pooled Contract</li> <li>□ Renewal of Existing Contract</li> </ul>	☐ Lease ☐ Other
Renewal of Existing Contract	G Other
Justification/Purpose of Contract/Description of Servi	ces Being Provided* (?)
The Harris Center for Mental Health and IDD seeks a PR/	
initial brand audit (Phase 1) to identify communication opp	A AND DEPOSITION OF THE PROPERTY OF THE PROPER
Contract Owner*	
Carrie Rys	
Previous History of Contracting with Vendor/Contract	or*
○ Yes   No ○ Unknown	
	* (a)
Vendor/Contractor a Historically Underutilized Busine	ss (HUB) " (?)
○ Yes ○ No ● Unknown	
Community Partnership* (?)	
○ Yes ○ No ● Unknown	
Supporting Documentation Upload (?)	
Statement of Work - TheHarrisCenter_April2022.pdf	146.27KB
Vendor/Contractor Contact Person	$\circ$
Name *	
The Warring Group	
Address*	
Street Address	
9007 Avebury Stone Circle	
Address Line 2	
City	State / Province / Region
Missouri City	TX
Postal / Zip Code	Country
77459-2433	US
Phone Number*	
2819066420	
Email*	
christy@thewarringgroup.com	
Budget Section	$\odot$
Budget Units and Amounts Charged to e	ach Budget Unit

**Budget Unit Number\*** Amount Charged to Unit\* Expense/GL Code No.\* 1109 574000 \$ 2.999.00 **Budget Manager** Secondary Budget Manager Brown, Erica Campbell, Ricardo Provide Rate and Rate Descriptions if applicable \* (?) 15-20 hours of time ranging from \$2250-\$3000 Project WBS (Work Breakdown Structure)\* (?) Identify communication opportunities for the organization Requester Name Submission Date Franco, Veronica 5/5/2022 Budget Manager Approval(s) Approved by Approval Date Exica Brown 5/6/2022 Procurement Approval File Upload (?) Approved by Approval Date Sign Contract Owner Approval Approved by Approval Date Carrie Rys 5/18/2022 Contracts Approval Approve\* Yes No, reject entire submission Return for correction Approved by \* Approval Date\* Shaskyia Behn 5/18/2022

6		The		
10	B	HAI	RRI	S
(0)	D	Alc 10	CHE	R a
N/H	alfalla.	realth		UD

#### **Executive Contract Summary**

Mental Health and IDD	
Contract Section	
the transfer of the transfer o	
Contractor*	
BeIDT Health	
Contract ID #*	
2022-0420	
Presented To *	
Resource Committee	
Full Board	
Date Presented*	
6/21/2022	
Parties*(?)	
The Harris Center for Mental Health IDD & BeIDT Health	
Agenda Item Submitted For:* (?)	
✓ Information Only (Total NTE Amount is Less than \$10	00,000.00)
Board Approval (Total NTE Amount is \$100,000.00+)	
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
31 07 00 00 00 00 00 00 00 00 00 00 00 00	
Check all that Apply	
Competitive Bid	☐ 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 New Contract
<u> </u>	
Funding Information*	
<ul> <li>New Contract</li></ul>	
Contract Term Start Date * (?)	Contract Term End Date * (?)
5/20/2022	5/31/2025
If contract is off-cycle, specify the contract term (?)	
solition to on-cycle, specify the contract term (*)	
Fiscal Year* (?)	* (1)
	Amount*(?)
2022	\$ 70,000.00
~	
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 Serv	vices Being Provided* (?)
THIS AGREEMENT WILL ALLOW PARTNERSHIP BETY	
FOR MENTAL HEALTH AND IDD & BEIDT.	WEEK THE PARKS OFFICE
PLEASE SEE THE ATTACHED DOCUMENTS REGARD AGREEMENT.	DING THE TERMS OF THE
Contract Owner*	
Terence Freeman	
Previous History of Contracting with Vendor/Contrac	tor*
○ Yes ○ No ⊚ Unknown	
Tes Onknown	
Vendor/Contractor a Historically Underutilized Busin	ess (HUB)*(?)
○ Yes ○ No ● Unknown	
Community Partnership* (?)	
○ Yes ○ No ● Unknown	
Supporting Documentation Upload (?)	
Agreement 1_19_22 Updated by Jenna.docx.pdf	170.11KB
Behavioral Health Sell Sheet Update.pdf	2.75MB
Master Agreement 4_29_22 revised TH.docx	11.09KB
3	
Vendor/Contractor Contact Person	<u> </u>
Name*	
Tom Hissong	
Address*	
Street Address	
11811 Shaker Boulevard Suite 330	
Address Line 2	
City	State / Province / Region
Cleveland	OH
Postal / Zip Code	Country
44120-1931	US
Phone Number*	
216-329-0312	
Email*	
tom.h@beidthealth.com	
Budget Section	

Budget Units and Amou	ınts Charged to e	each Budget Ur	nit
Budget Unit Number* 1108	Amount Charge \$ 70,000.00	d to Unit*	Expense/GL Code No.* 592000
Budget Manager Brown, Erica		Secondary Budget Campbell, Ricardo	t Manager
Provide Rate and Rate Descript	ions if applicable* (?)		
Project WBS (Work Breakdown N/A	Structure)* (?)		
Requester Name Williams, Jedonne		Submission Date 5/20/2022	
Budget Manager Appro	val(s)	Managara Managara Ang ang at	
Approved by			
Enica Brown		Approval Date 5/20/2022	
Procurement Approval	nan an		Ó
File Upload (?)			
Approved by		Approval Date	
Contract Owner Approv	al	dia minoranta an ara-ara-ara-ara-ara-ara-ara-ara-ara-ara	<u> </u>
Approved by			
Terence Greeman		Approval Date 5/20/2022	
Contracts Approval			
		alideologica (Adamada) alian da analaria (Adamad	
Approve*  • Yes  • No, reject entire submission  • Return for correction			
Approved by *		4	
Shaskyia Behn		Approval Date* 5/20/2022	



#### **Annual Renewal Evaluation**

Current Fiscal Year Contract Information	•				
Current Fiscal Year 2022					
Contract ID#* 7776					
Contractor Name * Waste Management of Texas, Inc.					
Service Provided* (?)  Agency Wide Nonhazardous Waste Collection and Removal/Dumpster Services.					
Renewal Term Start Date*	Renewal Term End Date*				
9/1/2022	8/31/2023				
Term for Off-Cycle Only (For Reference Only) N/A					
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100,000.00)  Board Approval (Total NTE Amount is \$100,000.00+)  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 Tag-On 18/042KC-02 -Choice Partners				
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				
Vendor/Contractor a Historically Underutilized Busine	ess (HUB) (?)				
○ Yes					
No					
Unknown					

Contract NTE (Old Text Field For Reference) (?) \$66,178.87		
Contract NTE* (?) \$ 66,178.87		
Rate(s)/Rate(s) Description See Exhibit A2		
Unit(s) Served* 1899		
G/L Code(s)* 596006		
Current Fiscal Year Purchase Order Number* CT141664		
Contract Requestor* Sarah Harper		
Contract Owner* Todd McCorquodale		
File Upload (?) FY22 ID 7776 Waste Mgt (quote sheet) 2021- 2022 updated.pdf 126.3KB		
Evaluation of Current Fiscal Year Performance		
Have there been any significant performance deficiencies within the current fiscal year?*  O Yes  No		
Were Services delivered as specified in the contract?*  ● Yes ○ No		
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No		
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No		
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No		
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)		
● Yes ○ No  Did Contractor render services consistent with Agency policy and procedures?* (?)		
● Yes ○ No		

Yes    No					
Renewal Information for	or Next Fiscal Year	<u> </u>			
Budget Units and Amounts Charged to each Budget Unit					
Budget Unit Number* 1899	Amount Charged to Unit* \$ 70,372.00	Expense/GL Code No.* 596006			
Budget Manager* Brown, Erica	Secondary E Campbell, Ri	Budget Manager* cardo			
Fiscal Year* (?) 2023	Amount* (?) \$ 70,372.00				
Next Fiscal Year Not to Excee	d Amount for Master Pooled Contracts	s			
Contract Funding Source*					
General Revenue (GR)					
Are there any required change  ● Yes ○ No  Please Explain*	es to the contract language?* (?)				
please note any change to the C 22/030SG-02 Choice Partners c awarded, see new pricing - total contingency	ontract that was just				
Will the scope of the Services change?*  Yes No					
Is the payment deadline differ Yes  No	ent than net (45)?*				
Are there any changes in the l	Performance Targets?*				
Are there any changes to the	Submission deadlines for notes or su	pporting documentation?*			
File Upload (?) Waste Management MHMRA of Harris County Renewal.docx 39.36KB					
Contract Owner		Ć			
Contract Owner* (?)					
Please Select Contract Owner Todd McCorquodale					

Approved by	
Erica Brown	
Contract Owner Approval	
Approved by	
Food Mc Por guedale	
Todd McCorquedale	
Tedd McCorquedale  Contracts Approval	
Contracts Approval	
Contracts Approval	
Contracts Approval Approve*  Yes	
Contracts Approval Approve* Yes No, reject entire submission	
Contracts Approval Approve*  Yes No, reject entire submission Return for correction	Approval Date*

MOL	2 11	DDI	700
mi	S CE	NIGHT FA	
	AUIU	N. B. B. P.	N fo
Ment	al Heal	th and	110)1

Mental Health and IDD	illialy				
Contract Section	$\wedge$				
Contract Section	The state of the Section of the Sect				
Contractor*					
Bonfire Interactive Ltd					
Contract ID #*					
2022-0419					
Presented To *					
Resource Committee					
○ Full Board					
Date Presented*					
6/21/2022					
Parties*(?)					
The Harris Center for Mental Health and IDD and Bonfin	re Interactive Ltd.				
Tag-on to DIR-TSO-4363, State of Texas					
Agenda Item Submitted For: * (?)					
✓ Information Only (Total NTE Amount is Less than \$1	00.000.00)				
Board Approval (Total NTE Amount is \$100,000.00+					
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 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 * (?)				
6/1/2022	8/31/2022				
If contract is off-cycle, specify the contract term (?)					
Fiscal Year* (?)	Amount* (?)				
2022	\$ 9,375.00				
Funding Source*					

General Revenue (GR)

Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	✓ New Contract/Agreement
<ul> <li>Memorandum of Understanding</li> </ul>	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 S	Services Being Provided * (?)
Purpose: To enhance the solicitation process for good	
performed to acquire an eSourcing solution that will e	440 - 10 page 400 400 10 - 10 - 10 control 10 10 page 40 page
allow The Harris Center Purchasing team to automat	e and perform the procurement
process via an online platform versus a manual proce	1504 H 1874 S AN 1677 SWY-1893 A Y A CHIP OF BAT CAUGUS TO SHOOL. ARE SAY OF SAY AND SAY OF S
System designed to help teams increase efficiency a workflow.	nd visibility into the entire procurement
Contract Owner*	
Nina Cook	
Previous History of Contracting with Vendor/Con-	tractor*
○ Yes   No ○ Unknown	
Vendor/Contractor a Historically Underutilized Bu	siness (HUB) * (?)
○ Yes ○ No ● Unknown	
Community Partnership * (?)	
Yes No Unknown	
Supporting Documentation Upload (?)	
RECOMMENDATION E-Sourcing Software.rw_REV	nc FINAL 141.58KB
04202022 (003) (002).pdf	111331.0
Vendor/Contractor Contact Person	$\odot$
Name *	
Richard Naylor, Account Executive (AE)	
Address*	
Street Address	
121 Charles Street W.	
Address Line 2	
Suite C429	
City	State / Province / Region
Kitchener	ON
Postal / Zip Code	Country
N/A	N/A
Phone Number*	
(415) 223-8130	
Email*	
rnaylor@gobonfire.com	
Budget Section	

<b>Budget Units and Amount</b>	s Charged to	each Budget Ur	nit
Budget Unit Number*	Amount Charge \$ 4,375.00	d to Unit*	Expense/GL Code No.* 551003
Budget Manager Campbell, Ricardo		Secondary Budge Brown, Erica	t Manager
Budget Unit Number* 1128	Amount Charge \$ 5,000.00	d to Unit*	Expense/GL Code No.* 553002
Budget Manager Campbell, Ricardo		Secondary Budge Brown, Erica	t Manager
Provide Rate and Rate Description N/A	s if applicable * (?)		
Project WBS (Work Breakdown Str N/A	ructure) * (?)		
Requester Name Cook, Nina		Submission Date 4/21/2022	
Budget Manager Approva	l(s)		0
Approved by  Ricardo Campbell		Approval Date 4/21/2022	
Procurement Approval			<u> </u>
File Upload (?)			
Approved by  Sharon Brauner		Approval Date 4/21/2022	
Contract Owner Approval			<u> </u>
Approved by  Mina Cook		Approval Date 5/13/2022	
Contracts Approval	A. There is a second of the se		
Approve*  • Yes  • No, reject entire submission  • Return for correction			

Approved by\*

Shaskejia Behu

Approval Date\* 5/13/2022



#### Recommendation for Board Approval Automation of Procurement Process Bonfire e-Sourcing Platform

To enhance the solicitation process for goods and or services, due diligence was performed to acquire an eSourcing solution that will eliminate current manual process and allow The Harris Center Purchasing team to automate and perform the procurement process via an online platform versus a manual process.

Bonfire is an eProcurement System designed to help teams increase efficiency and visibility into the entire procurement workflow. Many local Texas agencies have selected Bonfire as their eProcurement System and procured Bonfire through their Department of Information Resources (DIR) contract, DIR-TSO-4363 with the State of Texas. Supporting agencies like Harris County, Harris County Metro, Houston Community College and over 100 organizations in Texas.

Bonfire covers the entire solicitation process from receiving internal customer requests, creating drafts, and leveraging templates to build solicitations, bringing internal stakeholders into the system to collaborate, setting up approval steps, advertising solicitations, receiving digital submissions, automating bid analysis, conducting Request for Proposal (RFP) evaluation, and pulling insights and reports from the entire process.

#### Benefits:

- Automate and improve Service delivery to the agency, purchasing and suppliers.
- Position Purchasing to identify and deliver value by better understanding and define end-user's underlying needs rather than just address the stated problems.
- Reduce costs by adopting sustainable procurement practices.
- Vendor Management System.
- Advanced analytics and reporting solutions.
- On Demand Training.

Six (6) vendors were contacted. Five (5) vendors provided demonstrations of their product.

- Bonfire, the recommended platform User friendly cloud-based platform with advanced features.
- Aptean (Current Financial System) Manual, very antiquated process.
- Performance Logic (Current Intake System) No solicitation module only Intake.
- Public Purchase Limited flexibility for template customization and no analytics and reporting.
- BidNet Direct/Vendor Registry Manual processes still exist.
- PlanetBids No response.

The Purchasing Team participated in the demos. Six (6) areas were reviewed, platform performance, user-friendly capability, template customization for complex solicitations, intake functionality, vendor management and analytics and reporting capabilities.

Based on the teams review and demonstration presented, Bonfire meets the automation requirements for the solicitation process performed by The Harris Center Purchasing team.

Board approval is requested to enter a contract with Bonfire through the State of Texas DIR program.

#### **Contract:**

DIR-TSO-4363 with the State of Texas

Vendor: Bonfire

#### **Contract Term:**

FY 2022: Initial Period NTE: June 1, 2022, to August 31, 2022 - \$ 9,375.00

FY 2023: Ongoing Annual Term NTE beginning: September 1, 2022, to August 31, 2023 - \$37,500.00

(includes eight (8) licenses).

The contract period is for an initial term in FY 2022 with an option to renew for additional years in oneyear increments based upon satisfactory performance, which will be reviewed, on an annual basis. The contract shall commence with a tentative award date, and shall remain in effect unless terminated, canceled, or extended, as otherwise provided herein, based upon satisfactory performance and service.

The total NTE (Not to Exceed) amount to be funded annually subject to availability of the budget each year.

#### **Funding Source:**

Unit: 1128 Purchasing Department

Breakdown:

1. GL 551003 - \$4,375

2. GL 553002 - \$5,000

Rolanda Wilkes

Digitally signed by Rolanda Wilkes Date: 2022.04.21

Rolanda Wilkes, MBA, MPM, SSGBC

Procurement Data Analyst

Nina Cook Cook Date: 2022,04,21

Nina Cook, MBA, CTPM Director of Purchasing

Sean Kim Kim Date: 2022.04.21

Digitally signed by Sean

Sean Kim, MBA, CPA Chief Financial Officer

## HARRIS Annual Renewal Evaluation

Mental Health and IDD	
Current Fiscal Year Contract Information	on <u>^</u>
Current Fiscal Year	
2022	
Contract ID#*	
6965	
Contractor Name*	
Josefa Yanez Hernandez	
Service Provided * (?)	
Community First Choice (CFC) - Personal Assistance S	Services/Habilitation (PAS/HAB)
and Respite	
Renewal Term Start Date*	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
N/A	
Agenda Item Submitted For: (?)	
☑ Information Only (Total NTE Amount is Less than \$1	00,000.00)
Board Approval (Total NTE Amount is \$100,000.00+	-)
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 Interlocal	☐ Tag-On  ☑ Consumer Driven
Not Applicable (If there are no funds required)	Other
Contract Description / Time	
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
Vendor/Contractor a Historically Underutilized Busi	iness (HUB) (?)
○ Yes	
○ No	
<ul><li>Unknown</li></ul>	

Contract NTE (Old Text Field For Reference) (?) 15,751.00
Contract NTE* (?) \$ 15,751.00
Rate(s)/Rate(s) Description \$9 per hour for Individuals with LON of 1 & 5 \$10.00 per hour for individuals w/ LON of 8 & 6
Unit(s) Served* 3585
G/L Code(s)* 543005 - Respite 543009 - CFC/PAS HAB
Current Fiscal Year Purchase Order Number* CT140537
Contract Requestor* Patrina Anthony
Contract Owner* Lily Pan
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes • No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination

Is the contract being renewed	d for next fiscal year with this (	Contractor?* (?)
Renewal Information	for Next Fiscal Year	<b>○</b>
Rudget Units and Am	ounts Charged to each	Pudgot Unit
Budget Unit Number*	ounts Charged to each	
3585	Amount Charged to U \$ 6,000.00	543005
Budget Manager* Adams-Austin, Mamie		ondary Budget Manager* ney, Michael
Budget Unit Number*	Amount Charged to U \$ 9,500.00	nit* Expense/GL Code No.* 543009
Budget Manager* Adams-Austin, Mamie		ondary Budget Manager* ney, Michael
Fiscal Year* (?)		ount* (?) ,500.00
Contract Funding Source* State  Contract Content Cha	inges	
Are there any required chang  Yes No	ges to the contract language?*	(?)
Please Explain* \$10/hr for CFC; \$10/hr for Res	pite	
Will the scope of the Service  Yes No		
Is the payment deadline diffe	rent than net (45)?*	
Are there any changes in the  Yes No	Performance Targets?*	
Are there any changes to the	Submission deadlines for not	es or supporting documentation?*
File Upload (?)		
Contract Owner		Ô

Contract Owner* (?)	
Please Select Contract Owner	
Mike Downey	
Budget Manager Approval(s)	
Approved by	
Mamie Oddams-Odustin	
Contract Owner Approval	<u> </u>
Approved by	
Michael D Downey	
Contracts Approval	
Approve*	
<ul><li>Yes</li></ul>	
<ul> <li>No, reject entire submission</li> </ul>	
<ul> <li>Return for correction</li> </ul>	
Approved by *	
	Approval Date*
Shaskyia Behn	5/17/2022
THE CONTRACT OF THE CONTRACT O	

HARRIS CENTER for

## **Annual Renewal Evaluation**

Mental Health and IDD	
Current Fiscal Year Contract Information	n 🗠
Current Fiscal Year	
2022	
0 1 1 1 1 1 1 1 1 1	
Contract ID#*	
6974	
Contractor Name*	
Juanita Dembo Batiste	
Service Provided* (?)	
Respite	
	D
Renewal Term Start Date *	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
N/A	
Agenda Item Submitted For: (?)	
☑ Information Only (Total NTE Amount is Less than \$16	00,000.00)
Board Approval (Total NTE Amount is \$100,000.00+)	
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 Quote	Request for Qualification
Interlocal	☐ Tag-On  ✓ Consumer Driven
Not Applicable (If there are no funds required)	Other
- ····· pp ( more and no realize requires,	
Contract Description / Type	
	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> </ul>
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busin	ness (HUB) (?)
○ Yes	
⊚ No	
<ul><li>Unknown</li></ul>	

	Contract NTE (Old Text Field For Reference) (?) \$6,300
	Contract NTE* (?) \$ 12,835.00
	Rate(s)/Rate(s) Description \$10/HR LON
	Unit(s) Served* 3585
	G/L Code(s)* 543005 - Respite
	Current Fiscal Year Purchase Order Number* CT141430
	Contract Requestor* Patrina Anthony
	Contract Owner* Lily Pan
	File Upload (?)
Accessed to the Parket	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes  ○ No
	Were Services delivered as specified in the contract?*  ● Yes ○ No
	Did Contractor perform duties in a manner consistent with standards of the profession?*   No
	Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
	● Yes ○ No
	Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
	Maintained legally required standards for certification, licensure, and/or training? ★ (?)  • Yes ○ No
-	Renewal Determination
	Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes O No

## Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 3585 \$ 6,417.50 543005 Budget Manager\* Secondary Budget Manager\* Adams-Austin, Mamie Downey, Michael Expense/GL Code No.\* Budget Unit Number\* Amount Charged to Unit\* 543009 3585 \$ 8,417.50 Secondary Budget Manager\* Budget Manager\* Adams-Austin, Mamie Downey, Michael Amount\* (?) Fiscal Year\* (?) 2023 \$ 14,835.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* State **Contract Content Changes** Are there any required changes to the contract language?\* (?) Yes No Please Explain\* \$10.00 per hour for Respite and CFC. 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\* (?) Please Select Contract Owner Mike Downey

Budget Manager Approval(s)	
Approved by	
ON all al	
Mamie Adams-Austin	
Contract Owner Approval	0
Approved by	
Michael D Donney	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/26/2022



## **Annual Renewal Evaluation**

Current Fiscal Year Contract Informatio	n 📀
Current Fiscal Year 2022	
Contract ID#* 7066	
Contractor Name* Katia Rubi Lemus	
Service Provided* (?)  Community First Choice (CFC) - Personal Assistance Se and Respite	ervices/Habilitation (PAS/HAD)
Renewal Term Start Date* 9/1/2022	Renewal Term End Date* 8/31/2023
Term for Off-Cycle Only (For Reference Only) N/A	
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$10 Board Approval (Total NTE Amount is \$100,000.00+) 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     Other     Other
Not Applicable (If there are no funds required)	Other
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     ■     Contract     ■     Contract     ■     Contract     □     Contract     Contract     □     Contract	Other
Vendor/Contractor a Historically Underutilized Busin	ness (HUB) (?)
○ Yes	
○ No	
<ul><li>Unknown</li></ul>	

Contract NTE (Old Text Field For Reference) (?) 12,600
Contract NTE* (?) \$ 23,910.00
Rate(s)/Rate(s) Description \$10.00 per hour for up to 10 hours in a 24-hour period (Out of Home Respite), \$10.00 per hour for individuals with LON 1 and 5 \$10.00 per hour for individuals with LON 8 and 6
Unit(s) Served* 3585
G/L Code(s)* 543005: 543009
Current Fiscal Year Purchase Order Number* CT141422
Contract Requestor* Patrina Anthony
Contract Owner* Lily Pan
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  No
<ul><li>Yes ● No</li><li>Were Services delivered as specified in the contract?*</li></ul>
<ul> <li>Yes ● No</li> <li>Were Services delivered as specified in the contract?*</li> <li>● Yes ○ No</li> <li>Did Contractor perform duties in a manner consistent with standards of the profession?*</li> </ul>
<ul> <li>Yes ● No</li> <li>Were Services delivered as specified in the contract?*</li> <li>● Yes ○ No</li> <li>Did Contractor perform duties in a manner consistent with standards of the profession?*</li> <li>● Yes ○ No</li> <li>Did Contractor adhere to the contracted schedule?* (?)</li> </ul>
<ul> <li>Yes ● No</li> <li>Were Services delivered as specified in the contract?*</li> <li>● Yes ○ No</li> <li>Did Contractor perform duties in a manner consistent with standards of the profession?*</li> <li>● Yes ○ No</li> <li>Did Contractor adhere to the contracted schedule?* (?)</li> <li>● Yes ○ No</li> <li>Were reports, billing and/or invoices submitted in a timely manner?* (?)</li> </ul>
Were Services delivered as specified in the contract?*  ● Yes ○ No  Did Contractor perform duties in a manner consistent with standards of the profession?*  ● Yes ○ No  Did Contractor adhere to the contracted schedule?*(?)  ● Yes ○ No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  ● Yes ○ No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)  ● Yes ○ No
Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)
Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)  Yes No  Did Contractor render services consistent with Agency policy and procedures?*(?)

Renewal Information for Ne Budget Units and Amounts Budget Unit Number* 3585	Charged to ea		
Budget Unit Number* 3585		ach Budget Hr	
3585		acii buuget oi	nit
D 1 124 *	Amount Charged \$ 11,955.00	to Unit*	Expense/GL Code No.* 543005
Budget Manager* Adams-Austin, Mamie		Secondary Budge Downey, Michael	t Manager*
Budget Unit Number* 3585	Amount Charged \$ 13,955.00	to Unit*	Expense/GL Code No.* 543009
Budget Manager* Adams-Austin, Mamie		Secondary Budge Downey, Michael	t Manager*
Fiscal Year* (?) 2023		Amount* (?) \$ 25,910.00	
Contract Content Changes  Are there any required changes to t		ge <b>?*</b> (?)	
	no continuot languag	,	
● Yes ○ No			
Yes ○ No     Please Explain*			
<ul> <li>Yes O No</li> <li>Please Explain*</li> <li>\$10.00 per hour for Respite and CFC.</li> </ul>	ge?*		
<ul> <li>Yes O No</li> <li>Please Explain*</li> <li>\$10.00 per hour for Respite and CFC.</li> <li>Will the scope of the Services changes</li> <li>Yes O No</li> </ul>		ı.	
<ul> <li>Yes O No</li> <li>Please Explain *</li> <li>\$10.00 per hour for Respite and CFC.</li> <li>Will the scope of the Services change</li> </ul>		,	
<ul> <li>Yes O No</li> <li>Please Explain*</li> <li>\$10.00 per hour for Respite and CFC.</li> <li>Will the scope of the Services change.</li> <li>Yes No</li> <li>Is the payment deadline different the</li> </ul>	an net (45)?*		
<ul> <li>Yes O No</li> <li>Please Explain*</li> <li>\$10.00 per hour for Respite and CFC.</li> <li>Will the scope of the Services changed Yes No</li> <li>Is the payment deadline different the Yes No</li> <li>Are there any changes in the Performance</li> </ul>	an net (45)?* mance Targets?*	r notes or supporti	ing documentation?*

Contract Owner* (?)	
Please Select Contract Owner	
Mike Downey	
Budget Manager Approval(s)	0
Approved by	
Mamie Adams-Austin	
Contract Owner Approval	<u> </u>
Approved by	
Michael D Downey	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
<ul> <li>Return for correction</li> </ul>	
Approved by *	
	Approval Date*
Shaskyia Behn	5/26/2022

HARRIS CENTER

#### **Annual Renewal Evaluation**

Current Fiscal Year Contract Information	<u> </u>
Current Fiscal Year	
2022	
Contract ID#*	
6929	
Contractor Name *	
Maria Cervantes	
Maria Cervantes	
Service Provided * (?)	
The provider will be providing Consumers with CFC PAS/	HAB Services and Respite
Renewal Term Start Date *	Renewal Term End Date*
	8/31/2023
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
N/A	
Agenda Item Submitted For: (?)	
☑ Information Only (Total NTE Amount is Less than \$100	000 00)
Board Approval (Total NTE Amount is \$100,000.00+)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	Competitive Proposal
Request for Proposal	Sole Source
<ul> <li>Request for Application</li> </ul>	Request for Qualification
Request for Quote	Tag-On
Interlocal	✓ Consumer Driven
○ Not Applicable (If there are no funds required)	Other
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
Vendor/Contractor a Historically Underutilized Busine	ess (HUB) (?)
○ Yes	
⊙ No	
<ul><li>Unknown</li></ul>	

Contract NTE (Old Text Field For Reference) (?) 18,900.00
Contract NTE* (?) \$ 24,460.00
Rate(s)/Rate(s) Description \$10.00 per hour for individuals with LON 1 & 5 \$10.00 per hour for individuals with LON 8 & 6
Unit(s) Served* 3585
G/L Code(s)* 543009 and 543005
Current Fiscal Year Purchase Order Number* CT141521
Contract Requestor* Patrina Anthony
Contract Owner* Lily Pan
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes ● No
Were Services delivered as specified in the contract?*  ■ Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  © Yes   No
Did Contractor adhere to the contracted schedule?* (?)  ● Yes ○ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes • No
Maintained legally required standards for certification, licensure, and/or training?* (?)  ■ Yes □ No
0 100 0 110

Budget Units and Amo	ounts Charged to each Budge	t Unit
Budget Unit Number* 3585	Amount Charged to Unit* \$ 10,230.00	Expense/GL Code No.* 543005
Budget Manager* Adams-Austin, Mamie	Secondary Bu Downey, Micha	rdget <b>Manager*</b> nel
Budget Unit Number*	Amount Charged to Unit* \$ 14,230.00	Expense/GL Code No.* 543009
Budget Manager* Adams-Austin, Mamie	Secondary Bu Downey, Micha	ndget Manager* nel
Fiscal Year* (?)	Amount* (?)	
Contract Funding Source* State	\$ 24,460.00  d Amount for Master Pooled Contracts	
Next Fiscal Year Not to Excee  Contract Funding Source*  State  Contract Content Chai	d Amount for Master Pooled Contracts	
Next Fiscal Year Not to Excee  Contract Funding Source*  State  Contract Content Char  Are there any required change  Yes No	d Amount for Master Pooled Contracts	
Next Fiscal Year Not to Excee  Contract Funding Source*  State  Contract Content Char  Are there any required change  Yes No  Please Explain*	d Amount for Master Pooled Contracts  nges es to the contract language?* (?)	
Next Fiscal Year Not to Excee  Contract Funding Source*  State  Contract Content Char  Are there any required change  Yes No  Please Explain*  Pay rate increased: \$10.00 per 10.00 per 10	d Amount for Master Pooled Contracts  nges es to the contract language?*(?)	
Next Fiscal Year Not to Excee  Contract Funding Source*  State  Contract Content Char  Are there any required change  Yes No  Please Explain*  Pay rate increased: \$10.00 per limited the Services  Yes No  Is the payment deadline differ	d Amount for Master Pooled Contracts  nges es to the contract language?*(?)  hour for CFC and Respite  change?*	
Next Fiscal Year Not to Excee  Contract Funding Source*  State  Contract Content Chai  Are there any required change  Yes No  Please Explain*  Pay rate increased: \$10.00 per limited the scope of the Services  Yes No  Is the payment deadline difference of the services of the services of the payment deadline difference of the services of the servic	d Amount for Master Pooled Contracts  nges es to the contract language?* (?)  hour for CFC and Respite  change?*  rent than net (45)?*	
Next Fiscal Year Not to Excee  Contract Funding Source* State  Contract Content Char  Are there any required change  Yes No  Please Explain*  Pay rate increased: \$10.00 per limited the scope of the Services  Yes No  Is the payment deadline difference any changes in the limited the scope of the Services  Yes No  No  Are there any changes in the limited the scope of the Services	d Amount for Master Pooled Contracts  nges es to the contract language?* (?)  hour for CFC and Respite  change?*  rent than net (45)?*	porting documentation?*

Contract Owner* (?)	
Please Select Contract Owner	
Mike Downey	
Budget Manager Approval(s)	
Approved by	
Mamie Adams-Austin	
Contract Owner Approval	<b>6</b>
Approved by	
Michael D Downey	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date *
Shaskyia Behn	5/31/2022

HARRIS CENTER for

#### **Annual Renewal Evaluation**

#### **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 6975 Contractor Name\* Petra Trejo Martinez Service Provided \* (?) The provider will provide mental health and IDD Respite and/ or Community First Choice Personal Assistance/Habilitation services (CFC PAS/BAB); Renewal Term Start Date\* Renewal Term End Date\* 9/1/2022 8/31/2023 Term for Off-Cycle Only (For Reference Only) N/A Agenda Item Submitted For: (?) ☑ Information Only (Total NTE Amount is Less than \$100,000.00) Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# Other Procurement Method(s)\* Check all that Apply Competitive Proposal Competitive Bid Sole Source Request for Proposal Request for Application Request for Qualification ☐ Tag-On Request for Quote Consumer Driven Interlocal Other Not Applicable (If there are no funds required) Contract Description / Type Personal/Professional Services Consultant Consumer Driven Contract New Contract/Agreement Amendment to Existing Contract Memorandum of Understanding Service/Maintenance Affiliation or Preceptor ■ BAA/DUA ☐ IT/Software License Agreement Pooled Contract Lease Other Renewal of Existing Contract Vendor/Contractor a Historically Underutilized Business (HUB) (?) Yes O No Unknown

Contract NTE (Old Text Field For Reference) (?) 2,655.00
Contract NTE* (?) \$ 5,950.00
Rate(s)/Rate(s) Description \$10.00 per hour for up to I 0 hours in a 24-hour period (Out of Home Respite)
Unit(s) Served* 3585
G/L Code(s)* 543005
Current Fiscal Year Purchase Order Number* CT141453
Contract Requestor* Patrina Anthony
Contract Owner* Lily Pan
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  O Yes  No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*    Yes  No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes • No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination

Is the contract being renewed for	next fiscal year wit	h this Contractor?	* (?)			
Yes    No      Popowel Information for	Novt Figgs Ve			0		
Renewal Information for	ivext Fiscal Yea	<b>3</b> 1		0		
Budget Units and Amour	its Charged to	each Budget	Unit			
Budget Unit Number*	Amount Charge	ed to Unit*	Expense/GL Code No.*			
3585  Budget Manager*	\$ 5,950.00	Secondary Bud	543005			
Adams-Austin, Mamie		Downey, Michae				
Fiscal Year* (?)		Amount* (?)				
2023		\$ 5,950.00				
Next Fiscal Year Not to Exceed A	mount for Master Pe	ooled Contracts				
Contract Funding Source* State						
Contract Content Change	es			0		
Are there any required changes t	o the contract langu	uage?* (?)				
● Yes ○ No						
5.5. 11 1 and 34 4 1 and 1 1 and 1 1 and 1 1 and	Please Explain* Rate change: \$10.00 per hour for Respite					
Will the scope of the Services ch	ange?*					
○ Yes ® No						
Is the payment deadline different  Yes  No	than net (45)?*					
Are there any changes in the Per	formance Targets?	*				
Yes No	romanoc rargoto.					
Are there any changes to the Submission deadlines for notes or supporting documentation?*  Yes  No						
File Upload (?)						
Contract Owner				0		
Contract Owner* (?)						
Please Select Contract Owner Mike Downey						
Budget Manager Approv	al(s)			0		

Approved by	
Mamie Adams-Austin	
Contract Owner Approval	
Approved by	
Michael D Donney	
Contracts Approval	
Approve*  Yes	
No, reject entire submission	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/31/2022

## EXHIBIT F-9

# June 2022 AMENDMENTS UNDER 100k

#### SNAPSHOT SUMMARY CONTRACT AMENDMENTS LESS THAN \$100,000.00

CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE DESCRIPTION	PREVIOUS AMOUNT	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
FY22 AMENDMENTS									
ADMINISTRATION									
Asset Systems	No	IT Software License Agreement	\$6,159.00	\$2,500.00	\$8,659.00	2/2/2022 - 2/28/2023	Private Pay Source		This Amendment is to increase NTE to fund new user training and the increased cost to complete migration of existing database.
Cardinal Health	No	Amendment to Existing Contract	\$72,000.00	\$24,000.00	\$96,000.00	4/1/2022 - 3/31/2023	General Revenue (GR)	Request for Quote	This Amendment is to increase the NTE to allow access to 4 ambulatory clinic pharmacy site's data in Epic Willow Ambulatory to answer after hours questions from patients as an on call pharmacist resource. On call pharmacist resource is a requirement from our Pharmacy Benefit Manager partners to our patients for the Pharmacy Billing Go-Live Project. We expect a very low number of calls for this purpose. Charging \$3.25 per patient phone call, same as per order over 730 line items.
PINGBOARD, INC.	No	Amendment to Existing Contract	\$19,034.38	\$1,500.00	\$20,534.38	9/1/2021 - 8/31/2022	General Revenue (GR)	Tag-On	This Amendment is to increase the NTE to pa invoices as a result of an increase in employees.
CPEP/CRISIS SERVICES									
FORENSICS									
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES									
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI									
INTERLOCALS									
LEASES									
MENTAL HEALTH SERVICES									
TEJAS Behavorial Health Management Association	No	Amendment to Existing Contract	\$7,200.00	\$3,600.00	\$10,800.00	9/1/2021 - 8/31/2022	State	Sole Source	This Amendment is to increase NTE for increase in utilization of service.
Kristin N. Smith, MD	No	Telemedicine Behavioral Health Services	\$25,000.00	\$47,520.00	\$72,520.00	05/02/22- 08/31/22	GR	1099	This Amendment is to increase funds to continue providing telemedicine behavioral health services for child and adolescents at Location and Southeast CAS clinics.

#### SNAPSHOT SUMMARY CONTRACT AMENDMENTS LESS THAN \$100,000.00

June 2022 FISCAL YEAR 2022

CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE DESCRIPTION	PREVIOUS AMOUNT	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
			-					-	

HARRIES Executive Contract Sum	mary
Contract Section	<b>○</b>
Contractor*	
Asset Systems	
Contract ID #*	
2022-0297	
Presented To*	
Resource Committee	
Full Board	
Date Presented *	
6/21/2022	
Parties* (?)	
Asset Systems, Inc.	
Agenda Item Submitted For: * (?)	
✓ Information Only (Total NTE Amount is Less than \$10	0,000.00)
<ul><li>☐ Board Approval (Total NTE Amount is \$100,000.00+)</li><li>☐ Grant Proposal</li></ul>	
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 Quote	Request for Qualification Tag-On
Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	✓ Other On-going business
Funding Information *	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
2/2/2022	2/28/2023
If contract is off-cycle, specify the contract term (?)	
2/1/2022 - 2/28/2023	
Current Contract Amount*	
\$ 6,159.00	
Increase Not to Exceed*	
\$ 2,500.00	
Revised Total Not to Exceed (NTE)*	
\$ 8,659.00	

Fiscal Year* (?)	Amount* (?)
2022	\$ 8,659.00
Funding Source*	
Private Pay Source	
Contract Description / Type* (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> </ul>
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	vices Being Provided* (?)
Upgrade existing software platform to cloud-based soluti Amendment is to fund new user training and the increase existing database	on with mobile direct application.
Contract Owner*	
Sean Kim	
	_
Previous History of Contracting with Vendor/Contraction	tor*
Yes       No       Unknown	
Please add previous contract dates and what service	s were provided*
We have existing vendor client relationship for AssetWIN	l.
Vendor/Contractor a Historically Underutilized Busin	ess (HUB)* (?)
○ Yes ○ No ◎ Unknown	
Community Partnership* (?)	
○ Yes ○ No ◉ Unknown	
Supporting Documentation Upload (?)	
AssetSystems Invoice - 22686.pdf	224.78KB
Assetoystems invoice - 22000.pui	224.7010
Vendor/Contractor Contact Person	<u> </u>
Name*	
Alden Snyder	
Address*	
Street Address	
24W500 Maple Avenue	
Address Line 2	
#216	Chate / Devisions / Devision
City	State / Province / Region
Naperville	IL
Postal / Zip Code	Country
60540	US

Phone Number\* 630-428-8594 Email\* asnyder@assetsystems.com **Budget Section** Budget Units and Amounts Charged to each Budget Unit Expense/GL Code No.\* **Budget Unit Number\*** Amount Charged to Unit\* 1122 \$ 2,500.00 551002 **Budget Manager** Secondary Budget Manager Campbell, Ricardo Brown, Erica Provide Rate and Rate Descriptions if applicable \* (?) Project WBS (Work Breakdown Structure)\* (?) N/A Requester Name Submission Date Paick, Daniel 5/17/2022 Budget Manager Approval(s) Approved by Approval Date Ricardo Campbell 5/17/2022 **Contract Owner Approval** Approved by Approval Date Sean Kim 5/17/2022 **Contracts Approval** Approve\* Yes No, reject entire submission Return for correction Approved by \* Approval Date\* Shaskyia Behn 5/20/2022

00	The		
36	HAR	RI	S
ap	CEN	110	Ric
Mental	Health	anc	HD

Mental Health and IDD	illal y
Contract Section	
Contractor* Cardinal Health Contract ID #*	
7828	
Presented To*  Resource Committee  Full Board	
Date Presented * 6/21/2022	
Parties* (?) Cardinal Health and The Harris Center for Mental Health	and IDD
Agenda Item Submitted For: * (?)  Information Only (Total NTE Amount is Less than \$100  Board Approval (Total NTE Amount is \$100,000.00+)  Grant Proposal  Revenue  SOW-Change Order-Amendment#  Other	0,000.00)
Procurement Method(s)*	
Check all that Apply	Commetitive Present
<ul><li>☐ Competitive Bid</li><li>☐ Request for Proposal</li></ul>	Competitive Proposal Sole Source
Request for Application	Request for Qualification
Request for Quote	Tag-On
<ul> <li>Interlocal</li> <li>Not Applicable (If there are no funds required)</li> </ul>	Consumer Driven Other
Funding Information*	
New Contract  Amendment	
Contract Term Start Date * (?)	Contract Term End Date * (?)
4/1/2022	3/31/2023
If contract is off-cycle, specify the contract term (?)	
Current Contract Amount* \$ 72,000.00	
Increase Not to Exceed* \$ 24,000.00	
Revised Total Not to Exceed (NTE)* \$ 96,000.00	

Fiscal Year* (?)	Amount* (?)	
2022	\$ 96,000.00	
Funding Source*		
General Revenue (GR)		
General Revenue (GR)		
Contract Description / Type * (?)		
Personal/Professional Services	Consultant	
Consumer Driven Contract	New Contract/Agreement	
<ul> <li>Memorandum of Understanding</li> </ul>	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 Songer Boing Provided* (2)	
And to allow for access to 4 ambulatory clinic pharmacy site data in Epic Willow ambulatory to answer after hours questions from patients as an on call pharmacist resource. On call		
pharmacist resource is a requirement from our F		
patients for the Pharmacy Billing Go-Live Project		
this purpose. Charging \$3.25 per patient phone		
Contract Owner*		
Angela Babin		
Previous History of Contracting with Vendor/	Contractor*	
Yes  No  Unknown		
Tes O NO O DIKHOWII		
Please add previous contract dates and what	t services were provided*	
Pharmacy after hours order verification and reso	purce to	
CPEP services inpatient areas.		
Vendor/Contractor a Historically Underutilize	ed Business (HUB)* (?)	
○ Yes ○ No ◉ Unknown		
Community Partnership* (?)		
Yes No Unknown		
Supporting Documentation Upload (?)		
Vendor/Contractor Contact Perso	n 🔿	
Name*		
Conroy Whitely		
Address*		
Street Address		
13651 Dublin Court		
Address Line 2		
City	State / Province / Region	
Stafford	TX	
Postal / Zip Code	Country	
77477-4317	United States	

Phone Number* 18478871258					
Email*					
Conroy.Whitely@cardinalhealth.com					
Budget Section	Province of the section of the secti				
Budget Units and Amounts Charged to each Budget Unit					
Budget Unit Number* 1135	Amount Charged to Unit* \$ 24,000.00	Expense/GL Code No.* 553002			
Budget Manager Campbell, Ricardo	Secondary Bu Brown, Erica	dget Manager			
Provide Rate and Rate Descriptions if applicable * (?)  Charging \$3.25 per patient phone call, same as per order over 730 line items.					
Project WBS (Work Breakdown Strun/a	cture)* (?)				
Requester Name	Submission D	ate			
Gleason, Teri	5/19/2022				
Budget Manager Approval(s)					
Approved by	Annual Date				
Ricardo Campbell	<b>Approval Date</b> 5/19/2022	•			
Procurement Approval		Ö			
File Upload (?)					
Approved by	Approval Date	•			
Sign Contract Owner Approval					
Approved by	Approved Date				
Angela Babin	Approval Date 5/19/2022				
Contracts Approval					
Approve*					
Yes					
No, reject entire submission     Return for correction					

Approved by \*

Shaskyia Behn

Approval Date\*
5/19/2022

# HARRIS Executive Contract Su

Mental Health and IDD	miary
Contract Section	<u> </u>
Contractor*	
PINGBOARD, INC.	
Contract ID #*	
7323	
Presented To*	
<ul><li>Resource Committee</li><li>Full Board</li></ul>	
Date Presented*	
6/21/2022	
Parties* (?)	
THE HARRIS CENTER, PINGBOARD, INC.	
Agenda Item Submitted For: * (?) Information Only (Total NTE Amount is Less than \$1	00 000 00)
Board Approval (Total NTE Amount is \$100,000.00+	
Grant Proposal	
<ul><li>Revenue</li><li>SOW-Change Order-Amendment#</li></ul>	
✓ Other CONTRACT AMENDMENT	
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  Amendment	
Contract Term Start Date * (?) 9/1/2021	Contract Term End Date * (?) 8/31/2022
If contract is off-cycle, specify the contract term (?)	0/31/2022
in contract is on-cycle, specify the contract term (1)	
Current Contract Amount*	
\$ 19,034.28	
Increase Not to Exceed*	
\$ 1,500.00	
Revised Total Not to Exceed (NTE)*	
\$ 20,534.28	

Fiscal Year* (?)	Amount* (?)
2022	\$ 20,534.28
2022	\$ 20,004.20
*	
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	on of Services Being Provided* (?)
ACCOUNT BALANCE \$71.34. NEED TO PAY	
EMPLOYEES	A 200.07 INVOICE DUE TO INCINEAGE IN
Contract Owner*	
Kip Baughman	
Previous History of Contracting with Vendo	or/Contractor*
○ Yes ○ No ⑨ Unknown	
Vendor/Contractor a Historically Underutiliz	zad Business (HUB)* (?)
	ted business (110b)
○ Yes ○ No ◎ Unknown	
Community Partnership* (?)	
○ Yes ○ No ⑨ Unknown	
Supporting Documentation Upload (?)	
Vendor/Contractor Contact Pers	0.0
veridon/Contractor Contract Fers	
Name*	
PINGBOARD, INC.	
Address*	
Street Address	
608 WEST MONROE ST	
Address Line 2	
SUITE A	
City	State / Province / Region
AUSTIN	TX
Postal / Zip Code	Country
78704	US
Phone Number*	
8777335157	
Email*	
BILLING@PINGBOARD.COM	

# **Budget Section** Budget Units and Amounts Charged to each Budget Unit Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 553002 1108 \$ 1,500.00 **Budget Manager** Secondary Budget Manager Brown, Erica Campbell, Ricardo Provide Rate and Rate Descriptions if applicable \* (?) Project WBS (Work Breakdown Structure)\* (?) **Submission Date** Requester Name Gerner, Valinda 5/16/2022 Budget Manager Approval(s) Approved by Approval Date Frica Brown 5/17/2022 Procurement Approval File Upload (?) Approved by Approval Date Sign Contract Owner Approval Approved by Approval Date Kip Baughwan 5/17/2022 Contracts Approval Approve\* Yes No, reject entire submission Return for correction Approved by \* Approval Date\* Shaskyia Behn 5/17/2022

# **36** HARRIS GENTER GEN

Mental Health and IDD	
Contract Section	
Contractor*	
TEJAS Behavioral Health Management Association	
Contract ID #*	
7739	
Presented To*	
Resource Committee	
○ Full Board	
Date Presented*	
6/21/2022	
Parties* (?)	
TEJAS Behavioral Health Management Association and	The Harris Center
Agenda Item Submitted For: * (?)	
Information Only (Total NTE Amount is Less than \$10	00,000,000
Board Approval (Total NTE Amount is \$100,000.00+)	
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#  Other	
Ottlei	
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)	<ul><li>□ Consumer Driven</li><li>□ Other</li></ul>
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*	
\$ 7,200.00	
Increase Not to Exceed*	
\$ 3,600.00	
Revised Total Not to Exceed (NTE)*	
\$ 10,800.00	

Fiscal Year* (?) 2022	Amount* (?) \$ 10,800.00						
	0.10,000.00						
Funding Source* State							
Contract Description / Type * (?)							
Personal/Professional Services	☐ Consultant						
Consumer Driven Contract	New Contract/Agreement						
Memorandum of Understanding	Amendment to Existing Contract Service/Maintenance						
☐ Affiliation or Preceptor ☐ BAA/DUA	<ul> <li>☐ IT/Software License Agreement</li> </ul>						
Pooled Contract	Lease						
Renewal of Existing Contract	Other						
Justification/Purpose of Contract/Description of Services Being Provided* (?) Utilization of service increased							
Contract Owner*  Lance Britt							
Previous History of Contracting with Vendor/Contract  ● Yes ○ No ○ Unknown	ttor*						
Please add previous contract dates and what service current; 09-01-20 to 08-31-21	es were provided*						
Vendor/Contractor a Historically Underutilized Busin	ess (HUB)* (?)						
○ Yes ○ No ● Unknown							
Community Partnership* (?)							
○ Yes   No ○ Unknown							
Supporting Documentation Upload (?)							
Vendor/Contractor Contact Person							
Name*							
Paige Morris							
Address*							
Street Address							
893 North Interstate Highway 35 Address Line 2							
City	State / Province / Region						
Round Rock	TX						
Postal / Zip Code	Country						
78664-4310	US						
Phone Number*							
512.279.9371							

Email*			
paige.morris@tejashma.org			
Budget Section			0
Budget Units and Amount	ts Charged to e	each Budget Un	iit
Budget Unit Number* 2200	Amount Charge \$ 3,600.00	d to Unit <sup>*</sup>	Expense/GL Code No.* 553003
Budget Manager Shelby, Debbie		Secondary Budget Loera, Angelica	Manager
Provide Rate and Rate Description	ns if applicable*(?)		
Project WBS (Work Breakdown Str 0.00	ructure)* (?)		
Requester Name Shelby, Debbie		Submission Date 5/12/2022	
Budget Manager Approva	ıl(s)		0
Approved by			
00		Approval Date	
Debbie Chambers Shelby		5/12/2022	
Procurement Approval			<u> </u>
File Upload (?)			
Approved by		Approval Date	
Sign			
Contract Owner Approval	kan kanaa see Sii ka ana suusu	anatan da kanata basar da	6
Approved by			
Lauce Britt		Approval Date 5/12/2022	
Quino i rici		3/12/2022	
Contracts Approval			
Approve*			
<ul><li>Yes</li><li>No, reject entire submission</li></ul>			
Return for correction			

Approved by \*

Shaskyia Behn

Approval Date\*
5/13/2022

# **Executive Contract Summary Contract Section** Contractor\* Kristin N. Smith, MD Contract ID #\* 2022-0342 Presented To\* Resource Committee Full Board Date Presented\* 6/21/2022 Parties\* (?) Kristin N. Smith, MD and The Harris Center for Mental Health and IDD Services Agenda Item Submitted For: \* (?) ☑ Information Only (Total NTE Amount is Less than \$100,000.00) Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# Procurement Method(s)\* Competitive Bid Competitive Proposal Request for Proposal Sole Source Request for Qualification Request for Application Request for Quote ☐ Tag-On Interlocal Consumer Driven Not Applicable (If there are no funds required) ✓ Other 1099 Funding Information\* New Contract Amendment Contract Term End Date \* (?) Contract Term Start Date \* (?) 5/2/2022 8/31/2022 If contract is off-cycle, specify the contract term (?) 2022 **Current Contract Amount\*** \$ 25,000.00

Increase Not to Exceed\*

\$ 47,520.00

Revised Total Not to Exceed (NTE)\*

\$ 72,520.00

Fiscal Year* (?)	Amount* (?)
2022	\$ 72,520.00
Funding Source*	
General Revenue (GR)	
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 1099
Justification/Purpose of Contract/Description of Ser	vices Being Provided * (?)
Telemedicine Behavioral Health Services for Child and	
Southeast CAS clinics	dalassana at so location and
Contract Owner*	
Tiffanie Williams-Brooks	
Previous History of Contracting with Vendor/Contra	ctor*
Yes ○ No ○ Unknown	
Please add previous contract dates and what service	es were provided*
3/1/22-4/29/22; FY22 Contract ID 2022-0342	
Vendor/Contractor a Historically Underutilized Busin	ness (HUB)*(?)
Community Partnership* (?)	
○ Yes   No ○ Unknown	
Supporting Documentation Upload (?)	
Vendor/Contractor Contact Person	6
Name*	
Kristin N. Smith, MD	
Address*	
6113 Greyswalls Drive	
20.00	
Mckinney	TX
75070-7268	US
Phone Number*	
3122825292	

Email\* ksmithmd@yahoo.com **Budget Section** Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit\* Expense/GL Code No.\* **Budget Unit Number\*** 2200 \$ 47,520.00 540503 **Budget Manager** Secondary Budget Manager Loera, Angelica Shelby, Debbie Provide Rate and Rate Descriptions if applicable \* (?) 12 hours/wk @ \$220/hr for 18 weeks Project WBS (Work Breakdown Structure)\* (?) Requester Name Submission Date Williams-Brooks, Tiffanie 4/29/2022 Budget Manager Approval(s) Approved by Approval Date Debbie Chambers Shelby 5/6/2022 Contract Owner Approval Approved by **Approval Date** Viffanie Williams-Brooks 5/6/2022 Contracts Approval Approve\* Yes No, reject entire submission Return for correction Approved by \* Approval Date\* Shaskyia Behn 5/6/2022

# EXHIBIT F-10

# June 2022 RENEWALS UNDER 100k

	CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE DESCRIPTION	FY2022 NTE AMOUNT	FY2023 NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
		HODAWADE	DESCRIPTION .	NILAMOUNI	NILAMOUNI	CONTRACT FERIOD	TONDING	BID/TAG-ON	COMMENTS
-	FY23 CONTRACT RENEWALS								
-	ADMINISTRATION								
1	Community Health Choice, Inc.	No	Telephonic Crisis Line Services to provide MH and IDD resources and support.	\$0.00	\$28,800.00	8/9/2022 - 8/8/2023	Private Pay Source	N/A	Annual renewal of Telephonic Crisis Line Services Agreement that provides MH and IDD resources and support.
2	The Burke Center	No	Crisis Intervention Helpline Services to Callers	\$66,000.00	\$66,000.00	9/1/2022 - 8/31/2023	County	N/A	Annual renewal of Crisis Intervention Helpline Services Agreement.
			Providing crisis intervention helpline services to consumer callers and community to the						Annual renewal of Crisis Intervention Helpline Services Agreement for
3	Gulf Bend Center	No	Agency	\$66,000.00	\$66,000.00	9/1/2022 - 8/31/2023	County	N/A	consumer and community callers.
4	Dixie Safe and Lock, Inc. d/b/a Dixie Security Solutions	No	General Locksmith Services for Agency's MEDCO Key System	\$20,000.00	\$20,000.00	9/1/2022-8/31/2023	General Revenue (GR)	Request for Quote	Annual renewal of General Locksmith Services Agreement for Agency's MEDCO Key System.
5	Garratt-Callahan Company	No	Emergency Repair, Water Treatment and routine services at 9401 Southwest Freeway, Houston, Texas 77074 location.	\$15,000.00	\$17,500.00	9/1/2022-8/31/2023	General Revenue (GR)	Request for Quote	Annual renewal of Emergency Repair, Water Treatment and routine Services Agreement at the 9401 Southwest Freeway, Houston, Texas 77074 location.
6	GenSolutions, LLC	No	Generator Maintenance, Inspection, and Support Services	\$26,521.13	\$27,000.00	9/1/2022-8/31/2023	General Revenue (GR)	Request for Quote	Annual renewal of Generator Maintenance, Inspection, and Support Services Agreement.
							(0)	audio	Co. Hose Figreement
7	Legal Files Software, Inc.	No	Software for Legal and Contracts Case Management.	\$7,765.00	\$8,154.00	9/1/2022-8/31/2023	General Revenue (GR)	Request for Quote	Annual renewal of Legal and Contracts Case Management Software.
8	Snappy App, Inc.	No	Gifts for employees of the Agency for Spot Rewards.	\$42,000,00	\$42,000.00	1/28/2019-8/31/2022	General Revenue (GR)	Competitive Proposal	Annual renewal of Employee Spot Rewards Agreement.
9	Sun Coast Resources, Inc.	No	Maintenance for generators at 3737 Dacoma Rd (1), 5901 Long Drive (1), and 9401 Southwest Freeway (2)	\$20,000.00	\$20,000.00	9/1/2022-8/31/2023	General Revenue (GR)	Request for Quote	Annual renewal of generator maintenance Agreement for the 3737 Dacoma Rd (1), 5901 Long Drive (1), and 9401 Southwest Freeway (2) locations.
			Annual Roof Anchor				General Revenue	Request for	Annual renewal of roof anchor
10	Applied Technical Services, Inc.  CU Solutions Group, Inc. dba HR Peformance Solutions	No No	Inspections HR Performance Management software to support documentation for employee performance.	\$3,300.00 \$19,100.00	\$750.00 \$20,000.00	9/1/2022 - 8/31/2023 1/25/2011 - 8/31/2022	(GR) General Revenue (GR)	Proposal  Request for Quotes	inspection Agreement. Annual renewal of HR Performance Management Software Agreement to support documentation for employee performance.
12	Daniel Snare	No	Assessment of the Agency's Board Operations and Training Services	\$15,000.00	\$15.000.00	01/10/22- 01/10/23	General Revenue (GR)	Request for Quotes	Renewal of agreement to perform assessment of Agency's Board Operations and Trainings.
13	Feedtrail Inc.	No	Consumer Satisfaction Survey Software	\$22,387.00	\$22,387.00	6/1/2022 - 5/31/2023	General Revenue (GR)	Request for Quote	Annual renewal of Consumer Satisfaction Survey Software Agreement.
14	Humble Elevator Services	No	Elevator Inspection, Maintenance and Support Services for the Northeast, Bristow and Jail Diversion locations.	\$20,000.00	\$20,000.00	9/1/2022 - 8/31/2023	General Revenue (GR)	Request for Quote	Annual renewal of elevator inspection, maintenance and support services Agreement for the Northeast, Bristow and Jail Diversion sites.
15	Leafhouse Financial Advisors Inc.	No	Non-Erisa Investment Fiduciary Services for 457(b), 401(a) and 403(b) plans.	\$46,000.00	\$46,000.00	9/16/2022 - 9/15/2023	State	Outside RFP process.	Annual renewal of Non-Erisa Investment Fiduciary Services Agreement for 457(b), 401(a) and 403(b) plans.

		1.7.1.1.27			[	[17] T. 18 (18) 12 (18) 18 (18)	1 0 1 0 3 S. S. S. E		
1 1			PRODUCT/SERVICE	FY2022	FY2023				
	CONTRACTORS	HUB/MWBE	DESCRIPTION	NTE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
			Elevator Maintenance and						
1			Services for the 9401						Annual renewal of elevator services
			Southwest Freeway, Houston,				General Revenue	Request for	Agreement for the 9401 Southwest
16	Otis Elevator Company	No	TX property.	\$66,000.00	\$66,000.00	11/1/2022 - 10/31/2023	(GR)	Quotes	Freeway property.
l I			Design the second section of the second			l		•	A
1			Project Management Software to Track Agency Project			1	General Revenue	Request for	Annual renewal of Project Management Software Agreement to track Agency
17	Performance Logic, Inc.	No	Performance.	\$12,218.00	\$11,726.00	11/1/2022 - 10/31/2023	(GR)	Quotes	Project Performance.
<del>  " </del>	Feriorniance Logic, inc.		r enormance.	\$12,210.00	<b>\$11,720.00</b>	11/112022 - 10/01/2020	COLY	Quotes	1 Toject Fertomiance.
			Computerized Maintenance			1			Annual renewal of Computerized
			Asset Collection/ Preventative			ì			Maintenance Asset Collection/
			Maintenance Scheduling						Preventative Maintenance Scheduling
			Services for Facilities Services			1	General Revenue	Request for	Services Agreement for the Facilities
18	UpKeep Technologies, Inc.	No	Department	\$14,400.00	\$14,400.00	9/1/2022 - 8/31/2023	(GR)	Quote	Services Department.
						1			Annual renewal of Learning
			Learning Management System			1		<b>.</b>	Management System Agreement for
ا ا	Vector Solution/Convergence		for Facility Maintenance	640 704 00	60 000 00	40/00/0000 40/00/0004	General Revenue	Request for	Facility Maintenance Scheduling
19	Training, LLC	No	Scheduling Services Agency Moving and Relocation	\$10,784.00	\$3,888.00	12/30/2020 - 12/30/2024	(GR) General Revenue	Quote	Services. Renewal of Moving Services
20	A-Rocket Moving & Storage, Inc.	Yes	Services	\$70,000.00	\$70,000.00	9/1/2022 - 8/31/2023	(GR)	Tag-On	Agreement,
-20	A-Nocket Woving & Storage, Inc.	103	CCIVICOS	<b>\$10,000.00</b>	0.0,000.00	OF TIZOZZ - OF TIZOZO		Tag-On	Annual renewal of EnergyCap
1 1			EnergyCap Management			l	General Revenue	Request for	Management Software Agreement for all
21	SHI Government Solutions	Yes	Software for all utilities.	\$4,801.00	\$5,500.00	9/1/2022 - 8/31/2023	(GR)	Quote, Tag-On	utilities.
$\vdash$									
	CPEP/CRISIS SERVICES								<u> </u>
1			Security X-Ray Screening					D	Annual renewal of security x-ray
22	Autoclear, LLC	No	Equipment Order and Maintenance Service.	\$0.00	\$4,900.00	8/18/2022 - 8/18/2023	General Revenue (GR)	Request for Quotes	screening equipment order and maintenance services Agreement,
1	Autoclear, LLC	INU	Walitterlance Service.	\$0.00	34,300.00	8/16/2022 - 8/16/2023	(GIX)	Quotes	maintenance services Agreement.
						1			Annual Renewal of Opioid Prevention
1 1			HOUSTON RECOVERY						and Narcan Administration Training
			CENTER WILL PROVIDE				•		Agreement for Agency's SUDOP, CCSI,
			OPIOID PREVENTION AND						CCA and BHRT Program Staff.
1			NARCAN ADMINISTRATION						Additionally amending the agreement to
1			TRAINING FOR AGENCY'S						add a Substance Use Recovery
	HOUSTON RECOVERY	A1-	SUDOP, CCSI, CCA AND	60,000,00	\$2,000.00	09/01/22- 08/31/23	Beliante Const	NIA	Services Detoxification Program (Detox)
23	CENTER, LGC	No	BHRT PROGRAM STAFF.	\$2,000.00	\$2,000.00	09/01/22-00/31/23	Private Grant	N/A	at the Navigation Center.
							General Revenue	Request for	Annual renewal of mobile x-ray Services
24	X-Ray Mobile Texas, Inc.	No	Mobile X-Ray Services.	\$9,999,99	\$8,499,99	9/1/2022 - 8/31/2023	(GR)	Quote	Agreemen for CPEP/NPC.
	FORENSICS						** /		
Ш			<u> </u>			<u> </u>			
1 1	INTELLECTUAL				· ·		1		
	DEVELOPMENTAL				l •.	İ			1
Н	DISABILITY SERVICES-ECI		Speech/Language Therapy			<del>                                     </del>	<del> </del>		
1			Services						Annual renewal of Speech/Language
			Occupational/Physical Therapy		1				Therapy, Occupational/Physical Therapy
25	P-Therapy Services	No	Services	\$25,000.00	\$0.00	9/1/2022 - 8/31/2023	State	N/A	Services Agreements.
			Early Head Start and Head				_		Annual renewal of Early Head Start and
26	BakerRipley	No	Start Program	\$0.00	\$0.00	9/1/2022 - 8/31/2023	State	N/A	Head Start Program Agreements.

		Note that a state	Participagnia, Inglis a Ligadi						Enter the second section of the second
	어른 가게 하다 맛이 이 선생님이		PRODUCT/SERVICE	FY2022	FY2023				
ŀ	CONTRACTORS	HUB/MWBE	DESCRIPTION	NTE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	Gulf Coast Community Services								Annual renewal of ECI Head Start
27	Association	No	ECI Head Start Services	\$0.00	\$0.00	9/1/2022 - 8/31/2023	State	N/A	Services Agreement.
			The provider will provide mental health and IDD Respite and/ or Community First Choice Personal Assistance/Habilitation						Annual renewal of Mental Health and IDD Respite and/ or Community First Choice Personal Asistance/Habifitation
28	Tracy Smith	No	services (CFC PAS/HAD)	\$22,100.00	\$19,000.00	9/1/2022 - 8/31/2023	State	N/A	services (CFC PAS/HAD) Agreement,
29	Nixon Home Care, Inc. d/b/a Nixon Adult Day Center	No	Site-Based Day Habilitation and Respite	\$2,765,000.00	\$82,000.00	9/1/2022-8/31/2023	State	Request for Application	Annual renewal of agreement for Site- Based Day Habilitation and Respite Services.
1	P-Emergency Evacuation		Emergency Evacuation				General Revenue	Request for	Annual renewal of the master pool agreement for Emergency Evacuation
30	Services	No	Lodging Services.	\$45,150,00	\$45,150.00	9/1/2022-8/31/2023	(GR)	Quote	Lodging Services,
-30	DETVICES	110	Loughing Colvinous.	640,100.00	0.10,100.00	57 17 E 0 E 0 7 G 17 E 0 E 0	(0.1)	2000	Annual renewal of agreement
31	Thomas H. Mann	No	Psychological Services	\$12,000.00	\$12,000.00	9/1/2022-8/31/2023	Federal	N/A	providing Psychological Services.
32	Annie Vu	No	Respite & Community First Choice (CFC)- Personal Assistance Services/Habilitation (PAS/HAB)	\$28,080.00	\$28,080.00	9/1/2022-8/31/2023	State	N/A	Annual renewal of agreement to continue providing Respite & Community First Choice (CFC)-Personal Assistance Services/Habilitation (PAS/HAB).
33	Bloom Community	No	To promote health, building self esteem and be part of a fitness community for individuals with IDD	\$0.00	\$0.00	9/1/2022-8/31/2023	State	N/A	Annual renewal of agreement to continue promoting health, building self esteem and be part of a fitness community for individuals with IDD.
34	Brandon D, Smith	No	CFC/Respite	\$17,540.00	\$10,000.00	9/1/2022-8/31/2023	State	N/A	Annual renewal of Respite & Community First Choice (CFC)- Personal Assistance Services/Habilitation (PAS/HAB) Agreement
35	Elsa Almanza	No	Respite & Community First Choice (CFC)- Personal Assistance Services/Habilitation (PAS/HAB)	\$22,690.00	\$18,000.00	9/1/2022-8/31/2023	State	N/A	Annual renewal of Respite & Community First Choice (CFC)- Personal Assistance Services/Habilitation Agreement (PAS/HAB).
36	Elsa Lozana - Tello	No	Respite & Community First Choice (CFC)- Personal Assistance Services/Habilitation (PAS/HAB)	\$17,230.00	\$17,230.00	9/1/2022-8/31/2023	State	N/A	Annual renewal of Respite & Community First Choice (CFC)- Personal Assistance Services/Habilitation Agreement (PAS/HAB).
			Community First Choice &	040 00F 00					Annual renewal of Respite & Community First Choice (CFC)- Personal Assistance Services/Habilitation
37	Haneef Abdullah	No No	Respite  Respite and Community First Choice (CFC)- Personal Assistance Services/Habilitation	\$10,635.00	\$10,500.00	9/1/2022-8/31/2023	State	N/A	Agreement (PAS/HAB). Annual renewal of Respite and Community First Choice (CFC)- Personal Assistance Services/Habilitation Agreement
38	Jordan Barden	No	(PAS/HAB)	\$18,440.00	\$12,000.00	9/1/2022-8/31/2023	State	N/A	(PAS/HAB)
<u> </u>									·
<del></del>	LEASES	<del> </del>	<del>                                     </del>			1 1 1 1	+		
39	Harris County Facilities Property	No	Lease for Property located at 5518 Jackson Street, Houston, Texas.	\$50.00	\$50.00	4/30/2018 - 4/30/2028	General Revenue	Interlocal	Annual renewal of lease agreement for the 5518 Jackson Street, Houston, Texas location.
	L management Department		, , , , , , , , , , , , , , , , , , , ,	, ,,,,,,,	, , , , , , , , , , , , , , , , , , , ,				L. Ormo Poddioli.

			PRODUCT/SERVICE	FY2022	FY2023		, Jan 19		
- 1	CONTRACTORS	HUB/MWBE	DESCRIPTION	NTE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
40	NAMI Greater Houston	No	Lease Agreement: The Harris Center provides space to NAMI in exchange for educational and support services to consumers and their families.	\$0.00	\$0.00	9/1/2022 - 8/31/2023	Private Pay Source	N/A	This contract allows Nami to provide Services to the Harris Center in exchange for the use and access to office Space on the 12th floor. The amount of space and exchange were derived from an evaluation of FMR for like or similar space.
41	The Network of Behavioral Health Providers	No	Lease of 450 square feet of office space located at 9401 Southwest Freeway, 12th Floor, Houston, Texas 77074.	\$0.00	\$0.00	9/1/2022 - 8/31/2023	General Revenue (GR)	N/A	This contract allows NTBH to provide Services to the Harris Center in exchange for the use and access to office Space on the 12th floor. The amount of space and exchange were derived from an evaluation of FMR for like or similar space.
42	The Bill Clair Family Mortuary, Inc.	No	Parking Space Lease Agreement. Spaces located at 2603 Southmore Street, Houston, Texas.	\$8,640.00	\$8,640.00	9/1/2022 - 8/31/2023	General Revenue (GR)	N/A	Annual renewal leased parking Agreement at 2603 Southmore Street, Houston, Texas.
43	The ARC of Greater Houston	No	tn-kind space in exchange for special education advocacy support services to individuals in the community in exchange for leased space (1300 sq ft.) on the 12th floor located at 9401 SW Freeway.	\$0.00	\$0.00	9/1/2022 - 9/1/2023	General Revenue (GR)	N/A	This contract allows the ARK to provide Services to the Harris Center in exchange for the use and access to office Space on the 12th floor. The amount of space and exchange were derived from an evaluation of FMR for like or similar space.
$\dashv$									
	MENTAL HEALTH SERVICES								
44	Coalition for the Homeless of Houston/Harris County, Inc.	No	Care Coordination-Information and referral to the Coordinated Access system which will provide homeless individuals with a direct link to housing services.	\$20,000.00	\$20,000.00	9/1/2022 - 8/31/2023	General Revenue (GR)	N/A	Annual renewal of Care Coordination Agreement to provide information and referral through the Coordinated Access system to assist homeless individuals with a direct link to housing services.
45	MyStrength, Inc.	No	Mental Heatth Web Based Mobile Application Software for a Consumer behavioral heatth and wellness program.	\$40,000.00	\$40,000.00	9/1/2022 - 8/31/2023	General Revenue (GR)		Annual renewal of the Mental Health Web Based Mobile Application Software Agreement for the Behavioral Health and Wellness Program.
46	Prosumers	No	Consultation and training services for the development and implementation of a Consumer Empowerment Group in Harris County.	\$18,000.00	\$18,000.00	9/1/2021 - 8/31/2022	General Revenue (GR)	N/A	Annual renewal of Consultation and Training Services Agreement for the Development and Implementation of a Consumer Empowerment Group in Harris County.
47	Tejas Behavioral Health Management Association	No	MCO Managed Care Generator - Automates and optimizes the Service Request Form required to send to Medicaid Managed Care Organizations.	\$7,200.00	\$7,200.00	9/1/2022 - 8/31/2023	General Revenue (GR)	Sole Source	Annual renewal of MCO Managed Care Generator Agreement that automates and optimizes the Service Request Form required to send to Medicaid Managed Care Organizations.

	CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE DESCRIPTION	FY2022 NTE AMOUNT	FY2023 NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
48	Treatment Advocacy Center	No	Provide training, technical, and collaborative assistance to The Agency staff for one year to establish and maintain a successful and sustainable AOT program.	\$5,000.00	\$5,000.00	08/01/22- 07/31/23	State Grant	N/A	Renewal of training, technical, and collaborative assistanceAgreement to provide Agency staff with the skills to establish and maintain a successful and sustainable AOT program. The Grant was for one year.
49	Baylor College of Medicine	No	Psychiatric Resident Educational Rotaton for Child/Adolescent Psychiatry	\$24,907.68	\$4,574.88	7/1/2022 - 6/30/2023	State	N/A	Annual Renewal of Psychiatric Resident Agreement for Child/Adolescent Psychiatry Residents.
50	Baytor College of Medicine	No	Forensic Psychiatry Residency Rotation Evaluation Services at the Harris County Jail.	\$63,794.16	\$60,998.40	7/1/2022 - 6/30/2023	State	N/A	Annual Renewal of Agreement for the Forensic Psychiatry Residency Rotation Evaluation Services at the Harris County Jail.
51							l		
52	UTHSC-Houston Department of Psychiatry and Behavioral Sciences	No	Forensic Residency Rotation at the Harris County Jail	\$50,323.68	\$64,556.64	7/1/2022 - 6/30/2023	State	N/A	Annual renewal of Forensic Residency Rotation Agreement at the Harris county Jail. Funding was increased for the upcoming year.
	Emergency Temporary Housing		Emergency Temporary Housing Pool	\$6,000.00	\$6,000.00				Annual renewal of Emergency Temporary Housing Services master pool for short term housing. [21 day
53 54	(ETH) Master Pool  P-Housing & Transition (CCAP)	No No	Master Pool: One(1) vendor will provide Transitional Housing Services for CCAP Consumers (formerly HDMD).	\$18,803.74	\$18,803.74	9/1/2022 - 8/31/2023 9/1/2022 - 8/31/2023	Private Grant  Private Grant	N/A Request for Application	Annual renewal of the Transitional Housing Services Master Pool for CCAP.
$\Box$	JD, CPEP2, CDP Summary								
55	Health Care for Special Populations DBA Patient Care Intervention Center	No	Unified Care Continuum Platform Community Data Exchange (CDX) Services	\$21,794.00	\$21,794.00	9/1/2022 - 8/31/2023	State Grant		Annual renewal of Unified Care Continuum Platform Community Data Exchange (CDX) Services Agreement.
56	P-Temporary Housing for Jail Diversion	No	Master Pool: Nine (9) possible vendors provide temporary housing services for jail diversion.	\$22,901.00	\$19,728.00	9/1/2022 - 8/31/2023	County	Request for	Annual renewal of the temporary housing services Master Pool for jail diversion Services.
57	Angelica Padilla dba Lice Care Solutions, LLC	No	Lice Removal Services	\$5,000.00	\$5,000.00	9/1/2022-8/31/2023	State Grant	Request for Quote	Annual renewal of Lice Removal Services Agreement.

HARRIS CENTER 10

# **Annual Renewal Evaluation**

Current Fiscal Year Contract Information	
Current Fiscal Year 2022	
Contract ID#* 7535	
Contractor Name* Community Health Choice, Inc.	
Service Provided* (?) Telephonic Crisis Line Services to provide MH and IDD re	sources and support.
Renewal Term Start Date* 8/9/2022	Renewal Term End Date* 8/8/2023
Term for Off-Cycle Only (For Reference Only) 8/9/2021 - 8/8/2022	
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100 Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# Other	,000.00)
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
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
Vendor/Contractor a Historically Underutilized Busines	ss (HUB) (?)
○ Yes	
<ul><li>No</li></ul>	
Unknown	

Contract NTE (Old Text Field For Reference) (?) N/A
Contract NTE* (?) \$ 0.00
Rate(s)/Rate(s) Description
Unit(s) Served* N/A
G/L Code(s)* N/A
Current Fiscal Year Purchase Order Number* N/A
Contract Requestor*  Janai Smith
Contract Owner*  Jennifer Battle
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ■ Yes □ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  ■ Yes □ No

Renewal Information for Next Fiscal Year		
Budget Units and Amounts	Charged to each Buc	lget Unit
Budget Unit Number* 7001	Amount Charged to Unit* \$ 28,800.00	Expense/GL Code No.* 420015
Budget Manager* Ilejay, Kevin	Secondar Campbell,	y Budget Manager* Ricardo
Fiscal Year* (?) 2023	Amount* \$ 28,800.0	
Next Fiscal Year Not to Exceed Ame	ount for Master Pooled Contra	acts
Contract Funding Source*  Private Pay Source		
Contract Content Changes	·	<u>o</u>
Are there any required changes to to Yes No	the contract language?* (?)	
Will the scope of the Services chan	ge?*	
Is the payment deadline different the Yes No	an net (45)?*	
Are there any changes in the Performance of Yes No	mance Targets?*	
Are there any changes to the Subm	ission deadlines for notes or	supporting documentation?*
File Upload (?)		
Contract Owner		٥
Contract Owner* (?) Please Select Contract Owner		
Jennifer Battle  Budget Manager Approval	(s)	
Approved by		
keviu ilejay		

Approved by	
Tennifer Battle	
Contracts Approval	
Approve*	
Yes	
<ul><li>Yes</li><li>No, reject entire submission</li></ul>	
No, reject entire submission  Return for correction	
No, reject entire submission	Approval Date*

# HARRIS CENTER,

# **Annual Renewal Evaluation**

Current Fiscal Year Contract Information	·		
Current Fiscal Year 2022			
Contract ID#* 6625			
Contractor Name* The Burke Center			
Service Provided * (?) Crisis Intervention Helpline Services to Callers			
Renewal Term Start Date * 9/1/2022	Renewal Term End Date* 8/31/2023		
Term for Off-Cycle Only (For Reference Only) N/A			
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100,000.00)  Board Approval (Total NTE Amount is \$100,000.00+)  Grant Proposal  Revenue  SOW-Change Order-Amendment#  Other			
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)	<ul> <li>Competitive Proposal</li> <li>Sole Source</li> <li>Request for Qualification</li> <li>Tag-On</li> <li>✓ Consumer Driven</li> <li>Other</li> </ul>		
Contract Description / Type			
<ul> <li>□ Personal/Professional Services</li> <li>□ Consumer Driven Contract</li> <li>□ Memorandum of Understanding</li> <li>□ Affiliation or Preceptor</li> <li>□ BAA/DUA</li> <li>□ Pooled Contract</li> <li>✔ Renewal of Existing Contract</li> </ul>	Consultant  New Contract/Agreement  Amendment to Existing Contract  Service/Maintenance  IT/Software License Agreement  Lease  Other		
Vendor/Contractor a Historically Underutilized Busine  Yes  No  Unknown	ess (HUB) (?)		

Contract NTE (Old Text Field For Reference) (?) 66,000
Contract NTE * (?) \$ 66,000.00
Rate(s)/Rate(s) Description  (\$5,000.00) for call volume of 301 to 500 calls per month. If, volume of call(s) exceeds 10% of the current contracted range then said volume will be billed at Twelve Dollars (\$12.00) per call.0
Unit(s) Served*
G/L Code(s)* 0
Current Fiscal Year Purchase Order Number* N/A
Contract Requestor*  Janai Smith
Contract Owner*  Jennifer Battle
File Upload (?)
Evaluation of Current Fiscal Year Performance
Evaluation of Current Fiscal Year Performance  Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Have there been any significant performance deficiencies within the current fiscal year?*
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)  Yes No
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)  Yes No  Did Contractor render services consistent with Agency policy and procedures?*(?)

Is the contract being renewed for next fiscal year with this Contractor?* (?)			
● Yes ○ No			
Renewal Information for Next Fiscal Year			
Budget Units and Amou	unts Charged to each Budge	t Unit	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*	
7001	\$ 66,000.00	420015	
Budget Manager*	Secondary Bu	ıdget Manager*	
Ilejay, Kevin	Campbell, Rica	ardo	
ACC TO CONTRACT CATALON OF CONTRACT CON			
Fiscal Year* (?)	Amount* (?)		
2023	\$ 66,000.00		
Next Fiscal Year Not to Exceed	Amount for Master Pooled Contracts		
*			
Contract Funding Source* County			
Contract Content Chan	ges		
Are there any required changes	s to the contract language?* (?)		
○ Yes ⑨ 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 P	erformance Targets?*		
○ Yes ® No			
Are there any changes to the S	Are there any changes to the Submission deadlines for notes or supporting documentation?*		
Yes No			
File Upload (?)			
Contract Owner		0	
Contract Owner* (?)			
Please Select Contract Owner			
Jennifer Battle			
Budget Manager Appro	Budget Manager Approval(s)		

Approved by	
keviu ilejay	
Contract Owner Approval	
Approved by	
Tennifer Battle	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/26/2022

HARRIS CENTER,

## **Annual Renewal Evaluation**

# **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 6627 Contractor Name\* Gulf Bend Center Service Provided\* (?) Providing crisis intervention helpline services to consumer callers and community to the Agency Renewal Term Start Date\* Renewal Term End Date\* 9/1/2022 8/31/2023 Term for Off-Cycle Only (For Reference Only) N/A Agenda Item Submitted For: (?) ✓ Information Only (Total NTE Amount is Less than \$100,000.00) ☐ Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# Other Procurement Method(s)\* Check all that Apply Competitive Bid 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 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) ○ No Unknown

	Contract NTE (Old Text Field For Reference) (?) 66,000
	Contract NTE* (?) \$ 66,000.00
	Rate(s)/Rate(s) Description (\$5,500.00) for a call volume of 30 I to 500 calls per month.  If, volume of call(s) exceed 10% of current contracted range the said volume will be billed at Twelve Dollars (\$12) per call
	Unit(s) Served* 0
	G/L Code(s)* 0
	Current Fiscal Year Purchase Order Number* N/A
	Contract Requestor*  Janai Smith
	Contract Owner*  Jennifer Battle
	File Upload (?)
Spinister Spinister	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
	Have there been any significant performance deficiencies within the current fiscal year?*
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)  Yes No
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)  Yes No  Did Contractor render services consistent with Agency policy and procedures?*(?)
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)  Yes No  Did Contractor render services consistent with Agency policy and procedures?*(?)

Is the contract being renewed  Yes No	I for next fiscal year with this Contracto	or?* (?)
Renewal Information for Next Fiscal Year		
Budget Units and Amounts Charged to each Budget Unit		
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
7001	\$ 66,000.00	420015
Budget Manager*	Secondary B	udget Manager*
Ilejay, Kevin	Campbell, Ric	
Fiscal Year* (?)	Amount* (?)	
2023	\$ 66,000.00	
Contract Funding Source*	d Amount for Master Pooled Contracts	
County		
Contract Content Cha	nges	<b>⊙</b>
Are there any required chang	es 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  Yes No	Performance Targets?*	
Are there any changes to the Submission deadlines for notes or supporting documentation?*  Yes No		
File Upload (?)		
Contract Owner		
Contract Owner* (?)		
Please Select Contract Owner  Jennifer Battle		
Budget Manager Appr	oval(s)	

Contract Owner Approval  Approved by  Jennifer Battle  Contracts Approval  Approve*  Yes  No, reject entire submission  Return for correction  Approved by*  Approval Date*  5/26/2022	Approved by	
Approved by  Contracts Approval  Approve*  Yes  No, reject entire submission  Return for correction  Approved by*  Approval Date*	kevin ilejay	
Contracts Approval  Approve*  Yes  No, reject entire submission  Return for correction  Approved by*  Approval Date*	Contract Owner Approval	
Contracts Approval  Approve*  Yes  No, reject entire submission  Return for correction  Approved by *  Approval Date*	Approved by	
Approve*  Yes  No, reject entire submission  Return for correction  Approved by*  Approval Date*	MESSES STREET	
Approve*  Yes  No, reject entire submission  Return for correction  Approved by*  Approval Date*	Jourston Bottle	
Approve*  Yes  No, reject entire submission  Return for correction  Approved by *  Approval Date*	Connego a ducce	
Approve*  Yes  No, reject entire submission  Return for correction  Approved by *  Approval Date*		
<ul> <li>Yes</li> <li>No, reject entire submission</li> <li>Return for correction</li> <li>Approved by *</li> <li>Approval Date *</li> </ul>	Contracts Approval	
<ul> <li>Yes</li> <li>No, reject entire submission</li> <li>Return for correction</li> <li>Approved by *</li> <li>Approval Date *</li> </ul>		
No, reject entire submission Return for correction  Approved by *  Approval Date *	Approve*	
Approved by *  Approval Date *	• Yes	
Approved by *  Approval Date *	<ul> <li>No, reject entire submission</li> </ul>	
Approval Date*	Return for correction	
Approval Date*	Approved by *	
		Approval Date*
S12012022	Sharping Robert	
	Shaskejia Benn	SIZOIZUZZ

HARRIS CENTER 10

#### **Annual Renewal Evaluation**

## **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 2022-0347 Contractor Name\* Dixie Safe and Lock, Inc. d/b/a Dixie Security Solutions Service Provided \* (?) General Locksmith Services for Agency's MEDCO Key System Renewal Term Start Date\* Renewal Term End Date\* 9/1/2022 8/31/2023 Term for Off-Cycle Only (For Reference Only) Agenda Item Submitted For: (?) ✓ Information Only (Total NTE Amount is Less than \$100,000.00) ■ Board Approval (Total NTE Amount is \$100,000.00+) 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 Propriety and Business Continuity 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) Yes No Unknown

	Contract NTE (Old Text Field For Reference) (?) \$20,000.00
	Contract NTE * (?) \$ 20,000.00
	Rate(s)/Rate(s) Description Varies
	Unit(s) Served* 1899
	G/L Code(s)* 557001
	Current Fiscal Year Purchase Order Number* CT141906
	Contract Requestor* Sarah Harper
	Contract Owner* Todd McCorquodale
	File Upload (?)
-	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes  ○ No
	Were Services delivered as specified in the contract?* <ul> <li>● Yes</li> <li>○ No</li> </ul>
	Did Contractor perform duties in a manner consistent with standards of the profession?*   No
	Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
	Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes O No
	Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
ACTIVIDATION OF THE PERSON	Renewal Determination
	Is the contract being renewed for next fiscal year with this Contractor?* (?)

# Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit **Budget Unit Number\*** Amount Charged to Unit\* Expense/GL Code No.\* 569012 1899 \$ 20,000.00 Secondary Budget Manager\* **Budget Manager\*** Brown, Erica Campbell, Ricardo Fiscal Year\* (?) Amount\* (?) 2023 \$ 20,000.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* General Revenue (GR) **Contract Content Changes** Are there any required changes to the contract language?\* (?) Yes No Will the scope of the Services change?\* Is the payment deadline different than net (45)?\* Yes No Are there any changes in the Performance Targets?\* O Yes No Are there any changes to the Submission deadlines for notes or supporting documentation?\* Yes No File Upload (?) **Contract Owner** Contract Owner\* (?) Please Select Contract Owner Todd McCorquodale Budget Manager Approval(s) Approved by Exica Brown



HARRIS CENTER 100

# **Annual Renewal Evaluation**

Mental Health and IDD		
Current Fiscal Year Contract Information	•	
Current Fiscal Year		
2022		
Contract ID#*		
6159		
Contractor Name*		
Garratt-Callahan Company		
Service Provided* (?)		
Emergency Repair, Water Treatment and routine services	s at 9401 Southwest Freeway,	
Houston, Texas 77074 location.		
Renewal Term Start Date*	Renewal Term End Date*	
9/1/2022	8/31/2023	
Term for Off-Cycle Only (For Reference Only)		
N/A		
Agenda Item Submitted For: (?)		
Information Only (Total NTE Amount is Less than \$10	0,000.00)	
Board Approval (Total NTE Amount is \$100,000.00+)		
☐ 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  ☐ Interlocal	Tag-On	
Not Applicable (If there are no funds required)	☐ Consumer Driven ☐ Other	
(if there are no fullus required)	C. Other	
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	<ul> <li>Service/Maintenance</li> <li>IT/Software License Agreement</li> </ul>	
Pooled Contract	Lease	
	✓ Other Requires new contract.	
Vendor/Contractor a Historically Underutilized Busine	see (HIIR) (2)	
Yes	(NOD) (I)	
No		
Unknown		

Contract NTE (Old Text Field For Reference) (?) \$15,00.00
Contract NTE* (?) \$ 15,000.00
Rate(s)/Rate(s) Description \$1.250.00 per month
Unit(s) Served* 1817
G/L Code(s)* 569024
Current Fiscal Year Purchase Order Number* CT141327
Contract Requestor* Sarah Harper
Contract Owner* Todd McCorquodale
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*    No
Did Contractor adhere to the contracted schedule?* (?)  ● Yes ○ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes O No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes  No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)

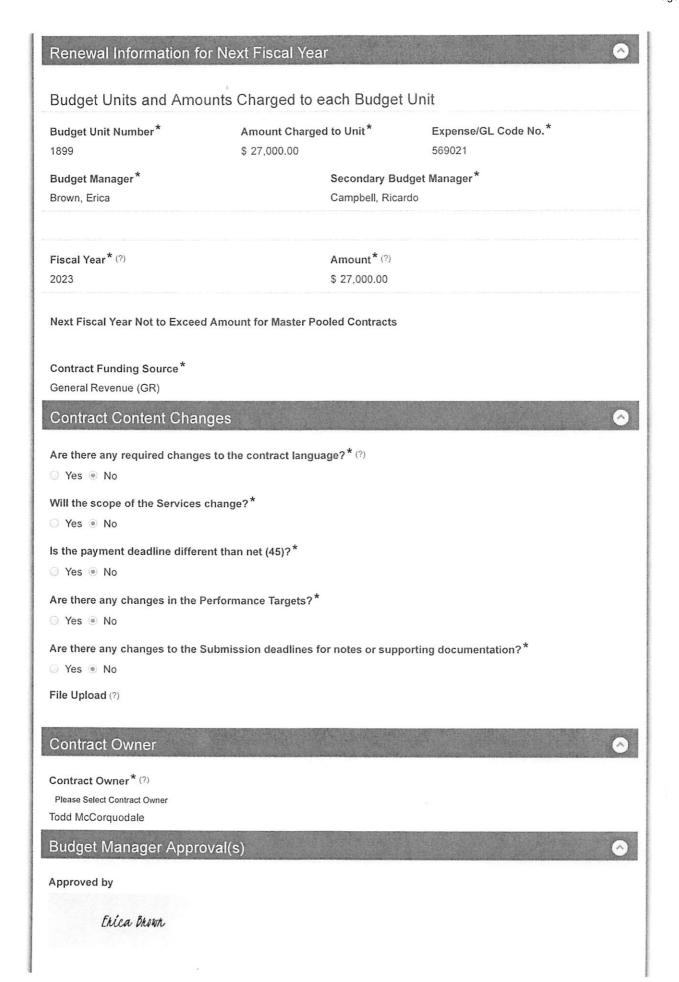
## Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit\* Budget Unit Number\* Expense/GL Code No.\* 569024 1817 \$ 17,500.00 **Budget Manager\*** Secondary Budget Manager\* Brown, Erica Campbell, Ricardo Fiscal Year\* (?) Amount\* (?) 2023 \$ 17,500.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* General Revenue (GR) **Contract Content Changes** Are there any required changes to the contract language?\* (?) Yes No Will the scope of the Services change?\* 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\* (?) Please Select Contract Owner Todd McCorquodale Budget Manager Approval(s) Approved by Exica Brown

ate*
D

HARRIS CENTER,

Current Fiscal Year Contract Information	
Current Fiscal Year 2022	
Contract ID#* 7385	
Contractor Name * GenSolutions, LLC	· ·
Service Provided * (?) Generator Maintenance, Inspection, and Support Services	5
Renewal Term Start Date *	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only) N/A	
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100 Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# Other	,000.00)
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
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
Vendor/Contractor a Historically Underutilized Busines	ss (HUB) (?)
○ Yes	are a second of the second of
No	
Unknown	

Contract NTE ( \$26,521.13	Old Text Field For Reference) (?)
Contract NTE* \$ 26,521.13	(?)
Rate(s)/Rate(s) Varies	Description
Unit(s) Served	*
G/L Code(s)* 569021	
Current Fiscal CT141322	Year Purchase Order Number*
Contract Reque	estor*
Contract Owne	
File Upload (?)	
Evaluation	of Current Fiscal Year Performance
Have there bee	n any significant performance deficiencies within the current fiscal year?*
Were Services  Yes No	delivered as specified in the contract?*
Did Contractor  • Yes  • No	perform duties in a manner consistent with standards of the profession?*
Did Contractor  Yes No	adhere to the contracted schedule?* (?)
Were reports, b  ● Yes ○ No	oilling and/or invoices submitted in a timely manner?* (?)
Agency?* (?)	provide adequate or proper supporting documentation of time spent rendering services for the
	render services consistent with Agency policy and procedures?* (?)
<ul><li>Yes O No</li><li>Maintained legal</li></ul>	ally required standards for certification, licensure, and/or training?* (?)
● Yes ○ No Renewal De	etermination
The second secon	being renewed for next fiscal year with this Contractor?* (?)



Contract Owner Approval	untermania (casa cara Calambrata) dan manaharan manakan mendendaran dan mendalah mendalah mendalah mendalah me	
Approved by		
Todd McCorquodale		
Contracts Approval		
Approve*		
Yes		
No, reject entire submission		
Return for correction		
Approved by *		
	Approval Date*	
Shaskyia Behn	5/31/2022	

HARRIS CENTER,

Current Fiscal Year Contract Information	
Current Fiscal Year 2022	
Contract ID#* 6298	
Contractor Name * Legal Files Software, Inc.	
Service Provided* (?) Software for Legal and Contracts Case Management.	
Renewal Term Start Date* 9/1/2022	Renewal Term End Date* 8/31/2023
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100 Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# 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)	<ul> <li>Competitive Proposal</li> <li>Sole Source</li> <li>Request for Qualification</li> <li>Tag-On</li> <li>Consumer Driven</li> <li>✓ Other Legal Software</li> </ul>
Contract Description / Type	
<ul> <li>□ Personal/Professional Services</li> <li>□ Consumer Driven Contract</li> <li>□ Memorandum of Understanding</li> <li>□ Affiliation or Preceptor</li> <li>□ BAA/DUA</li> <li>□ Pooled Contract</li> <li>☑ Renewal of Existing Contract</li> </ul>	Consultant  New Contract/Agreement  Amendment to Existing Contract  Service/Maintenance  IT/Software License Agreement  Lease  Other
Vendor/Contractor a Historically Underutilized Busine  Yes  No  Unknown	ss (HUB) (?)

	Contract NTE (Old Text Field For Reference) (?)
	Contract NTE* (?) \$ 7,765.00
	Rate(s)/Rate(s) Description Unit 1110 - \$4,486; Unit 1119 - \$3,279
	Unit(s) Served* 1110 and 1119
	G/L Code(s)* 553002
	Current Fiscal Year Purchase Order Number* CT141391 (Legal) and CT141375 (Contracts)
	Contract Requestor* Christina Gerardo
	Contract Owner* Kendra Thomas
	File Upload (?)
-	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
	Were Services delivered as specified in the contract?*
	Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
	Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes O No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
	⊚ Yes ○ No
	Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
and an	Renewal Determination  State contract being renewed for next fiscal year with this Contractor?*(?)
	Ves

### Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 1110 \$ 4,711.00 553002 Secondary Budget Manager\* Budget Manager\* Brown, Erica Campbell, Ricardo Budget Unit Number\* Expense/GL Code No.\* Amount Charged to Unit\* 1119 \$ 3,443.00 553002 **Budget Manager\*** Secondary Budget Manager\* Campbell, Ricardo Brown, Erica Fiscal Year\* (?) Amount\*(?) 2023 \$ 8,154.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* General Revenue (GR) **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)?\* 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\* (?) Please Select Contract Owner Kendra Thomas Budget Manager Approval(s)

Erica Brown	
LINEA VIONI	Ricardo Campbell
Contract Owner Approval	
Approved by	
Kendra D. Thomas	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/26/2022

# HARRIS Annual Renewal Evaluation

Mental Health and IDD	
Current Fiscal Year Contract Information	1 &
Current Fiscal Year	
2022	
Contract ID#*	
7362	
Contractor Name *	
Snappy App, Inc.	
Service Provided * (?)	
Gifts for employees of the Agency for Spot Rewards.	
Renewal Term Start Date*	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$10	0,000.00)
Board Approval (Total NTE Amount is \$100,000.00+)	
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
Check all that Apply	
☐ Competitive Bid	
<ul> <li>Request for Proposal</li> </ul>	☐ 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
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
	Other
Vendor/Contractor a Historically Underutilized Busine	ess (HUB) (?)
Yes	
● No	
Unknown	

Contract NTE (Old Text Field For Reference) (?)	
Contract NTE* (?) \$ 42,000.00  Rate(s)/Rate(s) Description	
Unit(s) Served*	
1108  G/L Code(s)*  549005	
Current Fiscal Year Purchase Order Number* CT141406	
Contract Requestor*  Kip Baughman	
Contract Owner*  Kip Baughman  File Upload (?)	
Evaluation of Current Fiscal Year Performance	
Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes  ○ No	
Were Services delivered as specified in the contract?*  • Yes • No	
Did Contractor perform duties in a manner consistent with standards of the profession?*	
Did Contractor adhere to the contracted schedule?* (?)	
Were reports, billing and/or invoices submitted in a timely manner?* (?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the	
Agency?* (?)  • Yes • No	
Did Contractor render services consistent with Agency policy and procedures?* (?)  ■ Yes □ No	
Maintained legally required standards for certification, licensure, and/or training?* (?)  ■ Yes □ No	
Renewal Determination  Is the contract being renewed for next fiscal year with this Contractor?* (?)	
You O No.	

### Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit\* Budget Unit Number\* Expense/GL Code No.\* 1108 \$ 42,000.00 549009 Budget Manager\* Secondary Budget Manager\* Brown, Erica Campbell, Ricardo Fiscal Year\* (?) Amount\* (?) 2023 \$ 42,000.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* General Revenue (GR) **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\* (?) Please Select Contract Owner Kip Baughman Budget Manager Approval(s) Approved by Exica Brown

Contract Owner Approval	
Approved by	
Kip Baughman	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	6/1/2022

#### **Annual Renewal Evaluation**

#### **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 6475 Contractor Name\* Sun Coast Resources, Inc. Service Provided\* (?) Maintenance for generators at 3737 Dacoma Rd (1), 5901 Long Drive (1), and 9401 Southwest Freeway (2) Renewal Term End Date\* Renewal Term Start Date\* 9/1/2022 8/31/2023 Term for Off-Cycle Only (For Reference Only) N/A Agenda Item Submitted For: (?) ✓ Information Only (Total NTE Amount is Less than \$100,000.00) Board Approval (Total NTE Amount is \$100,000.00+) 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 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) Yes No Unknown

Contract NTE (Old Text Field For Reference) (?) \$20,000
Contract NTE* (?) \$ 20,000.00
Rate(s)/Rate(s) Description Rate: \$250.00 per generator, per month
Unit(s) Served* 1899
G/L Code(s)* 569022
Current Fiscal Year Purchase Order Number* CT141310
Contract Requestor* Sarah Harper
Contract Owner* Todd McCorquodale
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes ● No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  ■ Yes □ No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes • No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)

### Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit **Budget Unit Number\*** Amount Charged to Unit\* Expense/GL Code No.\* 569022 1899 \$ 20,000.00 Secondary Budget Manager\* **Budget Manager\*** Brown, Erica Campbell, Ricardo Fiscal Year\* (?) Amount\* (?) 2023 \$ 20,000.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* General Revenue (GR) **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\* (?) Please Select Contract Owner Todd McCorquodale Budget Manager Approval(s) Approved by Frica Brown

Contract Owner Approval	
Approved by	
Todd Mccorquodale	
Contracts Approval	
Approve*	
Yes	
No, reject entire submission	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/31/2022

HARRIS CENTER,

#### **Annual Renewal Evaluation**

#### **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 2021-0103 Contractor Name\* Applied Technical Services, Inc. Service Provided \* (?) Annual Roof Anchor Inspections Renewal Term Start Date\* Renewal Term End Date\* 9/1/2022 8/31/2023 Term for Off-Cycle Only (For Reference Only) Agenda Item Submitted For: (?) ☑ Information Only (Total NTE Amount is Less than \$100,000.00) Board Approval (Total NTE Amount is \$100,000.00+) 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 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) Yes No Unknown

Contract NTE (Old Text Field For Reference) (?) \$3,300
Contract NTE* (?) \$ 3,300.00
Rate(s)/Rate(s) Description
Unit(s) Served* 1817
G/L Code(s)* 557001
Current Fiscal Year Purchase Order Number* CT141316
Contract Requestor* Sarah Harper
Contract Owner* Todd McCorquodale
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes ● No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*    No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes □ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? $^{\star}$ (?)
● Yes ○ No  Did Contractor render services consistent with Agency policy and procedures?* (?)
Yes    No  Maintained legally required standards for certification, licensure, and/or training?* (?)
Yes  No
Renewal Determination  Is the contract being renewed for next fiscal year with this Contractor?* (?)
,

### Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit\* Expense/GL Code No.\* **Budget Unit Number\*** 557001 1817 \$ 750.00 Secondary Budget Manager\* Budget Manager\* Brown, Erica Campbell, Ricardo Fiscal Year\* (?) Amount\* (?) 2023 \$ 750.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* General Revenue (GR) **Contract Content Changes** Are there any required changes to the contract language?\* (?) O 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\* (?) Please Select Contract Owner Todd McCorquodale Budget Manager Approval(s) Approved by Exica Brown

Contract Owner Approval	0
Approved by	
Todd McCorquodale	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/16/2022
**************************************	

# HARRIS Annual Renewal Evaluation

Mental Health and IDD	
Current Fiscal Year Contract Information	on _
Current Fiscal Year	
2022	
Contract ID#*	
7160	
(C. (C. T. C.)	
Contractor Name*	•
CU Solutions Group, Inc. dba HR Peformance Solution	5
Service Provided * (?)	
HR Performance Management software to support doc performance.	umentation for employee
Renewal Term Start Date *	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)	
Information Only (Total NTE Amount is Less than \$1	
Board Approval (Total NTE Amount is \$100,000.00+	-)
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#  Other	
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 Unknown
Contract Description / Type	
Personal/Professional Services	☐ Consultant
Consumer Driven Contract	New Contract/Agreement
<ul> <li>Memorandum of Understanding</li> </ul>	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busi	ness (HUB) (?)
○ Yes	
No	
○ Unknown	

	Contract NTE (Old Text Field For Reference) (?)
	Contract NTE* (?) \$ 19,100.00
	Rate(s)/Rate(s) Description
	Unit(s) Served* 1130
	G/L Code(s)* 553002
	Current Fiscal Year Purchase Order Number* CT141405
	Contract Requestor* Anthony Jones
	Contract Owner* Terence Freeman
	File Upload (?)
-	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes  ○ No
	Were Services delivered as specified in the contract?*  ● Yes ○ No
	Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
	Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? $^*$ (?)
	● Yes ○ No
	Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes O No
	Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Constitution of the	Renewal Determination
	Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes O No

## Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Expense/GL Code No.\* Budget Unit Number\* Amount Charged to Unit\* 553002 1130 \$ 20,000.00 Secondary Budget Manager\* Budget Manager\* Campbell, Ricardo Brown, Erica Fiscal Year\* (?) Amount\* (?) \$ 20,000.00 2023 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* General Revenue (GR) **Contract Content Changes** Are there any required changes to the contract language?\* (?) Yes No Will the scope of the Services change?\* 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\* (?) Please Select Contract Owner Mustafa Cochinwala Budget Manager Approval(s) Approved by Ricardo Campbell

Approved by	
Mustafa Cochinwala	
Contracts Approval	
Approve*	
Approve*  Yes	
Yes	
Yes  No, reject entire submission  Return for correction	
Yes No, reject entire submission	Approval Date*

HARRIS CENTER &

Current Fiscal Year Contract Information	<u> </u>
Current Fiscal Year 2022	
Contract ID#* 2021-0290	
Contractor Name * Daniel Snare	
Service Provided* (?) Assessment of the Agency's Board Operations and Training	ng Services
Renewal Term Start Date* 1/10/2022	Renewal Term End Date* 1/10/2023
Term for Off-Cycle Only (For Reference Only) 01/10/2022-01/10/2023	
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100 Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# Other	,000.00)
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  Not Applicable (If there are no funds required)	Consumer Driven
Not Applicable (If there are no funds required)	Other Requested by Agency Board
Contract Description / Type	
Personal/Professional Services	✓ Consultant
Consumer Driven Contract	□ New Contract/Agreement
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> </ul>
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busine	ss (HUB) (?)
○ Yes	
No	
Unknown	

	Contract NTE (Old Text Field For Reference) (?) \$15,000.00
	Contract NTE* (?) \$ 15,000.00
	Rate(s)/Rate(s) Description \$150.00 per hour based on estimate number billable hours
	Unit(s) Served* 1101
	G/L Code(s)* 542000
	Current Fiscal Year Purchase Order Number* CT141741
	Contract Requestor* Veronica Franco
	Contract Owner* Wayne Young
	File Upload (?)
-	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes  ○ No
	Were Services delivered as specified in the contract?*  9 Yes  No
	Did Contractor perform duties in a manner consistent with standards of the profession?*   No
	Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes O No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? $^*$ (?)
	<ul> <li></li></ul>
	Yes O No Maintained legally required standards for certification, licensure, and/or training?* (?)
	Yes  No
Continue	Renewal Determination
	Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes  • No

Renewal Information for I	Next Fiscal Yo	ear	•
Budget Units and Amoun	ts Charged to	o each Budget Ur	nit
Budget Unit Number* 1101	Amount Char \$ 15,000.00	ged to Unit*	Expense/GL Code No.* 542000
Budget Manager* Brown, Erica		Secondary Budge Campbell, Ricardo	t Manager*
Fiscal Year* (?) 2023		Amount* (?) \$ 15,000.00	
Next Fiscal Year Not to Exceed Ar	nount for Master	Pooled Contracts	
Contract Funding Source* General Revenue (GR)			
Contract Content Change	es .		Ō
Are there any required changes to ○ Yes   No	the contract lan	guage?* <sup>(?)</sup>	
Will the scope of the Services cha	inge?*		
Is the payment deadline different  Yes No	than net (45)?*		
Are there any changes in the Perf	ormance Targets	?*	
Are there any changes to the Sub  Yes  No	mission deadline	s for notes or supporti	ng documentation?*
File Upload (?)			
Contract Owner			0
Contract Owner* (?) Please Select Contract Owner			
Budget Manager Approva	ıl(s)		lacktriangle
Approved by			
Exica Bhown			

Contract Owner Approval	Ó
Approved by	
Lay 8	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	6/3/2022

HARRIS CENTER for

Mental Freductatio (1717)	
Current Fiscal Year Contract Information	
Current Fiscal Year 2022	
Contract ID#* 7741	
Contractor Name* Feedtrail Inc.	
Service Provided* (?) Consumer Satisfaction Survey Software	
Renewal Term Start Date * 6/1/2022	Renewal Term End Date* 5/31/2023
Term for Off-Cycle Only (For Reference Only) 6/1/2020 - 5/31/2021	
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100 Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# Other	,000.00)
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	Competitive Proposal
Request for Proposal Request for Application	Sole Source
Request for Quote	Request for Qualification Tag-On
☐ Interlocal	Consumer Driven
<ul> <li>Not Applicable (If there are no funds required)</li> </ul>	Other
Contract Description / Type	
Personal/Professional Services	☐ Consultant
Consumer Driven Contract	□ New Contract/Agreement
<ul> <li>Memorandum of Understanding</li> </ul>	<ul> <li>Amendment to Existing Contract</li> </ul>
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busines	ss (HUB) (?)
○ Yes	
<ul><li>No</li></ul>	
O Unknown	

Contract NTE (Old Text Field For Reference) (?) \$22,387.00
Contract NTE* (?) \$ 22,387.00
Rate(s)/Rate(s) Description
Unit(s) Served* 1130
G/L Code(s)* 551002
Current Fiscal Year Purchase Order Number* CT140577
Contract Requestor* Frederic Edgar
Contract Owner* Frederic Edgar
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes • No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes • No

### Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit\* Budget Unit Number\* Expense/GL Code No.\* 1130 553002 \$ 22.387.00 Budget Manager\* Secondary Budget Manager\* Campbell, Ricardo Brown, Erica Fiscal Year\* (?) Amount\* (?) 2023 \$ 22,387.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* General Revenue (GR) **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\* (?) Please Select Contract Owner Frederic Edgar Budget Manager Approval(s) Approved by Ricardo Campbell

Approved by		
Grederic W. Edgar IV		
Contracts Approval		
Approve*		
Yes		
No, reject entire submission		
Return for correction		
Approved by *	******	
Approved by *	Approval Date*	
Approved by* Shaskyia Behn	5/17/2022	

HARRIS CENTER for

Current Fiscal Year Contract Information	
Current Fiscal Year	
2022	
Contract ID#*	
7531	
7551	
Contractor Name*	
Humble Elevator Services	
Service Provided * (?)	
	ar the Newheast Drieter, and Jail
Elevator Inspection, Maintenance and Support Services for Diversion locations.	of the Northeast, Bristow and Jali
Renewal Term Start Date*	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
N/A	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$100	0,000.00)
Board Approval (Total NTE Amount is \$100,000.00+)	
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#  Other	
Ottlei	
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
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
Vendor/Contractor a Historically Underutilized Business (HUB) (?)	
○ Yes	
No	
Unknown	

Contract NTE (Old Text Field For Reference) (?) \$16,121.56
Contract NTE* (?) \$ 20,000.00
Rate(s)/Rate(s) Description Varies
Unit(s) Served* 1899
G/L Code(s)* 569009
Current Fiscal Year Purchase Order Number* CT141307
Contract Requestor* Sarah Harper
Contract Owner* Todd McCorquodale
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes ● No
Were Services delivered as specified in the contract?*  ● Yes ⊝ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
Yes  No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)

# Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit\* Expense/GL Code No.\* Budget Unit Number\* 1899 \$ 20,000.00 569009 Budget Manager\* Secondary Budget Manager\* Brown, Erica Campbell, Ricardo Fiscal Year\* (?) Amount\* (?) 2023 \$ 20,000.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* General Revenue (GR) **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\* (?) Please Select Contract Owner Todd McCorquodale Budget Manager Approval(s) Approved by Frica Brown

Approved by	
Todd Mccorquodale	,
Contracts Approval	
Contracts Approval	
Approve*	
Approve*  • Yes  • No, reject entire submission	
Approve*  • Yes	
Approve*  Yes  No, reject entire submission  Return for correction	
Approve*  ● Yes  ○ No, reject entire submission	Approval Date*

HARRIS CENTER,

Current Fiscal Year Contract Information	<u> </u>
Current Fiscal Year	
2022	
Contract ID#*	
7419	
Contractor Name *	
Leafhouse Financial Advisors Inc.	
Service Provided * (?)	
Non-Erisa Investment Fiduciary Services for 457(b), 401(a	a) and 403(b) plans.
Renewal Term Start Date *	Renewal Term End Date*
9/16/2022	9/15/2023
9/10/2022	9/15/2023
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$100	.000.00)
Board Approval (Total NTE Amount is \$100,000.00+)	,
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
Processor Marker (4/2)*	
Procurement Method(s) *  Check all that Apply	
Competitive Bid	Competitive Proposal
Request for Proposal Request for Application	Sole Source
Request for Quote	<ul> <li>□ Request for Qualification</li> <li>□ Tag-On</li> </ul>
Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	Other
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
	☐ IT/Software License Agreement
Pooled Contract  Renewal of Existing Contract	Lease
TOTAL OF EXISTING CONTRACT	Other
Vendor/Contractor a Historically Underutilized Busines	ss (HUB) (?)
○ Yes	
No	
Unknown	

	Contract NTE (Old Text Field For Reference) (?)
	Contract NTE* (?) \$ 46,000.00
	Rate(s)/Rate(s) Description Fixed Annual Fee Payment
	Unit(s) Served* 1108
	G/L Code(s)* 543068
	Current Fiscal Year Purchase Order Number* CT141543
	Contract Requestor* Steve Evans
	Contract Owner* Steve Evans
	File Upload (?)
-	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes ● No
	Were Services delivered as specified in the contract?* <ul> <li>● Yes</li> <li>○ No</li> </ul>
	Did Contractor perform duties in a manner consistent with standards of the profession?*  ● Yes ○ No
	Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes O No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? $^{\star}$ (?)
	Yes    No  Did Contractor render services consistent with Agency policy and procedures?* (?)
	Yes No Maintained legally required standards for certification, licensure, and/or training?* (?)
Diameter .	Yes  No
CONTRACTOR OF THE PERSON	Renewal Determination
	Is the contract being renewed for next fiscal year with this Contractor? * (?)  ● Yes ○ No

# Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit\* Expense/GL Code No.\* Budget Unit Number\* 543068 1108 \$ 46,000.00 Budget Manager\* Secondary Budget Manager\* Campbell, Ricardo Brown, Erica Fiscal Year\* (?) Amount\* (?) 2023 \$ 46,000,00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts 2023 Contract Funding Source\* **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\* (?) Please Select Contract Owner Steve Evans Budget Manager Approval(s) Approved by Exica Brown

Approved by	
Steve Evans	
Contracts Approval	
Contracts Approval	
Approve*	
Yes	
No, reject entire submission	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/24/2022
Chuskejia Denn	

HARRIS CENTER,

Current Fiscal Year Contract Information		<b>○</b>
Current Fiscal Year 2022		
Contract ID#* 6093		
Contractor Name* Otis Elevator Company		
Service Provided* (?) Elevator Maintenance and Services for the 9401 Southwe	Freeway, Housto	n, TX property.
Renewal Term Start Date* 11/1/2022	denewal Term E 0/31/2023	nd Date*
Term for Off-Cycle Only (For Reference Only) 11/01/22-10/31/23		
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100 Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# Other	00.00)	
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	atoraca
Not Applicable (If there are no funds required)		ssignment-9401 SW property isition.
Contract Description / Type		
Personal/Professional Services	Consultant	
Consumer Driven Contract	☐ New Contract	:t/Agreement
■ Memorandum of Understanding		to Existing Contract
Affiliation or Preceptor	✓ Service/Mair	
☐ BAA/DUA	☐ IT/Software I	License Agreement
□ Pooled Contract	Lease	
Renewal of Existing Contract	Other	
Vendor/Contractor a Historically Underutilized Busine  Yes  No	(HUB) (?)	
Unknown		

\$81,000.00	(Old Text Field For Reference) (?)
Contract NTE \$ 66,000.00	* (?)
Rate(s)/Rate(s \$2,375.00 per	s) Description month
Unit(s) Serve	d*
G/L Code(s)* 569009	
Current Fisca CT146083	Il Year Purchase Order Number*
Contract Req Sarah Harper	uestor*
Contract Owr	
File Upload (?	
Evaluation	of Current Fiscal Year Performance
Have there be	een any significant performance deficiencies within the current fiscal year?*
Were Service  Yes No	s delivered as specified in the contract?*
Yes  No	or perform duties in a manner consistent with standards of the profession?*
<ul><li>Yes O No</li><li>Did Contracto</li><li>Yes O No</li></ul>	or perform duties in a manner consistent with standards of the profession?*  or adhere to the contracted schedule?* (?)
<ul><li>Yes O No</li><li>Did Contracto</li><li>Yes O No</li><li>Did Contracto</li><li>Yes O No</li></ul>	or perform duties in a manner consistent with standards of the profession?*  or adhere to the contracted schedule?* (?)  billing and/or invoices submitted in a timely manner?* (?)
<ul> <li>Yes No</li> <li>No</li> <li>Did Contractor</li> <li>Yes No</li> <li>No</li> <li>Were reports,</li> <li>Yes No</li> </ul>	or perform duties in a manner consistent with standards of the profession?*  or adhere to the contracted schedule?* (?)  billing and/or invoices submitted in a timely manner?* (?)
<ul> <li>Yes No</li> <li>No</li> <li>Did Contractor</li> <li>Yes No</li> <li>No</li> <li>Were reports,</li> <li>Yes No</li> <li>Did Contractor</li> <li>Agency?* (?)</li> <li>Yes No</li> </ul>	or perform duties in a manner consistent with standards of the profession?*  or adhere to the contracted schedule?*(?)  billing and/or invoices submitted in a timely manner?*(?)  or provide adequate or proper supporting documentation of time spent rendering services for the
<ul> <li>Yes No</li> <li>No</li> <li>Did Contractor</li> <li>Yes No</li> <li>No</li> <li>Were reports,</li> <li>Yes No</li> <li>Did Contractor</li> <li>Agency?* (?)</li> <li>Yes No</li> </ul>	or perform duties in a manner consistent with standards of the profession?*  or adhere to the contracted schedule?*(?)  billing and/or invoices submitted in a timely manner?*(?)  or provide adequate or proper supporting documentation of time spent rendering services for the
<ul> <li>Yes No</li> <li>No</li> <li>Did Contracto</li> <li>Yes No</li> <li>Yes No</li> <li>Were reports,</li> <li>Yes No</li> <li>Did Contracto</li> <li>Agency?* (?)</li> <li>Yes No</li> <li>Did Contracto</li> <li>Agency?* No</li> </ul>	or perform duties in a manner consistent with standards of the profession?*  or adhere to the contracted schedule?*(?)  billing and/or invoices submitted in a timely manner?*(?)  or provide adequate or proper supporting documentation of time spent rendering services for the  or render services consistent with Agency policy and procedures?*(?)  gally required standards for certification, licensure, and/or training?*(?)
<ul> <li>Yes No</li> <li>No</li> <li>Did Contractor</li> <li>Yes No</li> <li>No</li> <li>Were reports,</li> <li>Yes No</li> <li>Did Contractor</li> <li>Agency?* (?)</li> <li>Yes No</li> <li>Did Contractor</li> <li>Did Contractor</li> <li>Yes No</li> <li>Maintained le</li> <li>Yes No</li> </ul>	or perform duties in a manner consistent with standards of the profession?*  or adhere to the contracted schedule?*(?)  billing and/or invoices submitted in a timely manner?*(?)  or provide adequate or proper supporting documentation of time spent rendering services for the  or render services consistent with Agency policy and procedures?*(?)  gally required standards for certification, licensure, and/or training?*(?)

Renewal Information for Next Fiscal Year		
Budget Units and Amounts Charged to each Budget Unit		
Budget Unit Number*	Amount Charged to Unit* \$ 66,000.00	Expense/GL Code No.* 569009
Budget Manager* Brown, Erica	Secondary Campbell, R	Budget Manager* icardo
Fiscal Year* (?) 2023	Amount* (? \$ 66,000.00	)
Next Fiscal Year Not to Exceed Am	ount for Master Pooled Contrac	ts
Contract Funding Source* General Revenue (GR)  Contract Content Changes	S	0
Are there any required changes to ○ Yes    No	the contract language?* (?)	
Will the scope of the Services chan  Yes  No	ge?*	
Is the payment deadline different the Yes  No	nan net (45)?*	
Are there any changes in the Perfo	rmance Targets?*	
Are there any changes to the Submission deadlines for notes or supporting documentation?*  ○ Yes  ○ No		
File Upload (?)		
Contract Owner		
Contract Owner * (?) Please Select Contract Owner Todd McCorquodale		
Budget Manager Approval	(s)	•
Approved by  Ekica Bhown		





Mental Health and IDD	
Current Fiscal Year Contract Information	
Current Fiscal Year	
2022	
Contract ID#*	
6638	
Contractor Name *	
Performance Logic, Inc.	
Service Provided* (?)	
Project Management Software to Track Agency Project Po	erformance.
Renewal Term Start Date*	Renewal Term End Date*
11/1/2022	10/31/2023
	10/3 1/2023
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)	2000 000
☑ Information Only (Total NTE Amount is Less than \$100	0,000.00)
<ul><li>☐ Board Approval (Total NTE Amount is \$100,000.00+)</li><li>☐ Grant Proposal</li></ul>	
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 Software Agreement
Contract Description / Type	
Personal/Professional Services	☐ Consultant
Consumer Driven Contract	New Contract/Agreement
<ul> <li>Memorandum of Understanding</li> </ul>	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busine	ss (HUB) (?)
<ul><li>No</li></ul>	
<ul><li>Unknown</li></ul>	

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 12,218.00
Rate(s)/Rate(s) Description Vary.
Unit(s) Served* 1128, 1130 and 1177
G/L Code(s)* 553002
Current Fiscal Year Purchase Order Number* CT141305
Contract Requestor*  Maria Richardson
Contract Owner* Luming Li
File Upload (?) Performance Logic Price Quote 05-10-2022.pdf 680.71KB
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  O Yes   No
Were Services delivered as specified in the contract?*  ■ Yes □ No
Did Contractor perform duties in a manner consistent with standards of the profession?*
Did Contractor adhere to the contracted schedule?* (?)  • Yes O No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
<ul> <li>Yes ○ No</li> <li>Did Contractor render services consistent with Agency policy and procedures?* (?)</li> <li>Yes ○ No</li> </ul>
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination

Renewal Information f	or Next Fiscal Year	
A CONTRACTOR OF THE CONTRACTOR		
Budget Units and Amo	ounts Charged to each Budg	et Unit
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1177	\$ 492.00	553002
Budget Manager*		Budget Manager*
Brown, Erica	Campbell, R	
Budget Unit Number* 1130	Amount Charged to Unit* \$ 7,790.00	Expense/GL Code No.* 553002
Budget Manager*		Budget Manager*
Campbell, Ricardo	Brown, Erica	150
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1128	\$ 3,444.00	553002
Budget Manager*	V. 5	Budget Manager*
Campbell, Ricardo	Brown, Erica	
Fiscal Year* (?) 2023	Amount* (? \$ 11,726.00	,
		4-
Next Fiscal Year Not to Excee 11,726.00	d Amount for Master Pooled Contrac	ts
Contract Funding Source*		
General Revenue (GR)		
Contract Content Cha	nges	
Are there any required chang	es to the contract language?* (?)	
Yes No	os to the contract language.	
Will the scope of the Services	change?*	
○ Yes ● No		
Is the payment deadline differ	ent than net (45)?*	
Yes  No		
	20/24	
	Performance Targets?*	
Yes No		*
	Performance Targets?* Submission deadlines for notes or so	upporting documentation?*
Yes No		upporting documentation?*

Contract Owner	6
Contract Owner* (?)	
Please Select Contract Owner	
Carrie Rys	
Budget Manager Approval(s)	<u> </u>
Approved by	Approved by
	0 .0
Ekica Bhown	Ricardo Campbell
Contract Owner Approval	0
Approved by	
Carrie Rys	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
<ul> <li>Return for correction</li> </ul>	
Approved by *	
Approved by	*
0, 1, 0,	Approval Date*
Shaskyia Behn	5/18/2022

# HARRIS Annual Renewal Evaluation

Mental Health and IDD	
Current Fiscal Year Contract Information	
Current Fiscal fear Contract Informatio	
Current Fiscal Year	
2022	
Contract ID#*	
7797	
Contractor Name*	
UpKeep Technologies, Inc.	
Service Provided * (?)	
Computerized Maintenance Asset Collection/ Preventat	ive Maintenance Scheduling
Services for Facilities Services Department	To maintain and obtaining
Renewal Term Start Date*	Renewal Term End Date *
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
N/A	
Agenda Item Submitted For: (?)	00 000 00)
<ul> <li>Information Only (Total NTE Amount is Less than \$10</li> <li>Board Approval (Total NTE Amount is \$100,000.00+)</li> </ul>	
Grant Proposal	)
Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
Check all that Apply	Compatitive Proposel
☐ Competitive Bid ☐ Request for Proposal	<ul><li>☐ Competitive Proposal</li><li>☐ Sole Source</li></ul>
Request for Application	Request for Qualification
■ Request for Quote	☐ Tag-On
Interlocal	Consumer Driven
□ Not Applicable (If there are no funds required)	Other
Contract Description / Type	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> </ul>
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Popular of Existing Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busin	ness (HUB) (?)
O Yes	
No     No	
Unknown	

\$14,000.00
Contract NTE* (?) \$ 14,400.00
Rate(s)/Rate(s) Description See exhibit A1
Unit(s) Served* 1124
G/L Code(s)* 551002
Current Fiscal Year Purchase Order Number* CT141311
Contract Requestor* Sarah Harper
Contract Owner* Todd McCorquodale
File Upload (?) Exhibit A2 UpKeep Tech Ex. A2. (investment summary).pdf 673.49KB
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  ● Yes ○ No
er les O No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)
Did Contractor adhere to the contracted schedule?* (?)  ● Yes ○ No  Were reports, billing and/or invoices submitted in a timely manner?* (?)
Did Contractor adhere to the contracted schedule?*(?)  • Yes O No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  • Yes O No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)
Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)  Yes No  Did Contractor render services consistent with Agency policy and procedures?*(?)

Is the contract being renewed for next fiscal year with this Contractor?* (?)				
● Yes ○ No				
Renewal Information for N	lext Fiscal Year	And the form of the		0
Dudget Units and America	e Charged to each	Dudget U	ait.	
Budget Units and Amount				
Budget Unit Number*	Amount Charged to U	Init*	Expense/GL Code No.* 551002	
1124	\$ 14,400.00			
Budget Manager* Brown, Erica		ondary Budge opbell, Ricardo	t Manager "	
Drown, Linea		ippell, Modrae		
		transport, and the state of the state of		imminuting_di i
Fiscal Year* (?)		ount* (?)		
2023	\$ 12	1,400.00		
Next Fiscal Year Not to Exceed An	nount for Master Pooled	Contracts		
Contract Funding Source*				
General Revenue (GR)		CNACES AND DESCRIPTION OF THE PARTY OF THE P		WITH THE PROPERTY.
Contract Content Change	S			0
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 t	han net (45)?*			
○ Yes ● No				
Are there any changes in the Perfe	ormance Targets?*			
○ Yes ® No				
Are there any changes to the Submission deadlines for notes or supporting documentation?*				
○ Yes ● No				
File Upload (?)				
Contract Owner		home is a state of the same of		<u> </u>
Contract Owner* (?)				
Please Select Contract Owner				
Todd McCorquodale				Mark Harrison Waller
Budget Manager Approval(s)				

Ehica Bhown	
Contract Owner Approval	
Approved by	
Todd McCorquodale	
graa Micorquame	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
<ul> <li>Return for correction</li> </ul>	
Approved by*	
	Approval Date*
Shaskyia Behn	5/17/2022

# HARRIS Annual Renewal Evaluation

Mental Health and IDD	
Current Fiscal Year Contract Information	n 🔿
Current Fiscal Year	
2022	
Contract ID#*	
7852	
Contractor Name *	
Vector Solution/Convergence Training, LLC	
Service Provided * (?)	
Learning Management System for Facility Maintenance	Scheduling Services
Renewal Term Start Date *	Renewal Term End Date *
12/30/2020	12/30/2024
Term for Off-Cycle Only (For Reference Only)	
refill for on-cycle only (For Reference only)	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$10	00 000 00)
Board Approval (Total NTE Amount is \$100,000.00+)	
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*  Check all that Apply	
11 CON 1 CON	
Competitive Bid	Competitive Proposal
Request for Proposal	Sole Source
<ul><li>☐ Request for Application</li><li>☑ Request for Quote</li></ul>	Request for Qualification
Interlocal	☐ Tag-On ☐ Consumer Driven
Not Applicable (If there are no funds required)	Other
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
Vendor/Contractor a Historically Underutilized Busin	ess (HUB) (?)
Yes	Same Same St. Safe
<ul><li>No</li></ul>	
Unknown	

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 10,764.00
Rate(s)/Rate(s) Description \$10,764.00 (Paid in Full for 3 year term)
Unit(s) Served* 1124
G/L Code(s)* 551002
Current Fiscal Year Purchase Order Number* CT140825
Contract Requestor* Sarah Harper
Contract Owner* Todd McCorquodale
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes • No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)

Renewal Information for No	ext Fiscal Year	0	
Budget Units and Amounts Charged to each Budget Unit			
Budget Unit Number*	Amount Charged to Unit* \$ 3,888.00	Expense/GL Code No.* 551002	
Budget Manager* Brown, Erica	Secondary Budg Campbell, Ricard		
Fiscal Year* (?) 2023	Amount* (?) \$ 3,888.00		
Next Fiscal Year Not to Exceed Amo			
Contract Funding Source* General Revenue (GR)			
Contract Content Changes		0	
Are there any required changes to to Yes  No	the contract language?* (?)		
Will the scope of the Services chan  Yes  No	ge?*		
Is the payment deadline different the Yes  No	an net (45)?*		
Are there any changes in the Performance Targets?*  ○ Yes  ○ No			
Are there any changes to the Submission deadlines for notes or supporting documentation?*  ○ Yes ③ No			
File Upload (?)			
Contract Owner		0	
Contract Owner* (?) Please Select Contract Owner			
Todd McCorquodale			
Budget Manager Approval	(s)	6	
Approved by			
Erica Brown			

Contract Owner Approval	
Approved by	
Todd McCorquodale	
Contracts Approval	
Approve*	
Yes	
No, reject entire submission	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/23/2022
· · · · · · · · · · · · · · · · · · ·	



### **Annual Renewal Evaluation**

### **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 2021-0138 Contractor Name\* A-Rocket Moving & Storage, Inc. Service Provided\* (?) Agency Moving and Relocation Services Term for Off-Cycle Only \* N/A Agenda Item Submitted For: (?) ✓ Information Only (Total NTE Amount is Less than \$100,000.00) Board Approval (Total NTE Amount is \$100,000.00+) 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 Harris County Department of Education Tag-On CSD #17/019JN-01 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) Yes ○ No Unknown Please provide the HUB status HUB - State.

Contract NTE* (?) \$70,000.00
Rate(s)/Rate(s) Description Varies
Unit(s) Served* 1124, 1899
G/L Code(s)* 571000
Current Fiscal Year Purchase Order Number* CT141483
Contract Requestor* Sarah Harper
Contract Owner* Todd McCorquodale
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*   Yes  No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
Yes      No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Emiliar in the control of the contro
Is the contract being renewed for next fiscal year with this Contractor?* (?)   Yes No
Renewal Information for Next Fiscal Year

Budget Units and Amount	s Charged to e	ach Budget U	Jnit
Budget Unit Number*	Amount Charged \$ 65,000.00	d to Unit*	Expense/GL Code No.* 571000
Budget Manager* Brown, Erica		Secondary Budg Campbell, Ricard	
Budget Unit Number* 1124	Amount Chargeo \$ 5,000.00	d to Unit <sup>*</sup>	Expense/GL Code No.* 571000
Budget Manager* Brown, Erica		Secondary Budg Campbell, Ricard	
Fiscal Year* (?) 2023		Amount* (?) \$ 70,000.00	
Next Fiscal Year Not to Exceed An	nount for Master Poo	oled Contracts	
Contract Funding Source* General Revenue (GR)			
Contract Content Change	S	ra articulara nomen de como como como como como como como com	<b>○</b>
Are there any required changes to ○ Yes  No	the contract langua	age?* (?)	
Will the scope of the Services cha	nge?*		
Is the payment deadline different to Yes   No	han net (45)?*		
Are there any changes in the Perfo	ormance Targets?*		
Are there any changes to the Subr	nission deadlines fo	or notes or suppo	rting documentation?*
File Upload (?)			
Contract Owner			<u>~</u>
Contract Owner* (?)			
Todd McCorquodale			
Budget Manager Approva	l(s)		<b>○</b>

Approved by	
Ehica Bhown	
Contract Owner Approval	
Approved by	
Todd McCorquodale	
Contracts Approval	
Approve*  • Yes	
No, reject entire submission	
Return for correction	
Approved by *	
	Approval Date*
Belinda Stude	5/11/2022

HARRIS CENTER for

Mental Health and IDD	
Current Fiscal Year Contract Information	
Current Fiscal Year 2022	
Contract ID#* 2021-0105	
Contractor Name*	
SHI Government Solutions	
Service Provided * (?)	
EnergyCap Management Software for all utilities.	
Renewal Term Start Date *	Renewal Term End Date*
9/1/2022	8/31/2023
Torm for Off Cycle Only (For Reference Only)	
Term for Off-Cycle Only (For Reference Only)	
Ada Nama Oa haritta d E	
Agenda Item Submitted For: (?)	000000
<ul> <li>✓ Information Only (Total NTE Amount is Less than \$100</li> <li>☐ Board Approval (Total NTE Amount is \$100,000.00+)</li> </ul>	,,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
	✓ Tag-On
Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	✓ Other Tag-On to BuyBoard Cooperative Purchasing Contract ID#579-19
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	
Pooled Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busine	ess (HUB) (?)
Yes	
⊖ No	
Unknown	

Please provide the HUB status HUB - State.
Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 4,801.00
Rate(s)/Rate(s) Description Annual license fee \$2,448.00
Unit(s) Served* 1124
G/L Code(s)* 551002
Current Fiscal Year Purchase Order Number* CT141194
Contract Requestor* Sarah Harper
Contract Owner* Todd McCorquodale
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
Were Services delivered as specified in the contract?*
Did Contractor perform duties in a manner consistent with standards of the profession?*  ■ Yes ○ No
Did Contractor adhere to the contracted schedule?* (?)  ● Yes ○ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
Yes      No
Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes • No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination

Is the contract being renewed for next fiscal year with this Contractor?* (?)					
Yes ○ No  Renewal Information for Next Fiscal Year  △					
Renewal Information for	vext Fiscal Yea	U.			
Budget Units and Amoun	ts Charged to ε	each Budget	Unit		
Budget Unit Number*	Amount Charge	d to Unit*	Expense/GL Code No.*		
1124	\$ 5,500.00		551002		
Budget Manager* Brown, Erica		Secondary Bud Campbell, Ricar			
And the state of t					
Fiscal Year* (?)		Amount* (?)			
2023		\$ 5,500.00			
Next Fiscal Year Not to Exceed A	mount for Master Po	oled Contracts			
Contract Funding Source*					
General Revenue (GR)					
Contract Content Change			Frankling of the State of the S	0	
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)?*					
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		ara wallari arang majakan		0	
Contract Owner* (?) Please Select Contract Owner					
Todd McCorquodale					
Budget Manager Approval(s)					

Approved by	
Erica Brown	
Contract Owner Approval	
Approved by	
Todd McCorquodale	
Todd McCorquodalo	
Todd McCorquodale  Contracts Approval	
Contracts Approval	
Contracts Approval	
Contracts Approval  Approve*  Yes	
Contracts Approval  Approve*  Yes  No, reject entire submission Return for correction	
Contracts Approval  Approve*  Yes  No, reject entire submission  Return for correction	Approval Date *
Contracts Approval  Approve*  Yes  No, reject entire submission	Approval Date * 5/24/2022

HARRIS CENTER for

Mental Health and IDD					
Current Fiscal Year Contract Information					
Current Fiscal Year					
2022					
Contract ID#*					
7603					
Contractor Name*					
Autoclear, LLC					
Service Provided * (?)					
Security X-Ray Screening Equipment Order and Mainten	ance Service.				
Renewal Term Start Date*	Renewal Term End Date*				
8/18/2022	8/18/2023				
Term for Off-Cycle Only (For Reference Only)					
, , , , , , , , , , , , , , , , , , , ,					
Agenda Item Submitted For: (?)					
☑ Information Only (Total NTE Amount is Less than \$100	0,000,00)				
Board Approval (Total NTE Amount is \$100,000.00+)					
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 Maintenance Agreement				
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				
	Other				
Vendor/Contractor a Historically Underutilized Busine	ess (HUB) (?)				
○ Yes					
No					
O Unknown					

	Contract NTE (Old Text Field For Reference) (?)
	Contract NTE* (?) \$ 0.00
	Rate(s)/Rate(s) Description Vary.
	Unit(s) Served* 1126
	G/L Code(s)* 551000
	Current Fiscal Year Purchase Order Number* N/A
	Contract Requestor* Patricia Singh
	Contract Owner* Kim Kornmayer
	File Upload (?)
-	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year? ★ ○ Yes ● No
	Were Services delivered as specified in the contract?*  ● Yes ○ No
	Did Contractor perform duties in a manner consistent with standards of the profession?*   No
	Did Contractor adhere to the contracted schedule?* (?)  ● Yes ○ No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  ■ Yes □ No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? $^{\star}$ (?)
	● Yes ○ No  Did Contractor render services consistent with Agency policy and procedures?* (?)
	Yes      No
	Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes O No
	Renewal Determination
	Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes O No

# Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 9206 553001 \$ 4,900.00 **Budget Manager\*** Secondary Budget Manager\* Oshman, Jodel Kornmayer, Kimberly Fiscal Year\* (?) Amount\* (?) 2023 \$ 4,900.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* General Revenue (GR) **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\* (?) Please Select Contract Owner Kim Kornmayer Budget Manager Approval(s) Approved by Todel Oshman

Contract Owner Approval	
Approved by	
KIN KOPNMAYEP	
Contracts Assessed	
Contracts Approval	
Approve*	
<ul><li>Yes</li></ul>	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Approved by*  Shaskyia Behn	Approval Date* 5/20/2022

HARRIS CENTER for

Mental Health and IDD					
Current Fiscal Year Contract Information					
Current Fiscal Year					
2022					
Contract ID#* 7860					
Contractor Name* HOUSTON RECOVERY CENTER, LGC					
Service Provided* (?) HOUSTON RECOVERY CENTER WILL PROVIDE OPIOID PREVENTION AND NARCAN ADMINISTRATION TRAINING FOR AGENCY'S SUDOP, CCSI, CCA AND BHRT PROGRAM STAFF.					
Term for Off-Cycle Only* N/A.					
Agenda Item Submitted For: * (?)  Information Only (Total NTE Amount is Less than \$100  Board Approval (Total NTE Amount is \$100,000.00+)  Grant Proposal  Revenue  SOW-Change Order-Amendment#  Other	0,000.00)				
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 TRAINING CONTRACT.				
Contract Description / Type *					
☐ Personal/Professional Services	Consultant				
Consumer Driven Contract	□ New Contract/Agreement				
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> </ul>				
Affiliation or Preceptor	Service/Maintenance				
BAA/DUA	☐ IT/Software License Agreement				
Pooled Contract	Lease				
Renewal of Existing Contract	Other				
Vendor/Contractor a Historically Underutilized Busine	ess (HUB)*(?)				
Yes					
No					
Unknown					

Please provide an explanation N/A.
Contract NTE* (?) \$2,000.00
Rate(s)/Rate(s) Description \$1000.00 PER TRAINING. TWO (2) TRAININGS ANNUALLY.
Unit(s) Served* 9263
G/L Code(s)* 549005
Current Fiscal Year Purchase Order Number* CT140792
Contract Requestor* Patricia Singh
Contract Owner* Kim Kornmayer
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
Were Services delivered as specified in the contract?*
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes O No
Renewal Determination

Kenewai illioimalion i	or Next Fiscal Year	Ć
	unts Charged to each Budge	
Budget Unit Number* 9263	Amount Charged to Unit* \$ 2,000.00	Expense/GL Code No.* 549005
Budget Manager*	Secondary B	udget Manager*
Oshman, Jodel	Macleod, Ann	
Fiscal Year* (?)	Amount* (?)	
2023	\$ 2,000.00	
Contract Funding Source*		
Private Grant		
Contract Content Char  Are there any required change	es to the contract language?* (?)	<u></u>
● Yes ○ No		
Please Explain*		
Add the following programs to th Substance Use Recovery Service		
(Detox)		
(Detox) The Navigation Center: Harris C	enter Support Team	
(Detox) The Navigation Center: Harris C Will the scope of the Services	enter Support Team	
(Detox) The Navigation Center: Harris C Will the scope of the Services  Yes No	enter Support Team change?*	
(Detox) The Navigation Center: Harris C Will the scope of the Services Yes No Is the payment deadline difference	enter Support Team change?*	
(Detox) The Navigation Center: Harris C Will the scope of the Services Yes No Is the payment deadline difference Yes No	enter Support Team change?* ent than net (45)?*	
(Detox) The Navigation Center: Harris C Will the scope of the Services Yes No Is the payment deadline difference Yes No Are there any changes in the F	enter Support Team change?* ent than net (45)?*	
(Detox) The Navigation Center: Harris C Will the scope of the Services Yes No Is the payment deadline differed Yes No Are there any changes in the F Yes No	enter Support Team  change?*  ent than net (45)?*  Performance Targets?*	pporting documentation?*
(Detox) The Navigation Center: Harris C Will the scope of the Services Yes No Is the payment deadline differed Yes No Are there any changes in the F Yes No Are there any changes to the S	enter Support Team change?* ent than net (45)?*	oporting documentation?*
(Detox) The Navigation Center: Harris C Will the scope of the Services Yes No Is the payment deadline differed Yes No Are there any changes in the F Yes No Are there any changes to the S Yes No	enter Support Team  change?*  ent than net (45)?*  Performance Targets?*	pporting documentation?*
(Detox) The Navigation Center: Harris C Will the scope of the Services Yes No Is the payment deadline differed Yes No Are there any changes in the F Yes No Are there any changes to the S Yes No File Upload (?)	enter Support Team  change?*  ent than net (45)?*  Performance Targets?*	oporting documentation?*
(Detox) The Navigation Center: Harris C Will the scope of the Services Yes No Is the payment deadline differed Yes No Are there any changes in the F Yes No	enter Support Team  change?*  ent than net (45)?*  Performance Targets?*	oporting documentation?*

Budget Manager Approval(s)	<u> </u>
Approved by	
Todel Oshman	
Contract Owner Approval	<u> </u>
Approved by	
Kim KOPNMAYEP	
1 - 1 -1 1	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/3/2022

10/0	HARRIS CENTER
3:5	HARRIS
	WALL BEING BRIDE
Mental	Health and IDD

Mental Health and IDD	
Current Fiscal Year Contract Informatio	n 🔿
Current Fiscal Year	
2022	
Contract ID#*	
7848	
Contractor Name*	
X-Ray Mobile Texas, Inc.	
Service Provided * (?)	
Mobile X-Ray Services.	
Renewal Term Start Date *	Renewal Term End Date *
9/1/2022	8/31/2023
	0/01/2020
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)	200,000
<ul> <li>Information Only (Total NTE Amount is Less than \$10</li> <li>Board Approval (Total NTE Amount is \$100,000.00+)</li> </ul>	
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
	☐ Tag-On ☐ Consumer Driven
Not Applicable (If there are no funds required)	Other
2000 4 6 6	
Contract Description / Type	
<ul> <li>☐ Personal/Professional Services</li> <li>☐ Consumer Driven Contract</li> </ul>	☐ Consultant
Memorandum of Understanding	<ul><li>New Contract/Agreement</li><li>Amendment to Existing Contract</li></ul>
Affiliation or Preceptor	☐ Service/Maintenance
□ BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busin	ness (HUB) (?)
O Yes	
No     Halmann	
Unknown	

Contract NTE (Old Text Field For Reference) (?)
Contract NTE * (?) \$ 9,999.99
Rate(s)/Rate(s) Description  Total cost of x-ray: \$150.00; Cost of x-ray interpretation: \$0.00; stat fee: \$25.00; afterhours/weekend/holiday fee: \$50.00; Set-up fee per procedure: \$0.00.
Unit(s) Served* 9205, 9209 and 9403
G/L Code(s)* 543031
Current Fiscal Year Purchase Order Number* CT1141325
Contract Requestor* Patricia Singh
Contract Owner* Kim Kornmayer
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Solution Yes   No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
Yes O No Maintained legally required standards for certification, licensure, and/or training?* (?)
Yes ○ No  Renewal Determination

Renewal Information f	or Next Fiscal Year	
Budget Units and Amo	ounts Charged to each Budge	et Unit
Budget Unit Number* 0205	Amount Charged to Unit* \$ 6,999.99	Expense/GL Code No.* 543031
Budget Manager* Oshman, Jodel	Secondary E Kornmayer, K	udget Manager* imberly
Budget Unit Number* 0209	Amount Charged to Unit* \$ 1,000.00	Expense/GL Code No.* 593031
Budget Manager* Oshman, Jodel	Secondary E Kornmayer, K	udget Manager* imberly
Budget Unit Number* 9403	Amount Charged to Unit* \$ 500.00	Expense/GL Code No.* 543031
Budget Manager*		udget Manager*
Ramirez, Priscilla	Oshman, Jod	el
Fiscal Year* (?) 2023	Amount* (?) \$ 8,499.99	
Fiscal Year* (?) 2023  Next Fiscal Year Not to Excee  Contract Funding Source*  General Revenue (GR)  Contract Content Cha	Amount*(?) \$ 8,499.99  and Amount for Master Pooled Contracts  inges  es to the contract language?*(?)	
Fiscal Year* (?) 2023  Next Fiscal Year Not to Excee  Contract Funding Source*  General Revenue (GR)  Contract Content Cha  Are there any required chang  Yes  No  Vill the scope of the Services	Amount*(?) \$ 8,499.99  and Amount for Master Pooled Contracts  anges  es to the contract language?*(?)  s change?*	
Siscal Year* (?)  1023  Ilext Fiscal Year Not to Excee  Contract Funding Source*  General Revenue (GR)  Contract Content Challare there any required chang  Yes No  Vill the scope of the Services  Yes No  s the payment deadline differ	Amount*(?) \$ 8,499.99  and Amount for Master Pooled Contracts  anges  es to the contract language?*(?)  s change?*  rent than net (45)?*	

Contract Owner* (?) Please Select Contract Owner Kim Kornmayer  Budget Manager Approval(s)	<ul><li>⊙</li><li></li><li></li><li></li><li></li><li></li><!--</th--></ul>
Approved by	Approved by
Todel Oshman	Todel Oshman
Contract Owner Approval  Approved by  Fin FORNMAYER	<b>○</b>
Contracts Approval	
<ul><li>Yes</li><li>No, reject entire submission</li><li>Return for correction</li></ul>	
Approved by *	*
Shaskyia Behn	Approval Date* 5/20/2022

6	0	lu.		
K.	B	IA	RR	IS
	Di	i oh	VIII	R .
	TEXA DE			

OO CENTER for Mental Health and IDD	
Current Fiscal Year Contract Information	n 🖒
Current Fiscal Year	
2022	
Contract ID#*	
6781	
0701	
Contractor Name*	
P-Therapy Services	
Service Provided * (?)	
Speech/Language Therapy Services Occupational/Physical Therapy Services	
Occupational/Filysical Therapy Services	
Renewal Term Start Date *	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
Term for On-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)	
Information Only (Total NTE Amount is Less than \$10	0,000.00)
Board Approval (Total NTE Amount is \$100,000.00+)	
☐ 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 Interlocal	☐ Tag-On
Not Applicable (If there are no funds required)	<ul> <li>✓ Consumer Driven</li> <li>✓ Other Consultant Services</li> </ul>
Not Applicable (il tilele are ilo funus required)	Other Consultant Services
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
Vendor/Contractor a Historically Underutilized Busin	ess (HUB) (?)
⊚ Yes	
No	
Unknown	

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 25,000.00
Rate(s)/Rate(s) Description
Unit(s) Served* 3360
G/L Code(s)* 543012
Current Fiscal Year Purchase Order Number* CT141320
Contract Requestor* Margo Childs
Contract Owner* Tiffanie Williams-Brooks
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  O Yes   No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
<ul> <li>Yes ○ No</li> <li>Did Contractor render services consistent with Agency policy and procedures?* (?)</li> <li>Yes ○ No</li> </ul>
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes • No

Renewal Information for Next Fiscal Year		
Budget Units and Amounts Charged to each Budget Unit		
Budget Unit Number* 3360	Amount Charged to Unit* \$ 25,000.00	Expense/GL Code No.* 543012
Budget Manager* Adams-Austin, Mamie	Secondary Downey, M	Budget Manager*
Fiscal Year* (?) 2023	Amount* (	?)
Next Fiscal Year Not to Exceed Am \$25,000.00	ount for Master Pooled Contra	cts
Contract Funding Source * State		
Contract Content Changes	5	0
Are there any required changes to  Yes No	the contract language?* (?)	
Please Explain* Rate(s)/Rate(s) Description: \$86.01/45 minutes - Speech/Languag \$97.86/45 minutes - Occupational/Ph		
Will the scope of the Services char	ge?*	
Is the payment deadline different the Yes No	nan net (45)?*	
Are there any changes in the Perfo	rmance Targets?*	
Are there any changes to the Subm	nission deadlines for notes or s	supporting documentation?*
File Upload (?)		
Contract Owner		
Contract Owner* (?) Please Select Contract Owner		
Tiffanie Williams-Brooks  Budget Manager Approval	(s)	

Mamie Adams-Austin	
Contract Owner Approval	
Approved by	
Tiffanie Williams-Brooks	
Contracts Approval	
	and the second of the second o
Approve*	
Yes	
No, reject entire submission	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/25/2022



## Renewal Evaluation

Mental Health and IDD	
Current Fiscal Year Contract Informatio	n de la companya de
Current Fiscal Year	
2022	
Contract ID#*	
7082	
Contractor Name *	
BakerRipley	
Service Provided* (?)	
Early Head Start and Head Start Program	
Renewal Term Start Date *	Renewal Term End Date *
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
NA	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$10	(00.000,00
☐ Board Approval (Total NTE Amount is \$100,000.00+)	
☐ 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
Contract Description / Type	
Personal/Professional Services	Consultant
Consumer Driven Contract	
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> </ul>
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	☐ Other
Vendor/Contractor a Historically Underutilized Busin	ess (HUB) (?)
○ Yes	
○ No	
<ul><li>Unknown</li></ul>	

Contract NTE (Old Text Field For Reference) (?) 00
Contract NTE* (?) \$ 0.00
Rate(s)/Rate(s) Description
Unit(s) Served*
G/L Code(s)* 00
Current Fiscal Year Purchase Order Number* NA
Contract Requestor* Margo Childs
Contract Owner* Tiffanie Williams-Brooks
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes  ○ No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*    Yes   No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  ● Yes ○ No

Renewal Information for No	ext Fiscal Year		0
Budget Units and Amounts	Charged to each	Budget Un	it
Budget Unit Number* 3360	Amount Charged to U	nit*	Expense/GL Code No.*
Budget Manager* Adams-Austin, Mamie		ondary Budget ney, Michael	Manager*
Fiscal Year* (?) 2023	Amo \$ 0.0	ount* (?) 00	
Next Fiscal Year Not to Exceed Amo	ount for Master Pooled C	Contracts	
Contract Funding Source* State			
Contract Content Changes	and the second s	on which the distribution of	0
Are there any required changes to t ○ Yes   No	he contract language?*	(?)	
Will the scope of the Services chan  ○ Yes   ○ No	ge?*		
Is the payment deadline different th ○ Yes   No	an net (45)?*		ý.
Are there any changes in the Perfor	mance Targets?*		
Are there any changes to the Subm  Yes  No	ission deadlines for note	es or supportin	ng documentation?*
File Upload (?)			
Contract Owner		AMILIA III AAAA AAAA AAAA AAAA AAAA	<u></u>
Contract Owner* (?) Please Select Contract Owner			
Tiffanie Williams-Brooks Budget Manager Approval	(s)		<u> </u>
Approved by		Trond Salarina and Salarina (Assert Assert	
Mamie Adams-Austin			



HARRIS CENTER 100

Current Fiscal Year Contract Information	•
Current Fiscal Year 2022	
Contract ID#* 5751	
Contractor Name* Gulf Coast Community Services Association	
Service Provided* (?) ECI Head Start Services	
Renewal Term Start Date * 9/1/2022	Renewal Term End Date* 8/31/2023
Term for Off-Cycle Only (For Reference Only) NA	
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100 Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# 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
Contract Description / Type	
<ul> <li>Personal/Professional Services</li> <li>Consumer Driven Contract</li> <li>✓ Memorandum of Understanding</li> <li>Affiliation or Preceptor</li> <li>BAA/DUA</li> <li>Pooled Contract</li> <li>Renewal of Existing Contract</li> </ul>	Consultant  New Contract/Agreement  Amendment to Existing Contract  Service/Maintenance  IT/Software License Agreement  Lease  Other
Vendor/Contractor a Historically Underutilized Busine  Yes  No  Unknown	ss (HUB) (?)

Contract NTE (Old Text Field For Reference) (?) 00
Contract NTE* (?) \$ 0.00
Rate(s)/Rate(s) Description 00
Unit(s) Served* 00
G/L Code(s)* 000000
Current Fiscal Year Purchase Order Number*
Contract Requestor* Margo Childs
Contract Owner* Tiffanie Williams-Brooks
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes   ○ No
Were Services delivered as specified in the contract?*
Did Contractor perform duties in a manner consistent with standards of the profession?*   No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  9 Yes  No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
● Yes ○ No
Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes O No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes O No

Renewal Information for	r Next Fiscal Year	<u> </u>
Budget Units and Amo	unts Charged to each Budg	get Unit
Budget Unit Number*	Amount Charged to Unit* \$ 0.00	Expense/GL Code No.* n/a
Budget Manager* Adams-Austin, Mamie	Secondary Downey, Mi	Budget Manager* chael
Fiscal Year* (?) 2023	Amount* (3	?)
Next Fiscal Year Not to Exceed	I Amount for Master Pooled Contrac	ts
Contract Funding Source* State		
Contract Content Char	ges	Ó
Are there any required change	s to the contract language?* (?)	
Will the scope of the Services  Yes No	change?*	
Is the payment deadline difference of Yes  No	ent than net (45)?*	
Are there any changes in the F	Performance Targets?*	
Are there any changes to the S	Submission deadlines for notes or s	upporting documentation?*
File Upload (?)		
Contract Owner		Ō
Contract Owner* (?) Please Select Contract Owner		
Tiffanie Williams-Brooks  Budget Manager Appro	oval(s)	
Approved by		
Mamie Adams-Austin		

Contract Owner Approval	
Approved by	
Tiffanic Williams-Brooks	
Contracts Approval	
Approve*	
Yes	
No, reject entire submission	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/26/2022

HARRIS CENTER 10

Current Fiscal Year Contract Information	n 📀
Current Fiscal Year 2022	
Contract ID#* 6936	
Contractor Name * Tracy Smith	
Service Provided* (?) The provider will provide mental health and IDD Respite and Personal Assistance/Habilitation services (CFC PAS/HAD	
Renewal Term Start Date * 9/1/2022	Renewal Term End Date* 8/31/2023
Term for Off-Cycle Only (For Reference Only) N/A	0/31/2023
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100  Board Approval (Total NTE Amount is \$100,000.00+)  Grant Proposal  Revenue  SOW-Change Order-Amendment#  Other	0,000.00)
Procurement Method(s)*	
Check all that Apply	
☐ Competitive Bid	☐ Competitive Proposal
<ul> <li>Request for Proposal</li> </ul>	☐ Sole Source
Request for Application	Request for Qualification
Request for Quote	☐ Tag-On
Interlocal	
Not Applicable (If there are no funds required)	Other
Contract Description / Type	
Personal/Professional Services	Consultant
Consumer Driven Contract	□ New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
<ul> <li>Affiliation or Preceptor</li> </ul>	☐ Service/Maintenance
☐ BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
	Other
Vendor/Contractor a Historically Underutilized Busine	ess (HUB) (?)
○ Yes	
○ No	
<ul><li>Unknown</li></ul>	

Contract NTE (Old Text Field For Reference) (?) 19,890
Contract NTE* (?) \$ 22,100.00
Rate(s)/Rate(s) Description  \$9/hr for LON 1 & 5; \$10/hr for LON 8 & 6 \$9/hr for Respite
Unit(s) Served* 3585
G/L Code(s)* 543005 - Respite 543009 - CFC/PAS HAB
Current Fiscal Year Purchase Order Number* CT139704
Contract Requestor* Patrina Anthony
Contract Owner* Lily Pan
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes  ○ No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  ■ Yes □ No
Renewal Determination

### Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 3585 \$ 6,000.00 543005 Budget Manager\* Secondary Budget Manager\* Adams-Austin, Mamie Downey, Michael Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 3585 \$ 13,000.00 543009 Budget Manager\* Secondary Budget Manager\* Adams-Austin, Mamie Downey, Michael Fiscal Year\* (?) Amount\* (?) 2023 \$ 19,000.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* State **Contract Content Changes** Are there any required changes to the contract language?\* (?) Yes No Please Explain\* \$10/hr for CFC \$10/hr for Respite Will the scope of the Services change?\* Yes No Is the payment deadline different than net (45)?\* O Yes @ No Are there any changes in the Performance Targets?\* Are there any changes to the Submission deadlines for notes or supporting documentation?\* Yes No File Upload (?) **Contract Owner**

Contract Owner* (?)	
Please Select Contract Owner	
Mike Downey	
Budget Manager Approval(s)	
Approved by	
Mamie Adams-Austin	
Contract Owner Approval	0
Approved by	
Michael D Downey	
Contracts Approval	
Approve*	
<ul><li>Yes</li></ul>	
No, reject entire submission	
<ul> <li>Return for correction</li> </ul>	
Approved by *	
	Approval Date*
Shaskyia Behn	5/17/2022



Mental Health and IDD	
Current Fiscal Year Contract Information	n e
Current Fiscal Year	
2022	
C	
Contract ID#*	
7244	
Contractor Name*	
Nixon Home Care, Inc. d/b/a Nixon Adult Day Center	
Service Provided* (?)	
Site-Based Day Habilitation and Respite	
Renewal Term Start Date*	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
N/A	
Agenda Item Submitted For: (?)	
	0.000.00
<ul> <li>✓ Information Only (Total NTE Amount is Less than \$10</li> <li>✓ Board Approval (Total NTE Amount is \$100,000.00+)</li> </ul>	0,000.00)
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
Contract Description / Type	
	Consultant
Consumer Driven Contract	New Contract/Agreement
<ul> <li>Memorandum of Understanding</li> <li>Affiliation or Preceptor</li> </ul>	<ul> <li>Amendment to Existing Contract</li> <li>Service/Maintenance</li> </ul>
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busine	ess (HUB) (?)
○ Yes	
No     Halanaum	
Unknown	

Contract NTE (Old Text Field For Reference) (?) \$2,765,000.00
Contract NTE* (?) \$ 2,765,000.00
Rate(s)/Rate(s) Description \$25.95 per day for day habilitation; \$12.00 per hour for respite
Unit(s) Served* 3585
G/L Code(s)* 543008, 543005
Current Fiscal Year Purchase Order Number* CT141370
Contract Requestor* Lily Pan
Contract Owner*  Lance Britt
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes  ○ No
Were Services delivered as specified in the contract?*  ⊚ Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  ● Yes ○ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ■ Yes □ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination

Renewal Information fo	or Next Fiscal Year	(
Budget Units and Amo	unts Charged to each Budge	t Unit
Budget Unit Number* 3585	Amount Charged to Unit* \$ 72,000.00	Expense/GL Code No.* 543008
Budget Manager* Adams-Austin, Mamie	Secondary Bu Downey, Micha	udget Manager* ael
Budget Unit Number*	Amount Charged to Unit* \$ 10,000.00	Expense/GL Code No.* 543005
Budget Manager* Adams-Austin, Mamie	Secondary Bu Downey, Micha	udget Manager* ael
Fiscal Year* (?)	Amount* (?)	
NTE \$2,765.000.00  Contract Funding Source*  State	\$ 82,000.00  d Amount for Master Pooled Contracts	
Next Fiscal Year Not to Exceed NTE \$2,765.000.00 Contract Funding Source* State Contract Content Char	d Amount for Master Pooled Contracts	
Next Fiscal Year Not to Exceed NTE \$2,765.000.00  Contract Funding Source*  State  Contract Content Char  Are there any required change  Yes  No  Will the scope of the Services	d Amount for Master Pooled Contracts  nges es to the contract language?* (?)	
Next Fiscal Year Not to Exceed NTE \$2,765.000.00  Contract Funding Source*  State  Contract Content Char  Are there any required change  Yes  No  Will the scope of the Services  Yes  No	d Amount for Master Pooled Contracts  nges es to the contract language?* (?)  change?*	
Next Fiscal Year Not to Exceed NTE \$2,765.000.00  Contract Funding Source*  State  Contract Content Char  Are there any required change  Yes No  Will the scope of the Services  Yes No	d Amount for Master Pooled Contracts  nges es to the contract language?* (?)  change?*	
Next Fiscal Year Not to Exceed NTE \$2,765.000.00  Contract Funding Source*  State  Contract Content Character Character Content Character Charac	d Amount for Master Pooled Contracts  Inges es to the contract language?* (?)  change?*  ent than net (45)?*	
Next Fiscal Year Not to Exceed NTE \$2,765.000.00  Contract Funding Source*  State  Contract Content Char  Are there any required change  Yes No  Will the scope of the Services  Yes No  Is the payment deadline differed  Yes No  Are there any changes in the Form Yes No  Are there any changes to the Services	d Amount for Master Pooled Contracts  Inges es to the contract language?* (?)  change?*  ent than net (45)?*	porting documentation?*
Next Fiscal Year Not to Exceed NTE \$2,765.000.00  Contract Funding Source*  State  Contract Content Char  Are there any required change  Yes No  Will the scope of the Services  Yes No  Is the payment deadline differed  Yes No  Are there any changes in the Form Yes No  Are there any changes to the Services  Yes No  No  Are there any changes to the Services  Yes No  No  Are there any changes to the Services  Yes No  No  Are there any changes to the Services	d Amount for Master Pooled Contracts  Inges  es to the contract language?*(?)  change?*  ent than net (45)?*  Performance Targets?*  Submission deadlines for notes or sup	
Next Fiscal Year Not to Exceed NTE \$2,765.000.00  Contract Funding Source*  State  Contract Content Char  Are there any required change  Yes No  Will the scope of the Services  Yes No  Is the payment deadline differed  Yes No  Are there any changes in the Form Yes No  Are there any changes to the Services  Yes No  No  Are there any changes to the Services  Yes No  No  Are there any changes to the Services  Yes No  No  Are there any changes to the Services	d Amount for Master Pooled Contracts  Inges  es to the contract language?*(?)  change?*  ent than net (45)?*  Performance Targets?*  Submission deadlines for notes or sup	porting documentation?*
Next Fiscal Year Not to Exceed NTE \$2,765.000.00  Contract Funding Source*  State  Contract Content Char  Are there any required change  Yes No  Will the scope of the Services  Yes No  Is the payment deadline differed  Yes No  Are there any changes in the Form of the Services  Yes No  No  Are there any changes in the Form of the Services	d Amount for Master Pooled Contracts  Inges  es to the contract language?*(?)  change?*  ent than net (45)?*  Performance Targets?*  Submission deadlines for notes or sup	

Budget Manager Approval(s)	Ó
Approved by	
Mamie Adams-Austin	
Contract Owner Approval	
Approved by	
Lance Britt	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
<ul> <li>Return for correction</li> </ul>	
Approved by*	
	Approval Date*
Shaskyia Behn	5/31/2022



## HARRIS Annual Renewal Evaluation

Mental Health and IDD	Caroline folia (C. 2) o Berni C. Oshimir G. Colonia di Albaria (C. 7) o Colonia
Current Fiscal Year Contract Information	
Current Fiscal Year	
2022	
Contract ID#*	
2021-0215	
Contractor Name*	
P-Emergency Evacuation Services	
Service Provided* (?)	
Emergency Evacuation Lodging Services.	
Renewal Term Start Date*	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
termines on cycle city (certification city)	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$10	0.000.00)
Board Approval (Total NTE Amount is \$100,000.00+)	0,000.00)
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	<ul> <li>Competitive Proposal</li> </ul>
<ul> <li>Request for Proposal</li> </ul>	☐ 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
Contract Description / Type	
□ Personal/Professional Services	☐ Consultant
Consumer Driven Contract	□ New Contract/Agreement
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> </ul>
Affiliation or Preceptor	☐ Service/Maintenance
☐ BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busin	ess (HUB) (?)
○ Yes	
No	
Unknown	

	Contract NTE (Old Text Field For Reference) (?)
	Contract NTE* (?) \$ 45,150.00
	Rate(s)/Rate(s) Description Vary.
	Unit(s) Served* 3390, 9210, 9810, 9247, 9403, 9407, 9261, 9264
	G/L Code(s)* 595031
	Current Fiscal Year Purchase Order Number* CT141501
	Contract Requestor* Eggla MacKinney
	Contract Owner* Anthony Robinson
	File Upload (?)
-	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
	Were Services delivered as specified in the contract?*
	Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
	Did Contractor adhere to the contracted schedule?* (?)  ● Yes ○ No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? $^{\star}$ (?)
	<ul> <li>● Yes ○ No</li> <li>Did Contractor render services consistent with Agency policy and procedures?* (?)</li> </ul>
	<ul> <li>Yes O No</li> <li>Maintained legally required standards for certification, licensure, and/or training?* (?)</li> </ul>
Management of the Park	<ul><li>Yes ○ No</li><li>Renewal Determination</li></ul>
-	Is the contract being renewed for next fiscal year with this Contractor?* (?)
	@ Vee O Ne

9264 Budget Manager*	\$ 5,160.00	Secondary Bu	595031 dget Manager*	
Budget Unit Number*	Amount Charged	Territoria (1778) (1774)	Expense/GL Code No.*	
Budget Manager* Ramirez, Priscilla		Secondary Bu Oshman, Jode	dget Manager*	
Budget Unit Number* 9261	Amount Charged \$ 6,192.00	I to Unit*	Expense/GL Code No.* 595031	
Budget Manager* Ramirez, Priscilla		Secondary Bu Oshman, Jode	dget Manager*	
Budget Unit Number* 9407	Amount Charged \$ 2,064.00	I to Unit*	Expense/GL Code No.* 595031	
Budget Manager* Ramirez, Priscilla		Secondary Bu Oshman, Jode	dget Manager*	
Budget Unit Number* 9403	Amount Charged \$ 7,998.00	l to Unit*	Expense/GL Code No.* 595031	
Budget Manager* Oshman, Jodel		Secondary Bu Kornmayer, Kir	dget Manager* nberly	
Budget Unit Number* 9247	Amount Charged \$ 1,548.00	i to Unit*	Expense/GL Code No.* 595031	
Budget Manager* Oshman, Jodel		Secondary Bu Kornmayer, Kir	dget Manager* nberly	
Budget Unit Number* 9810	Amount Charged \$ 5,160.00	l to Unit*	Expense/GL Code No.* 595031	
Budget Manager* Oshman, Jodel		Secondary Bu Kornmayer, Kir	dget Manager* nberly	
Budget Unit Number* 9210	Amount Charged \$ 4,128.00	d to Unit*	Expense/GL Code No.* 595031	
Budget Manager* Adams-Austin, Mamie		Secondary Bu Downey, Micha	dget Manager* el	
3390	Amount Charged \$ 12,900.00	i to ome	Expense/GL Code No.* 595031	

Next Fiscal Year Not to Exceed Amount for 45150	Master Pooled Contracts
Contract Funding Source*	
General Revenue (GR)	
Contract Content Changes	
Are there any required changes to the contr	ract language?* (?)
○ Yes   • No	
Will the scope of the Services change?*	
⊖ Yes   ® No	
Is the payment deadline different than net (4	15)?*
○ Yes ◉ No	
Are there any changes in the Performance 1	argets?*
○ Yes ● No	
	eadlines for notes or supporting documentation?*
○ Yes ● No	
File Upload (?)	
Contract Owner	$\odot$
Contract Owner* (?)	
Please Select Contract Owner	
Please Select Contract Owner Anthony Robinson	
Please Select Contract Owner	<b>⊙</b>
Please Select Contract Owner Anthony Robinson	Approved by
Please Select Contract Owner Anthony Robinson  Budget Manager Approval(s)  Approved by	- 1944 - 1944 - Luc - 1945   19
Please Select Contract Owner Anthony Robinson Budget Manager Approval(s)	Approved by  Sodel Oshman
Please Select Contract Owner Anthony Robinson  Budget Manager Approval(s)  Approved by	- 1944 - 1944 - Luc - 1945   19
Please Select Contract Owner Anthony Robinson  Budget Manager Approval(s)  Approved by  Mamie Chlams-Chustin  Approved by	- 1944 - 1944 - Luc - 1945   19
Please Select Contract Owner Anthony Robinson  Budget Manager Approval(s)  Approved by  Manie Chams-Chusein	- 1944 - 1944 - Luc - 1945   19
Please Select Contract Owner Anthony Robinson  Budget Manager Approval(s)  Approved by  Chamic Chams-Chustin  Approved by  Priscilla CM. Ramiroz	- 1944 - 1944 - Luc - 1945   19
Please Select Contract Owner Anthony Robinson  Budget Manager Approval(s)  Approved by  Mamie Chlams-Chustin  Approved by	- 1944 - 1944 - Luc - 1945   19
Please Select Contract Owner Anthony Robinson  Budget Manager Approval(s)  Approved by  Chamic Chams-Chustin  Approved by  Priscilla CM. Ramiroz	- 1944 - 1944 - Luc - 1945   19
Please Select Contract Owner Anthony Robinson  Budget Manager Approval(s)  Approved by  Mamie Chlams-Chustin  Approved by  Priscilla ON. Ramirez  Contract Owner Approval  Approved by	- 1944 - 1944 - Luc - 1945   19
Please Select Contract Owner Anthony Robinson  Budget Manager Approval(s)  Approved by  Mamie Chlams-Chustin  Approved by  Priscitta CM. Ramiroz  Contract Owner Approval	- 1944 - 1944 - Luc - 1945   19
Please Select Contract Owner Anthony Robinson  Budget Manager Approval(s)  Approved by  Mamie Chlams-Chustin  Approved by  Priscilla ON. Ramirez  Contract Owner Approval  Approved by	- 1944 - 1944 - Luc - 1945   19

Approve\*

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

Approved by \*

Shaskyia Behn

Approval Date\*

5/27/2022



# ∰HARRIS CENTER FOR Annual Renewal Evaluation

Mental Health and 1170	
Current Fiscal Year Contract Information	
Current Fiscal Year	
2022	
Contract ID#*	
7514	
O	
Contractor Name*	
Thomas H. Mann	
Service Provided * (?)	
Psychological Services	
Renewal Term Start Date *	Renewal Term End Date*
9/1/2022	8/31/2023
T	
Term for Off-Cycle Only (For Reference Only)	
N/A	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$100)	0,000.00)
Board Approval (Total NTE Amount is \$100,000.00+)	
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
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
Vendor/Contractor a Historically Underutilized Busine	ess (HUB) (?)
○ Yes	
No	
Unknown	

	Contract NTE (Old Text Field For Reference) (?) \$12,000.00
	Contract NTE* (?) \$ 12,000.00
	Rate(s)/Rate(s) Description \$75,000.00
	Unit(s) Served* 3350,3579,3609,3611,3692
	G/L Code(s)* 543021
	Current Fiscal Year Purchase Order Number* CT141372
	Contract Requestor* Lily Pan
	Contract Owner* Lance Britt
	File Upload (?)
-	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes ● No
	Were Services delivered as specified in the contract?*  ⊚ Yes ○ No
	Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
	Did Contractor adhere to the contracted schedule?* (?)  ● Yes ○ No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
	● Yes ○ No
	Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
	Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
-	Renewal Determination
	Is the contract being renewed for next fiscal year with this Contractor?* (?)

udget Unit Number* 550	Amount Charged \$ 2,400.00	l to Unit*	Expense/GL Code No.* 543021
udget Manager* dams-Austin, Mamie		Secondary Bu	udget Manager* ael
udget Unit Number* 579	Amount Charged \$ 2,400.00	to Unit*	Expense/GL Code No.* 543021
udget Manager* dams-Austin, Mamie		Secondary Bu	udget Manager* nel
udget Unit Number* 609	Amount Charged \$ 2,400.00	to Unit*	Expense/GL Code No.* 543021
udget Manager* dams-Austin, Mamie		Secondary Bu	udget Manager* nel
udget Unit Number* 611	Amount Charged \$ 2,400.00	to Unit*	Expense/GL Code No.* 543021
udget Manager* dams-Austin, Mamie		Secondary Bu	udget Manager* ael
udget Unit Number* 692	Amount Charged \$ 2,400.00	to Unit*	Expense/GL Code No.* 543021
udget Manager* dams-Austin, Mamie		Secondary Bu Downey, Micha	udget Manager* ael
iscal Year* (?) 023		Amount* (?) \$ 12,000.00	
ext Fiscal Year Not to Excee	d Amount for Master Poo	led Contracts	
ontract Funding Source* ederal			
Contract Content Cha	nges		
re there any required chang	es to the contract langua	ge?* (?)	

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  Yes No	or notes or supporting documentation?*
File Upload (?)	
Contract Owner	<b>O</b>
Contract Owner* (?)	
Please Select Contract Owner  Lance Britt	
Budget Manager Approval(s)	
Approved by	
Mamie Adams-Austin	
Contract Owner Approval	Ó
Approved by	
Lance Britt	
Contracts Approval	
Approve*	
<ul><li>Yes</li></ul>	
<ul><li>No, reject entire submission</li><li>Return for correction</li></ul>	
Approved by *	
	Approval Date*
Shaskyia Behn	5/31/2022

## **HARRIS** Annual Renewal Evaluation

Mental Health and IDD	
Current Fiscal Year Contract Information	n 📀
Current Fiscal Year	
2022	
2022	
Contract ID#*	
6935	
Contractor Name *	
Annie Vu	
Service Provided * (?)	
Respite & Community First Choice (CFC)- Personal Assi	stance Services/Habilitation
(PAS/HAB)	
Renewal Term Start Date*	Renewal Term End Date *
9/1/2022	
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
NA	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$10	0 000 00)
Board Approval (Total NTE Amount is \$100,000.00+)	0,000.00)
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
Contract Description / Type	
Personal/Professional Services	☐ Consultant
Consumer Driven Contract	☐ New Contract/Agreement
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> </ul>
Affiliation or Preceptor	☐ Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busin	ess (HUB) (?)
○ Yes	
○ No	
<ul><li>Unknown</li></ul>	

	Contract NTE (Old Text Field For Reference) (?) \$21,258.00
	Contract NTE* (?) \$ 28,080.00
	Rate(s)/Rate(s) Description 00
	Unit(s) Served* 3585
	G/L Code(s)* 534005 \$7,960.00, 534009 \$20,120.00
	Current Fiscal Year Purchase Order Number* CT141413
	Contract Requestor* Patrina Anthony
	Contract Owner* Lily Pan
	File Upload (?)
-	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes  ○ No
	Were Services delivered as specified in the contract?*
	Did Contractor perform duties in a manner consistent with standards of the profession?*   No
	Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? $^{\star}$ (?)
	Yes \( \cap \) No Maintained legally required standards for certification, licensure, and/or training?* (?)
000000	Yes    No
The same of the sa	Renewal Determination  State contract being renewed for next fiscal year with this Contractor?* (?)
	Yes  No

# Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Expense/GL Code No.\* Budget Unit Number\* Amount Charged to Unit\* 3585 \$ 11,000.00 543005 Secondary Budget Manager\* Budget Manager\* Adams-Austin, Mamie Downey, Michael Amount Charged to Unit\* Expense/GL Code No.\* Budget Unit Number\* 3585 \$ 17,080.00 Budget Manager\* Secondary Budget Manager\* Adams-Austin, Mamie Downey, Michael Fiscal Year\* (?) Amount\* (?) 2023 \$ 28,080.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* State **Contract Content Changes** Are there any required changes to the contract language?\* (?) Yes No Please Explain\* Rate increase: \$10.00 per hour for Respite and CFC. 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\* (?) Please Select Contract Owner Mike Downey

Budget Manager Approval(s)	
Approved by	
Mamie Adams-Austin	
Contract Owner Approval	0
Approved by	
Michael D Donney	
Contracts Approval	
Approve*	
Yes	
No, reject entire submission	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/26/2022

# SCHARRIS Annual Renewal Evaluation

Mental Health and IDD	
9	
Current Fiscal Year Contract Information	n 📀
Current Fiscal Year	
2022	
Contract ID#*	
7393	
Contractor Name*	
Bloom Community	
Service Provided * (?)	
Provides Fitness Exercise Equipment to Consumers	
Renewal Term Start Date *	Renewal Term End Date *
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
N/A	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$10	00,000.00)
☐ Board Approval (Total NTE Amount is \$100,000.00+)	
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
<ul><li>☐ Interlocal</li><li>☑ Not Applicable (If there are no funds required)</li></ul>	Consumer Driven Other
Not Applicable (if there are no funds required)	Other
Contract Description / Type	
Personal/Professional Services	Consultant
Consumer Driven Contract	☐ New Contract/Agreement
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> </ul>
Affiliation or Preceptor	☐ Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busine	ess (HUB) (?)
○ Yes	
No	
Unknown	

Contract NTE (Old Text Field For Reference) (?) N/A
Contract NTE * (?) \$ 0.00
Rate(s)/Rate(s) Description
Unit(s) Served* N/A
G/L Code(s)* N/A
Current Fiscal Year Purchase Order Number* N/A
Contract Requestor* Margo Childs
Contract Owner*  Lance Britt
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Were Services delivered as specified in the contract?*  ■ Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)
<ul> <li>● Yes ○ No</li> <li>Were reports, billing and/or invoices submitted in a timely manner?* (?)</li> <li>○ Yes ● No</li> </ul>
Were reports, billing and/or invoices submitted in a timely manner?* (?)
Were reports, billing and/or invoices submitted in a timely manner?* (?)  Yes No  Please Explain*  Payment reimbursement are not required for services
Were reports, billing and/or invoices submitted in a timely manner?* (?)  Yes No  Please Explain*  Payment reimbursement are not required for services rendered under this MOU  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the
Were reports, billing and/or invoices submitted in a timely manner?* (?)  Yes No  Please Explain*  Payment reimbursement are not required for services rendered under this MOU  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
Were reports, billing and/or invoices submitted in a timely manner?* (?)  Yes No  Please Explain*  Payment reimbursement are not required for services rendered under this MOU  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  Yes No  Did Contractor render services consistent with Agency policy and procedures?* (?)

Renewal Determination			
Is the contract being renewed for next fiscal year with this Contractor?* (?)			
Renewal Information for Next Fiscal Year			
Budget Units and Amounts	s Charged to e	ach Budget U	nit
Budget Unit Number* 3350	Amount Charged	I to Unit <sup>*</sup>	Expense/GL Code No.*
Budget Manager* Adams-Austin, Mamie		Secondary Budge Downey, Michael	et Manager*
Fiscal Year* (?) 2023		Amount* (?) \$ 0.00	
Next Fiscal Year Not to Exceed Am	ount for Master Poo	oled Contracts	
Contract Funding Source*			
Contract Content Changes	S		
Are there any required changes to  Yes  No	the contract langua	ge <b>?*</b> (?)	
Will the scope of the Services chan	nge?*		
Is the payment deadline different the Yes  No	nan net (45)?*		
Are there any changes in the Perfo	rmance Targets?*		
Are there any changes to the Subm	nission deadlines fo	r notes or support	ing documentation?*
File Upload (?)			
Contract Owner			
Contract Owner* (?)			
Please Select Contract Owner  Janice Baines			
Budget Manager Approval	(s)		

Approved by	
Mamie Oddams-Odustin	
Contract Owner Approval	
Approved by	
Janice Baines	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Belinda Stude	6/9/2022



Current Fiscal Year Contract Information	
Current Fiscal Year	
2022	
Contract ID#*	
7125	
Contractor Name *	
Brandon D. Smith	
Service Provided * (?)	
CFC/Respite	
Renewal Term Start Date*	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
NA	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$100)	0,000.00)
■ Board Approval (Total NTE Amount is \$100,000.00+)	
□ 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	
□ Not Applicable (If there are no funds required)	Other
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 ■ Pooled Contract	☐ IT/Software License Agreement
Renewal of Existing Contract	☐ Lease ☐ Other
and the Entering Contract	- Suoi
Vendor/Contractor a Historically Underutilized Busine	ss (HUB) (?)
Yes	
O No	
<ul><li>Unknown</li></ul>	

Contract NTE (Old Text Field For Reference) (?) \$9,270.00
Contract NTE* (?) \$ 17,540.00
Rate(s)/Rate(s) Description
Unit(s) Served* 3585
G/L Code(s)* 543005 \$6,980.00, 543009 \$10,560.00
Current Fiscal Year Purchase Order Number* CT141414
Contract Requestor* Patrina Anthony
Contract Owner* Lily Pan
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes ● No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  © Yes   No
Did Contractor adhere to the contracted schedule?* (?)  • Yes O No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
● Yes ○ No  Did Contractor render services consistent with Agency policy and procedures?* (?)
● Yes ○ No  Maintained legally required standards for certification, licensure, and/or training?* (?)
● Yes ○ No  Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)

# Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 3585 \$ 5,000.00 543005 Secondary Budget Manager\* Budget Manager\* Downey, Michael Adams-Austin, Mamie Amount Charged to Unit\* Expense/GL Code No.\* Budget Unit Number\* \$ 5,000.00 543009 3585 Budget Manager\* Secondary Budget Manager\* Adams-Austin, Mamie Downey, Michael Fiscal Year\* (?) Amount\* (?) 2023 \$ 10,000.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* State Contract Content Changes Are there any required changes to the contract language?\* (?) Yes No Please Explain\* Rate increase: \$10.00 per hour for Respite and CFC. Will the scope of the Services change?\* O 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?\* O Yes @ No File Upload (?) **Contract Owner** Contract Owner\* (?) Please Select Contract Owner Mike Downey

Budget Manager Approval(s)	
Approved by	
Mamie Adams-Austin	
Contract Owner Approval	
Approved by	
Approved by  Michael D Donney	
Michael D Downey  Contracts Approval	
Michael D Downey	
Michael D Donney  Contracts Approval  Approve*	
Michael D Donney  Contracts Approval  Approve*  Yes	
Michael D Donney  Contracts Approval  Approve*  Yes  No, reject entire submission	
Contracts Approval  Approve*  Yes  No, reject entire submission  Return for correction	Approval Date*



sema ream and 1110	
Current Fiscal Year Contract Information	n
Current Fiscal Year	
2022	
Contract ID#*	
6945	
Contractor Name*	
Elsa Almanza	
Service Provided * (?)	
	internal Complete (Habilitation
Respite & Community First Choice (CFC)- Personal Assi (PAS/HAB)	stance Services/Habilitation
Renewal Term Start Date *	Renewal Term End Date *
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
NA	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$10	0 000 00)
Board Approval (Total NTE Amount is \$100,000.00+)	0,000.00)
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
Contract Books of Tons	
Contract Description / Type	
<ul> <li>☐ Personal/Professional Services</li> <li>✓ Consumer Driven Contract</li> </ul>	Consultant
Memorandum of Understanding	<ul><li>New Contract/Agreement</li><li>Amendment to Existing Contract</li></ul>
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	☐ Other
Vendor/Contractor a Historically Underutilized Busin	ess (HUB) (?)
Yes	
O No	
<ul><li>Unknown</li></ul>	

Contract NTE (Old Text Field For Reference) (?) \$15,507.00
Contract NTE* (?) \$ 22,690.00
Rate(s)/Rate(s) Description
Unit(s) Served* 3585
G/L Code(s)* 543005 \$8,390.00, 543009 \$14,300.00
Current Fiscal Year Purchase Order Number* CT141474
Contract Requestor* Patrina Anthony
Contract Owner* Lily Pan
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes  ○ No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  ■ Yes □ No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
● Yes ○ No  Did Contractor render services consistent with Agency policy and procedures?* (?)
● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes  No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)

# Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Expense/GL Code No.\* Budget Unit Number\* Amount Charged to Unit\* 3585 543005 \$ 9,000.00 Budget Manager\* Secondary Budget Manager\* Adams-Austin, Mamie Downey, Michael Budget Unit Number\* Expense/GL Code No.\* Amount Charged to Unit\* 3585 \$ 9,000.00 543009 Secondary Budget Manager\* Budget Manager\* Adams-Austin, Mamie Downey, Michael Fiscal Year\* (?) Amount\* (?) 2023 \$ 18,000.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* State **Contract Content Changes** Are there any required changes to the contract language?\* (?) Yes O No Please Explain\* Rate increase: \$10.00 per hour for Respite and CFC. 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\* (?) Please Select Contract Owner Mike Downey

Budget Manager Approval(s)	
Approved by	
Mamie Adams-Austin	
Contract Owner Approval	Ó
Approved by	
Michael D Downey	
Contracts Approval	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
<ul> <li>Return for correction</li> </ul>	
Approved by*	
	Approval Date *
Shaskyia Behn	5/26/2022

00	The
	HARRIS CENTER
(0)	CENTER for
	Health and IDD

Mental Health and IDD	
Current Fiscal Year Contract Information	•
Current Fiscal Year	
2022	
Contract ID#*	
6964	
Contractor Name*	
Elsa Lozana - Tello	
Service Provided* (?)	
Respite & Community First Choice (CFC)- Personal Assis (PAS/HAB)	stance Services/Habilitation
Renewal Term Start Date *	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
NA	
Agenda Item Submitted For: (?)	
Information Only (Total NTE Amount is Less than \$100	0,000.00)
Board Approval (Total NTE Amount is \$100,000.00+)	
Grant Proposal	
<ul><li>☐ Revenue</li><li>☐ SOW-Change Order-Amendment#</li></ul>	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	☐ 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
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 ☐ Pooled Contract	☐ IT/Software License Agreement ☐ Lease
Renewal of Existing Contract	Other
	(IIIID) (c)
Vendor/Contractor a Historically Underutilized Busine  Yes	ss (HUB) (?)
No	
Unknown	

Contract NTE (Old Text Field For Reference) (?) \$15,507
Contract NTE* (?) \$ 17,230.00
Rate(s)/Rate(s) Description
Unit(s) Served* 3585
G/L Code(s)* 543005 \$8,390.00, 543009 \$8,840.00
Current Fiscal Year Purchase Order Number* CT141429
Contract Requestor* Patrina Anthony
Contract Owner* Lily Pan
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes ● No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  © Yes   No
Did Contractor adhere to the contracted schedule?* (?)  ● Yes ○ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes O No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ■ Yes □ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  ■ Yes ○ No

Renewal Information for Next Fiscal Year			
Budget Units and Amou	nts Charged to each Budg	et Unit	
Budget Unit Number*	Amount Charged to Unit* \$ 8,615.00	Expense/GL Code No.* 543005	
Budget Manager* Adams-Austin, Mamie	Secondary I Downey, Mic	Budget Manager* hael	
Budget Unit Number*	Amount Charged to Unit* \$ 8,615.00	Expense/GL Code No.* 543009	
Budget Manager* Adams-Austin, Mamie	Secondary I Downey, Mic	Budget Manager* hael	
Fiscal Year* (?) 2023	Amount* (?) \$ 17,230.00		
Next Fiscal Year Not to Exceed	Amount for Master Pooled Contract	s	
Contract Funding Source* State  Contract Content Change	jes		
Are there any required changes  ● Yes ○ No	to the contract language?* (?)	enteren in han en el ser estado en el contra en el monera del ser en el contra el contra el contra en el contr E	
Please Explain* Rate increase: \$10.00 per hour for Respite and CFC.			
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* (?) Please Select Contract Owner			
Mike Downey			

Budget Manager Approval(s)		0
Approved by		
Mamie Adams Austin		
Contract Owner Approval		<u> </u>
Approved by		
Michael D Downey		
Contracts Approval		
Approve*		
<ul><li>Yes</li></ul>		
<ul> <li>No, reject entire submission</li> </ul>		
<ul> <li>Return for correction</li> </ul>		
Approved by *		
	Approval Date*	
Shaskyia Behn	5/26/2022	

# HARRIS Annual Renewal Evaluation

Mental Health and IDD	About
Current Fiscal Year Contract Information	<u> </u>
Current Fiscal Year	
2022	
Contract ID#* 6960	
Contractor Name * Haneef Abdullah	
Service Provided* (?) Community First Choice & Respite	
Renewal Term Start Date *	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only) NA	
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100  Board Approval (Total NTE Amount is \$100,000.00+)  Grant Proposal  Revenue  SOW-Change Order-Amendment#  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 Qualification
Request for Quote	☐ Tag-On
☐ Interlocal	✓ Consumer Driven
☐ Not Applicable (If there are no funds required)	Other
Contract Description / Type	
Personal/Professional Services	Consultant
Consumer Driven Contract	□ New Contract/Agreement
<ul> <li>Memorandum of Understanding</li> </ul>	<ul> <li>Amendment to Existing Contract</li> </ul>
Affiliation or Preceptor	☐ Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
☐ Pooled Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busine  Yes  No  Unknown	ss (HUB) (?)

Contract NTE (Old Text Field For Reference) (?) \$6,379.00
Contract NTE* (?) \$ 10,635.00
Rate(s)/Rate(s) Description
Unit(s) Served* 3585
G/L Code(s)* 543005 \$3875.00, 543009 \$6760.00
Current Fiscal Year Purchase Order Number* CT141431
Contract Requestor* Patrina Anthony
Contract Owner* Lily Pan
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes ● No
Were Services delivered as specified in the contract?*  ■ Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes O No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
<ul> <li>● Yes ○ No</li> <li>Did Contractor render services consistent with Agency policy and procedures?* (?)</li> </ul>
Yes  No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes O No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)

# Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit **Budget Unit Number\*** Amount Charged to Unit\* Expense/GL Code No.\* 3585 \$ 4.500.00 543005 **Budget Manager\*** Secondary Budget Manager\* Downey, Michael Adams-Austin, Mamie Expense/GL Code No.\* Budget Unit Number\* Amount Charged to Unit\* 3585 543009 \$ 6,000.00 **Budget Manager\*** Secondary Budget Manager\* Adams-Austin, Mamie Downey, Michael Fiscal Year\* (?) Amount\* (?) 2023 \$ 10,500.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* State **Contract Content Changes** Are there any required changes to the contract language?\* (?) Yes No Please Explain\* Rate increase: \$10.00 per hour for Respite and CFC. Will the scope of the Services change?\* 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\* (?) Please Select Contract Owner Mike Downey

proved by	
Mamie Adams-Austin	
ontract Owner Approval	
proved by	
Michael D Downey	
ontracts Approval	
prove*	
Yes	
No, reject entire submission	
Return for correction	
proved by *	
	Approval Date*
Shaskyia Behn	5/27/2022

COVEY	17.0		
90	HAR	RIS	
OD	es ruci	174.5	
Normal I			

O CENTER for Mental Health and IDD	
Current Fiscal Year Contract Information	n
Current Fiscal Year	
2022	
Contract ID#*	
6981	
Contractor Name *	
Jordan Barden	
Service Provided * (?)	
Respite and Community First Choice (CFC)- Personal A (PAS/HAB)	ssistance Services/Habilitation
Renewal Term Start Date*	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
NA	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$10	
Board Approval (Total NTE Amount is \$100,000.00+)	
Grant Proposal	
Revenue	
<ul> <li>SOW-Change Order-Amendment#</li> <li>□ Other</li> </ul>	
Ottlei	
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     O     O     Consumer Driven     Consumer Driven     O     Consumer Driven     O     Consumer Driven     O     Consumer Driven     Consumer Driven     O     Consumer Driven     Consumer Dr
Not Applicable (If there are no funds required)	Other
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
Vendor/Contractor a Historically Underutilized Busin	ess (HUB) (?)
○ Yes	
○ No	
<ul><li>Unknown</li></ul>	

Contract NTE (Old Text Field For Reference) (?) \$14,400.00
Contract NTE* (?) \$ 18,440.00
Rate(s)/Rate(s) Description
Unit(s) Served* 3585
G/L Code(s)* 543005: \$7,000.00, 543009: \$11,440.00
Current Fiscal Year Purchase Order Number* CT141433
Contract Requestor* Patrina Anthony
Contract Owner* Lily Pan
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  O Yes  No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  ■ Yes □ No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes O No

Renewal Information for Next Fiscal Year		
Budget Units and Amo	unts Charged to each Budge	et Unit
Budget Unit Number*	Amount Charged to Unit* \$ 6,000.00	Expense/GL Code No.* 543005
Budget Manager* Adams-Austin, Mamie	Secondary B Downey, Mich	udget Manager* nael
Budget Unit Number*	Amount Charged to Unit* \$ 6,000.00	Expense/GL Code No.* 543009
Budget Manager* Adams-Austin, Mamie	Secondary B Downey, Mich	udget Manager* nael
Fiscal Year* (?) 2023	Amount* (?) \$ 12,000.00	
Next Fiscal Year Not to Excee	d Amount for Master Pooled Contracts	;
Contract Funding Source* State  Contract Content Char  Are there any required change  Yes No  Please Explain*	nges es to the contract language?* (?)	
Rate increase: \$10.00 per hour		
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?*  O Yes  No		
Are there any changes to the Submission deadlines for notes or supporting documentation?*  Yes No		
File Upload (?)		
Contract Owner		<u> </u>
Contract Owner* (?) Please Select Contract Owner Mike Downey		

Budget Manager Approval(s)	
Approved by	
Mamie Adams-Austin	
Contract Owner Approval	
Approved by	
Lity Pan	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by*	
	Approval Date*
Shaskyia Behn	5/31/2022



Mental Health and IDD		
Current Fiscal Year Contract Information	on 🔿	
Current Fiscal Year		
2022		
Contract ID#*		
5159		
Contractor Name*		
Harris County Facilities Property Management Department	nent	
Service Provided* (?)		
Lease for Property located at 5518 Jackson Street, Hou	uston, Texas.	
Renewal Term Start Date*	Renewal Term End Date *	
4/30/2018	4/30/2028	
Term for Off-Cycle Only (For Reference Only)		
4/30/2018 - 4/30/2028		
Agenda Item Submitted For: (?)		
☑ Information Only (Total NTE Amount is Less than \$1		
Board Approval (Total NTE Amount is \$100,000.00+	-)	
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	
Contract Description / Type		
Personal/Professional Services	Consultant	
Consumer Driven Contract	New Contract/Agreement	
<ul> <li>Memorandum of Understanding</li> </ul>	Amendment to Existing Contract	
Affiliation or Preceptor	Service/Maintenance	
BAA/DUA	☐ IT/Software License Agreement	
Pooled Contract	Lease	
Renewal of Existing Contract	Other	
Vendor/Contractor a Historically Underutilized Business (HUB) (?)		
O Yes		
No		
O Unknown		

Contract NTE (Old Text Field For Reference) (?) \$50
Contract NTE* (?) \$ 50.00
Rate(s)/Rate(s) Description \$50 annually
Unit(s) Served* 1850
G/L Code(s)* 555000
Current Fiscal Year Purchase Order Number* CT141410
Contract Requestor* Karen Hurst
Contract Owner* Todd McCorquodale
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*    Yes   No
Did Contractor adhere to the contracted schedule?* (?)  ● Yes ○ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
● Yes ○ No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)

Renewal Information for Next Fiscal Year				
Budget Units and Amounts Charged to each Budget Unit				
Budget Unit Number* 1850	Amount Charged to Unit \$ 50.00	* Expense/GL Code No	o.*	
Budget Manager* Brown, Erica		dary Budget Manager* ell, Ricardo		
Fiscal Year* (?) 2023	<b>Amour</b> \$ 50.00			
Next Fiscal Year Not to Exceed Amo	ount for Master Pooled Cor	ntracts		
Contract Funding Source * General Revenue (GR)				
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* (?)  Please Select Contract Owner  Todd McCorquodale				
Budget Manager Approval(s)				
Approved by				
Exica Brown				



HARRIS CENTER for

### **Annual Renewal Evaluation**

### **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 7522 Contractor Name\* NAMI Greater Houston Service Provided \* (?) Lease Agreement: The Harris Center provides space to NAMI in exchange for educational and support services to consumers and their families. Renewal Term Start Date\* Renewal Term End Date\* 9/1/2022 8/31/2023 Term for Off-Cycle Only (For Reference Only) N/A Agenda Item Submitted For: (?) ☑ Information Only (Total NTE Amount is Less than \$100,000.00) ☐ Board Approval (Total NTE Amount is \$100,000.00+) 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 Consumer Driven Interlocal Not Applicable (If there are no funds required) Other 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) Yes No Unknown

Contract NTE (Old Text Field For Reference) (?) N/A
Contract NTE* (?) \$ 0.00
Rate(s)/Rate(s) Description
Unit(s) Served* 1119
G/L Code(s)* 00000
Current Fiscal Year Purchase Order Number* N/A
Contract Requestor* Shaskyia Behn
Contract Owner* Silvia Tiller
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes   ○ No
Were Services delivered as specified in the contract?*  ■ Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  ● Yes ⊝ No
Were reports, billing and/or invoices submitted in a timely manner?* ⟨?⟩  ■ Yes □ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes • No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  ● Yes ○ No

Renewal Information for Next Fiscal Year			
Budget Units and Amounts Charged to each Budget Unit			
Budget Unit Number*	Amount Charged to Unit* \$ 0.00	Expense/GL Code No.* 408000	
Budget Manager* Campbell, Ricardo		udget Manager*	
Fiscal Year* (?) 2023	Amount* (?) \$ 0.00		
Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts			
Contract Funding Source*  Private Pay Source  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* (?) Please Select Contract Owner			
Budget Manager Approval(s)			
Approved by			
Ricardo Campbell			

Contract Owner Approval	0
Approved by	
Silvia Viller	
Contracts Approval	
Approve*	
Yes	
No, reject entire submission	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/23/2022
Service Servic	

HARRIS CENTER SO

### **Annual Renewal Evaluation**

### **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 7595 Contractor Name\* The Network of Behavioral Health Providers Service Provided \* (?) Lease of 450 square feet of office space located at 9401 Southwest Freeway, 12th Floor, Houston, Texas 77074. Renewal Term Start Date\* Renewal Term End Date\* 9/1/2022 8/31/2023 Term for Off-Cycle Only (For Reference Only) N/A Agenda Item Submitted For: (?) ✓ Information Only (Total NTE Amount is Less than \$100,000.00) Board Approval (Total NTE Amount is \$100,000.00+) 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 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) Yes No Unknown

	Contract NTE (Old Text Field For Reference) (?) N/A
	Contract NTE*(?) \$ 0.00
	Rate(s)/Rate(s) Description
	Unit(s) Served* N/A
	G/L Code(s)* N/A
	Current Fiscal Year Purchase Order Number* N/A
	Contract Requestor* Shaskyia Behn
	Contract Owner* Silvia Tiller
	File Upload (?)
Agendantemental	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes ● No
	Were Services delivered as specified in the contract?*  ⊚ Yes ○ No
	Did Contractor perform duties in a manner consistent with standards of the profession?*   No
	Did Contractor adhere to the contracted schedule?* (?)  • Yes O No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? $^{\star}$ (?)
	● Yes ○ No
	Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes O No
	Maintained legally required standards for certification, licensure, and/or training?* (?)  ● Yes ○ No
THE PERSON NAMED IN	Renewal Determination
	Is the contract being renewed for next fiscal year with this Contractor?* (?)

Renewal Information for Next Fiscal Year		
Budget Units and Amounts Charged to each Budget Unit		
Budget Unit Number* 1119	Amount Charged to Unit* \$ 0.00	Expense/GL Code No.* 408000
Budget Manager* Campbell, Ricardo	Seconda Brown, Er	ry Budget Manager* rica
Fiscal Year* (?) 2023	<b>Amount</b> *	* (?)
Next Fiscal Year Not to Exceed A	Amount for Master Pooled Contr	acts
Contract Funding Source* General Revenue (GR)		
Contract Content Chang	es	
Are there any required changes to the contract language?* (?)  O 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?*  O Yes  O No		
Are there any changes to the Submission deadlines for notes or supporting documentation?*  Yes  No		
File Upload (?)		
Contract Owner		
Contract Owner* (?)		
Please Select Contract Owner Silvia Tiller		
Budget Manager Approval(s)		
Approved by		
Ricardo Campbell		

Contract Owner Approval	
Approved by	
Sitvia Vitter	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/23/2022

# HARRIS CENTER,

### **Annual Renewal Evaluation**

# **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 6541 Contractor Name\* The Bill Clair Family Mortuary, Inc. Service Provided \* (?) Parking Space Lease Agreement. Spaces located at 2603 Southmore Street, Houston, Renewal Term Start Date\* Renewal Term End Date\* 9/1/2022 8/31/2023 Term for Off-Cycle Only (For Reference Only) Agenda Item Submitted For: (?) Information Only (Total NTE Amount is Less than \$100,000.00) ☐ Board Approval (Total NTE Amount is \$100,000.00+) 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 Parking Agreement 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) Yes No Unknown

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 8,640.00  Rate(s)/Rate(s) Description
Unit(s) Served* 0000
G/L Code(s)* 126006
Current Fiscal Year Purchase Order Number* CT141276
Contract Requestor* Patricia Singh
Contract Owner* Kim Kornmayer
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  ● Yes ○ No
Did Contractor adhere to the contracted schedule?* (?)  ● Yes ○ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  ● Yes ○ No

Renewal Information for Next Fiscal Year				
Budget Units and Amounts Charged to each Budget Unit				
Budget Unit Number* 9810	Amount Charged to Unit*	Expense/GL Code No.* 126006		
Budget Manager* Oshman, Jodel		ry Budget Manager* er, Kimberly		
Fiscal Year* (?) 2023	Amount <sup>3</sup> \$ 8,640.0	98.07.11		
Next Fiscal Year Not to Exceed Amo	Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts			
Contract Funding Source* General Revenue (GR)  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 * (?) Please Select Contract Owner				
Kim Kornmayer  Budget Manager Approval	(s)			
Approved by  Todel Oshman				
Orael Oshman				

Contract Owner Approval	
Approved by	
KIN KOPNMAYER	
, , , , , ,	
Contracts Approval	
Approve*	
<ul><li>Yes</li></ul>	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
0 0.	5/19/2022
Shaskyia Behn	

HARRIS CENTER for Mental Health and IDD

# **Annual Renewal Evaluation**

Mental Health and IDD			
Current Fiscal Year Contract Information			
Current Fiscal Year			
2022			
Contract ID#*			
7556			
Contractor Name *			
The ARC of Greater Houston			
Service Provided* (?)			
In-kind space in exchange for special education advocacy the community in exchange for leased space (1300 sq ft.) SW Freeway.			
Renewal Term Start Date*	Renewal Term End Date*		
9/1/2022	9/1/2023		
Term for Off-Cycle Only (For Reference Only)			
N/A			
Agenda Item Submitted For: (?)			
Information Only (Total NTE Amount is Less than \$100,000.00)			
☐ Board Approval (Total NTE Amount is \$100,000.00+) ☐ 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 Consumer Driven		
✓ Not Applicable (If there are no funds required)	Other		
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 IT/Software License Agreement		
Pooled Contract	Lease		
Renewal of Existing Contract	Other		
#C 0000 0000 <b>X</b> . 1000 100000			

Vendor/Contractor a Historically Underutilized Business (HUB) (?)  Yes  No Unknown
Contract NTE (Old Text Field For Reference) (?) N/A
Contract NTE* (?) \$ 0.00
Rate(s)/Rate(s) Description N/A
Unit(s) Served* N/A
G/L Code(s)* N/A
Current Fiscal Year Purchase Order Number* N/A
Contract Requestor* Shaskyia Behn
Contract Owner* Silvia Tiller
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Were Services delivered as specified in the contract?*  ● Yes □ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  ■ Yes □ No
Did Contractor adhere to the contracted schedule?* (?)  ■ Yes □ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
● Yes ○ No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes □ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No

Renewal Determination			
	for next fiscal year with this Contract	or?*(?)	
• Yes O No			
Renewal Information fo	r Next Fiscal Year		
Budget Units and Amou	unts Charged to each Budge	et Unit	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*	
1119	\$ 0.00	408000	
Budget Manager*		udget Manager*	
Campbell, Ricardo	Brown, Erica		
Fiscal Year* (?)	Amount* (?)		
2023	\$ 0.00		
Next Fiscal Year Not to Exceed	Amount for Master Pooled Contracts		
Contract Funding Source* General Revenue (GR)			
Contract Content Chan	ges	•	
Are there any required changes	s to the contract language?* (?)		
Will the scope of the Services	change?*		
Is the payment deadline differe	ent than net (45)?*		
Are there any changes in the P	erformance Targets?*		
	ubmission deadlines for notes or sup	pporting documentation?*	
○ Yes ● No File Upload (?)			
Contract Owner			
Contract Owner* (?)	Contract Owner* (?)		
Please Select Contract Owner Silvia Tiller			
Budget Manager Approval(s)			

Approved by	
Ricardo Campbell	
Contract Owner Approval	
Approved by	
Sitvia Titler	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/23/2022

HARRIS CENTER J

# **Annual Renewal Evaluation**

# **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 7578 Contractor Name\* Coalition for the Homeless of Houston/Harris County, Inc. Service Provided\* (?) Care Coordination-Information and referral to the Coordinated Access system which will provide homeless individuals with a direct link to housing services. Renewal Term Start Date\* Renewal Term End Date\* 9/1/2022 8/31/2023 Term for Off-Cycle Only (For Reference Only) Agenda Item Submitted For: (?) ✓ Information Only (Total NTE Amount is Less than \$100,000.00) Board Approval (Total NTE Amount is \$100,000.00+) 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 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) O Yes No Unknown

	Contract NTE (Old Text Field For Reference) (?)
	Contract NTE* (?) \$ 20,000.00  Rate(s)/Rate(s) Description
	Unit(s) Served* 2200
	G/L Code(s)* 543022
	Current Fiscal Year Purchase Order Number* CT141283
	Contract Requestor*  Lance Britt
	Contract Owner*  Lance Britt
	File Upload (?)
STREET, SQUARE, SQUARE	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
	Were Services delivered as specified in the contract?*  ● Yes ○ No
	Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
	Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes □ No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)  • Yes O No
	Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes • No
	Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
1	Renewal Determination
	Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes O No

Renewal Information for Next Fiscal Year			
Budget Units and Amounts Charged to each Budget Unit			
Budget Unit Number* 2200	Amount Charged to Unit* \$ 20,000.00	Expense/GL Code No.* 543022	
Budget Manager* Shelby, Debbie	Secondary Loera, Ange	Budget Manager* lica	
Fiscal Year* (?) 2023	Amount* (?) \$ 20,000.00		
Next Fiscal Year Not to Exceed Am	ount for Master Pooled Contract	s	
Contract Funding Source* General Revenue (GR)			
Contract Content Changes	5	<u> </u>	
Are there any required changes to  Yes No	the contract language?* (?)		
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* (?) Please Select Contract Owner			
Budget Manager Approval	(s)		
Approved by  Debbie Chambers Shelby			

Contract Owner Approval	
Approved by	
Lance Britt	
Contracts Approval	
Approve*	
<ul><li>Yes</li></ul>	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/26/2022

# MARRIS Annual Renewal Evaluation

Mental Health and IDD	
Current Fiscal Year Contract Informatio	n A
Current Fiscal Year	
2022	
Contract ID#*	
6536	
Contractor Name*	
MyStrength, Inc.	
Service Provided*(?)	
Mental Health Web Based Mobile Application Software and wellness program.	for a Consumer benavioral health
Renewal Term Start Date*	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
Aganda Itam Submitted Fare (2)	
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$1)	00 000 00)
Board Approval (Total NTE Amount is \$100,000.00+	
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	<ul> <li>Request for Qualification</li> </ul>
Request for Quote	☐ Tag-On
Interlocal	
■ Not Applicable (If there are no funds required)	Other
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 ☐ Pooled Contract	☐ IT/Software License Agreement ☐ Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busin	ness (HUB) (?)
Yes	a 7 x 50
No	
O Unknown	

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 40,000.00  Rate(s)/Rate(s) Description
Unit(s) Served* 2212
G/L Code(s)* 553002
Current Fiscal Year Purchase Order Number* CT141286
Contract Requestor* Lance Britt
Contract Owner* Lance Britt
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Were Services delivered as specified in the contract?*  ■ Yes □ No
Did Contractor perform duties in a manner consistent with standards of the profession?*
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
● Yes ○ No  Did Contractor render services consistent with Agency policy and procedures?* (?)
Yes    No
Maintained legally required standards for certification, licensure, and/or training?* (?)  ■ Yes □ No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)

Renewal Information fo	r Next Fiscal Year		
Budget Units and Amou	unts Charged to each Bud	get Unit	
Budget Unit Number* 2212	Amount Charged to Unit* \$ 40,000.00	Expense/GL Code No.* 553002	
Budget Manager* Shelby, Debbie	Secondary Loera, Ang	Budget Manager* elica	
Fiscal Year* (?) 2023	Amount* ( \$ 40,000.00		
Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts			
Contract Funding Source* General Revenue (GR) Contract Content Chan	ges		
Are there any required change  Yes No	s to the contract language?* (?)		
Will the scope of the Services	change?*		
Is the payment deadline different than net (45)?*  ○ Yes  ○ No			
Are there any changes in the P  Yes  No	erformance Targets?*		
Are there any changes to the S  Yes No  File Upload (?)	submission deadlines for notes or s	upporting documentation?*	
Contract Owner			
Contract Owner* (?) Please Select Contract Owner Lance Britt Budget Manager Appro	oval(s)		
Approved by			
Debbie Chambers Shelby			

Approved by	
Lance Britt	
Contracts Approval	
Approve*	
Yes	
No, reject entire submission	
Return for correction	
Approved by *	
Approved by *	Approval Date*
Approved by* Shaskyia Behn	Approval Date* 5/26/2022

0	01	100		
9	20	IAI	RRI	S
	On	ACH	CHB	Rin
Men	tal H	ealth	and	

# **Annual Renewal Evaluation**

Mental Health and IDD	
Current Fiscal Year Contract Information	^
Control of the section of the sectio	
Current Fiscal Year	
2022	
Contract ID#*	
2021-0170	
2021-0170	
Contractor Name*	
Prosumers	
Service Provided* (?)	
Consultation and training services for the development at Empowerment Group in Harris County.	nd implementation of a Consumer
Empowerment Group in Harris County.	
Renewal Term Start Date*	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
to an error of the configuration of the configurati	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$10	0.000.00/
Board Approval (Total NTE Amount is \$100,000.00+)	0,000.00)
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
And the second s	
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
<ul> <li>☐ Interlocal</li> <li>☐ Not Applicable (If there are no funds required)</li> </ul>	<ul><li>✓ Consumer Driven</li><li>Other</li></ul>
Not Applicable (if there are no fullus required)	Cities Cities
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 ☐ Pooled Contract	☐ IT/Software License Agreement
Renewal of Existing Contract	☐ Lease ☐ Other
Notional of Existing Contract	- Cinci
Vendor/Contractor a Historically Underutilized Busine	ess (HUB) (?)
O Yes	
⊚ No	
○ Unknown	

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 18,000.00  Rate(s)/Rate(s) Description
Unit(s) Served* 2200
G/L Code(s)* 542000
Current Fiscal Year Purchase Order Number* CT141264
Contract Requestor* Lance Britt
Contract Owner*  Lance Britt
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*
Did Contractor adhere to the contracted schedule?* (?)  ● Yes ○ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
Yes    No  Did Contractor render services consistent with Agency policy and procedures?* (?)
● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)

# Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No.\* 2200 \$ 18,000.00 542000 Budget Manager\* Secondary Budget Manager\* Shelby, Debbie Loera, Angelica Fiscal Year\* (?) Amount\* (?) 2023 \$ 18,000.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* General Revenue (GR) **Contract Content Changes** Are there any required changes to the contract language?\* (?) Yes No Will the scope of the Services change?\* O 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\* (?) Please Select Contract Owner Lance Britt Budget Manager Approval(s) Approved by Debbie Chambers Shelby

Contract Owner Approval	<u> </u>
Approved by	
Lance Britt	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/26/2022



### **Annual Renewal Evaluation**

# **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 7739 Contractor Name\* Tejas Behavioral Health Management Association Service Provided \* (?) MCO Managed Care Generator - Automates and optimizes the Service Request Form required to send to Medicaid Managed Care Organizations. Renewal Term Start Date\* Renewal Term End Date\* 9/1/2022 8/31/2023 Term for Off-Cycle Only (For Reference Only) Agenda Item Submitted For: (?) ☑ Information Only (Total NTE Amount is Less than \$100,000.00) Board Approval (Total NTE Amount is \$100,000.00+) 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 ☐ Tag-On Request for Quote Consumer Driven Interlocal Not Applicable (If there are no funds required) Other 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) O Yes No Unknown

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 7,200.00
Rate(s)/Rate(s) Description
Unit(s) Served* 2200
G/L Code(s)* 553003
Current Fiscal Year Purchase Order Number* CT141467
Contract Requestor*  Lance Britt
Contract Owner*  Lance Britt
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes  ○ No
Were Services delivered as specified in the contract?*  ■ Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
● Yes ○ No  Did Contractor render services consistent with Agency policy and procedures?*  (?)
● Yes ○ No  Maintained legally required standards for certification, licensure, and/or training?*  (?)
Yes  No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)

# Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit\* Budget Unit Number\* Expense/GL Code No.\* 2200 \$ 7,200,00 553003 Budget Manager\* Secondary Budget Manager\* Shelby, Debbie Loera, Angelica Fiscal Year\* (?) Amount\* (?) 2023 \$ 7,200.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts Contract Funding Source\* General Revenue (GR) **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\* (?) Please Select Contract Owner Lance Britt Budget Manager Approval(s) Approved by Debbie Chambers Shelby

Contract Owner Approval	6
Approved by	
Lance Britt	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/26/2022
Gnaskyta Denn	5/20/2022

HARRIS CENTER,

### **Annual Renewal Evaluation**

# **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 7840 Contractor Name\* Treatment Advocacy Center Service Provided \* (?) Provide training, technical, and collaborative assistance to The Agency staff for one year to establish and maintain a successful and sustainable AOT program. Term for Off-Cycle Only \* 8/1/2021 - 7/31/2022 Agenda Item Submitted For: (?) ✓ Information Only (Total NTE Amount is Less than \$100,000.00) ☐ Board Approval (Total NTE Amount is \$100,000.00+) 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 State Grant Related Agreement 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) Yes No Unknown Please provide an explanation N/A.

Contract NTE* (?) \$5,000.00
Rate(s)/Rate(s) Description
Unit(s) Served* 2200
G/L Code(s)* 549005
Current Fiscal Year Purchase Order Number* FY22 PO CT141258
Contract Requestor*  Lance Britt
Contract Owner*  Lance Britt
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  ■ Yes ○ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
Yes  No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes O No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  ● Yes ○ No
Renewal Information for Next Fiscal Year

Budget Units and Amounts Charged to each Budget Unit					
Budget Unit Number* 2200	Amount Charged to Unit* \$ 5,000.00	Expense/GL Code No.* 549005			
Budget Manager* Shelby, Debbie	Secondar Loera, An	ry Budget Manager* gelica			
Fiscal Year* (?) 2023	Amount* \$ 5,000.00				
Next Fiscal Year Not to Exceed A	mount for Master Pooled Contra	acts			
Contract Funding Source* State Grant					
Contract Content Changes					
Are there any required changes to the contract language?* (?)  O Yes   No					
Will the scope of the Services change?*  ○ Yes ● No					
Is the payment deadline different  Yes  No	than net (45)?*				
Are there any changes in the Per	formance Targets?*				
Are there any changes to the Submission deadlines for notes or supporting documentation?*					
File Upload (?)					
Contract Owner		lacksquare			
Contract Owner* (?)					
Lance Britt					
Budget Manager Approv	al(s)				
Approved by					
Debbie Chambers Shelby					
Contract Owner Approva	I	0			

Approved by

Lance Britt

# Contracts Approval

# Approve\*

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

Approved by \*

Belinda Stude

Approval Date\*

5/6/2022

HARRIS

## **Annual Renewal Evaluation**

# **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 7497 Contractor Name\* Baylor College of Medicine Service Provided\* (?) Psychiatric Resident Educational Rotaton for Child/Adolescent Psychiatry Term for Off-Cycle Only \* 07/01/22-06/30/23 Agenda Item Submitted For: (?) ✓ Information Only (Total NTE Amount is Less than \$100,000.00) Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# 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 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) Yes ○ No Unknown Contract NTE\* (?) \$24,907.68

Rate(s)/Rate(s) Description \$63.54 per hour
Unit(s) Served* 2208
G/L Code(s)* 540504
Current Fiscal Year Purchase Order Number* CT141254
Contract Requestor* Angelica Loera
Contract Owner*  Dr. Muzquiz
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  ● Yes ○ No
Did Contractor adhere to the contracted schedule?* (?)  ⊚ Yes ○ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? $^{\star}$ (?)
● Yes ○ No
Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes  No
Maintained legally required standards for certification, licensure, and/or training?* (?)  ■ Yes □ No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  ■ Yes □ No
Renewal Information for Next Fiscal Year
Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number* 2208	Amount Charged to Unit* \$ 25,416.00		Expense/GL Code No.* 540504		
Budget Manager* Shelby, Debbie	¥ 20,110.00	Secondary Budge Loera, Angelica	083 30508 70.05		
Fiscal Year* (?) 2022		Amount* (?) \$ 4,574.88			
Fiscal Year* (?) 2023		Amount* (?) \$ 20,841.12			
Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts 25,416.00					
Contract Funding Source * State					
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					
Please provide the net days* 30					
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* (?)					
Dr. Muzquiz  Budget Manager Approval(s)					
Approved by					
Debbie Chambers Shelty					

# Approved by Sylvia Muzguz, OMSD. Contracts Approval Approve\* Yes No, reject entire submission Return for correction Approved by\* Approval Date\* 5/10/2022

HARRIS CENTER 6

### **Annual Renewal Evaluation**

# **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 2021-0147 Contractor Name\* Baylor College of Medicine Service Provided\* (?) Forensic Psychiatry Residency Rotation Evaluation Services at the Harris County Jail. Term for Off-Cycle Only \* 07/01/22-06/30/23 Agenda Item Submitted For: (?) Information Only (Total NTE Amount is Less than \$100,000.00) ✓ Board Approval (Total NTE Amount is \$100,000.00+) 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 Consumer Driven Interlocal Not Applicable (If there are no funds required) Other 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) O Yes O No Unknown Contract NTE\* (?) \$63,794.16

Rate(s)/Rate(s) Description \$63.54 per hour
Unit(s) Served* 2208
G/L Code(s)* 540504
Current Fiscal Year Purchase Order Number* CT141249
Contract Requestor* Angelica Loera
Contract Owner*  Dr. Muzquiz
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  O Yes   No
Were Services delivered as specified in the contract?*  ■ Yes ∪ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  ● Yes ○ No
Did Contractor adhere to the contracted schedule?* (?)  ● Yes ○ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes □ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
● Yes ○ No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  ■ Yes ∪ No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes • No
Renewal Information for Next Fiscal Year
Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number* 2200	Amount Charged to Unit* \$ 60,998.40	Expense/GL Code No.* 540504
Budget Manager* Shelby, Debbie		dget Manager*
Fiscal Year* (?) 2022	Amount* (?) \$ 10,674.72	
Fiscal Year* (?) 2023	Amount* (?) \$ 50,323.68	
Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts 60,998.40 Contract Funding Source*		
Contract Content Changes		<u> </u>
Are there any required changes to  Yes No	the contract language?* (?)	
Will the scope of the Services char	nge?*	
Is the payment deadline different to	han net (45)?*	
Please provide the net days*		
Are there any changes in the Performance Targets?*  Ves  No		
Are there any changes to the Submission deadlines for notes or supporting documentation?*  Yes No		
File Upload (?)		
Contract Owner		
Contract Owner* (?)		
Dr. Muzquiz		
Budget Manager Approval(s)		
Approved by		
Debbie Chambers Shelby		



#### HARRIS CENTER for

Current Fiscal Year Contract Information	
Current Fiscal Year 2022	
Contract ID#* 7208	
Contractor Name*  UTHSC-Houston Department of Psychiatry and Behavioral	Sciences
Service Provided* (?) Forensic Residency Rotation at the Harris County Jail	
Term for Off-Cycle Only * 07/01/22-06/30/23	
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100,000 Board Approval (Total NTE Amount is \$100,000.00+)  Grant Proposal  Revenue  SOW-Change Order-Amendment#  Other	000.00)
Procurement Method(s)*	
Competitive Bid Request for Proposal Request for Application Request for Quote Interlocal Not Applicable (If there are no funds required)	<ul> <li>Competitive Proposal</li> <li>✓ Sole Source</li> <li>Request for Qualification</li> <li>Tag-On</li> <li>Consumer Driven</li> <li>Other</li> </ul>
Contract Description / Type  Personal/Professional Services  Consumer Driven Contract  Memorandum of Understanding  Affiliation or Preceptor  BAA/DUA  Pooled Contract  Renewal of Existing Contract	Consultant  New Contract/Agreement  Amendment to Existing Contract  Service/Maintenance  IT/Software License Agreement  Lease  Other
Vendor/Contractor a Historically Underutilized Busines  Yes  No  Unknown	s (HUB) (?)
Contract NTE* (?) \$50,323.68	

Rate(s)/Rate(s) Description \$63.54 per hour
Unit(s) Served* 2208
G/L Code(s)* 540504
Current Fiscal Year Purchase Order Number* CT141244
Contract Requestor* Angelica Loera
Contract Owner*  Dr. Muzquiz
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  ● Yes ○ No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ■ Yes □ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes □ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  ● Yes ○ No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes • No
Renewal Information for Next Fiscal Year
Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number* 2208	Amount Charge \$ 64,556.64	d to Unit <sup>*</sup>	Expense/GL Code No.* 540504
Budget Manager* Shelby, Debbie		Secondary Budget Loera, Angelica	t Manager*
Fiscal Year* (?) 2022		Amount* (?) \$ 11,437.20	
Fiscal Year* (?) 2023		Amount* (?) \$ 53,119.44	
Next Fiscal Year Not to Exceed Ame \$64,556.64 Contract Funding Source*	ount for Master Po	oled Contracts	
State			
Contract Content Changes	<b>S</b>		
Are there any required changes to to Yes  No	the contract langu	age?* (?)	
Will the scope of the Services chan  ○ Yes ● No	ge?*		
Is the payment deadline different than net (45)?*			
Please provide the net days*			
Are there any changes in the Performance Targets?*  Ves  No			
Are there any changes to the Submission deadlines for notes or supporting documentation?*  Yes No			
File Upload (?)			
Contract Owner			•
Contract Owner* (?)			
Dr. Muzquiz			
Budget Manager Approval	(s)	and the state of t	Ó
Approved by			
Debbie Chambers Shelby			





Mental Health and IDD	
Current Fiscal Year Contract Information	n 📀
Current Fiscal Year	
2022	
0	
Contract ID#*	
2021-0071	
Contractor Name*	
Emergency Temporary Housing (ETH) Master Pool	
Service Provided* (?)	
Emergency Temporary Housing Pool	
Emergency remporary flousing Poor	
Renewal Term Start Date*	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
A	
Agenda Item Submitted For: (?)	0.000.00
✓ Information Only (Total NTE Amount is Less than \$10	0,000.00)
Board Approval (Total NTE Amount is \$100,000.00+)	
☐ Grant Proposal ☐ Revenue	
SOW-Change Order-Amendment#	
Other	
- Curci	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	☐ Competitive Proposal
Request for Proposal	☐ Sole Source
Request for Application	<ul> <li>Request for Qualification</li> </ul>
Request for Quote	☐ Tag-On
Interlocal	✓ Consumer Driven
Not Applicable (If there are no funds required)	Other
Contract Description / Type	
Personal/Professional Services	Consultant
Consumer Driven Contract	□ New Contract/Agreement
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> </ul>
Affiliation or Preceptor	Service/Maintenance
☐ BAA/DUA  ✓ Pooled Contract	☐ IT/Software License Agreement
	☐ Lease ☐ Other
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busin	ess (HUB) (?)
○ Yes	
No	
O Unknown	

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 6,000.00  Rate(s)/Rate(s) Description
Unit(s) Served* 9238
G/L Code(s)* 595031
Current Fiscal Year Purchase Order Number* CT141270
Contract Requestor* Amber Honsinger
Contract Owner* Kim Kornmayer
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Were Services delivered as specified in the contract?*  • Yes • No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* $(?)$
● Yes ○ No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes • No

### Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit **Budget Unit Number\*** Amount Charged to Unit\* Expense/GL Code No.\* 9238 \$ 6,000,00 595031 **Budget Manager\*** Secondary Budget Manager\* Oshman, Jodel Kornmayer, Kimberly Fiscal Year\* (?) Amount\* (?) 2023 \$ 6,000.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts 6000.00 Contract Funding Source\* Private Grant **Contract Content Changes** Are there any required changes to the contract language?\* (?) Yes No Will the scope of the Services change?\* 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\* (?) Please Select Contract Owner Kim Kornmayer Budget Manager Approval(s) Approved by Todel Oshman

Contract Owner Approval	
Approved by	
KIN KOPNMAYER	
Contracts Approval	
Approve*	
Yes	
No, reject entire submission	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/20/2022
3	

HARRIS CENTER for

#### **Annual Renewal Evaluation**

#### **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 7262 Contractor Name\* P-Housing & Transition (CCAP) Service Provided \* (?) Master Pool: One(1) vendor will provide Transitional Housing Services for CCAP Consumers (formerly HDMD). Renewal Term Start Date\* Renewal Term End Date\* 9/1/2022 8/31/2023 Term for Off-Cycle Only (For Reference Only) Agenda Item Submitted For: (?) ✓ Information Only (Total NTE Amount is Less than \$100,000.00) Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# Other Procurement Method(s)\* Check all that Apply Competitive Proposal Competitive Bid Sole Source Request for Proposal Request for Qualification Request for Application Request for Quote Tag-On Consumer Driven Interlocal Other Not Applicable (If there are no funds required) 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) Yes No Unknown

Contract NTE (Old Text Field For Reference) (?)
Contract NTE * (?) \$ 18,803.74  Rate(s)/Rate(s) Description
Unit(s) Served* 9238
G/L Code(s)* 595031
Current Fiscal Year Purchase Order Number* CT141269
Contract Requestor* Patricia Singh
Contract Owner* Kim Kornmayer
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes • No
Did Contractor adhere to the contracted schedule?* (?)  ■ Yes □ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
● Yes ○ No  Did Contractor render services consistent with Agency policy and procedures?* (?)
● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)

Renewal Information for	Next Fiscal Year		<u> </u>
Budget Units and Amounts Charged to each Budget Unit			
Budget Unit Number* 9238	Amount Charged to \$ 18,803.74	o Unit*	Expense/GL Code No.* 595031
Budget Manager* Oshman, Jodel		econdary Budget Cornmayer, Kimberly	5
Fiscal Year* (?) 2023		mount* (?) 18,803.74	
Next Fiscal Year Not to Exceed A	mount for Master Poole	d Contracts	
Contract Funding Source*  Private Grant			
Contract Content Change	es		<u> </u>
Are there any required changes to Yes No	o the contract language	? <b>*</b> (?)	
Will the scope of the Services cha	ange?*		
Is the payment deadline different  Yes No	than net (45)?*		
Are there any changes in the Performance Targets?*  Ves  No			
Are there any changes to the Submission deadlines for notes or supporting documentation?*			
File Upload (?)			
Contract Owner			<u> </u>
Contract Owner* (?) Please Select Contract Owner			
Kim Kornmayer  Budget Manager Approve	al(s)		
Approved by	And the second s	Control of the Control of the Control of the Control	manus dan malaman katalan kanan
Todel Oshman			

Contract Owner Approval	0
Approved by	
Kim KORNMAYER	
Contracts Approval	
Approve*	
Yes	
No, reject entire submission	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behu	5/19/2022



Mental Health and IDD	
Current Fiscal Year Contract Information	
Current Fiscal Year	
2022	
Contract ID#*	
7300	
7300	
Contractor Name*	
Health Care for Special Populations DBA Patient Care Inte	ervention Center
Service Provided* (?)	
Unified Care Continuum Platform Community Data Exchai	nge (CDX) Services
Renewal Term Start Date*	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$100)	,000.00)
Board Approval (Total NTE Amount is \$100,000.00+)	•
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
<ul> <li>Interlocal</li> <li>Not Applicable (If there are no funds required)</li> </ul>	☐ Consumer Driven  ☑ Other None
Mot Applicable (If there are no funds required)	• Other None
Contract Description / Type	
✓ Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> </ul>
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busine	ss (HUB) (?)
Yes	
No	
Unknown	

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 21,794.00
Rate(s)/Rate(s) Description \$21,794 for data system user licenses, support and maintenance
Unit(s) Served* 9261
G/L Code(s)* 574000
Current Fiscal Year Purchase Order Number* CT141262
Contract Requestor* Priscilla Ramirez
Contract Owner* Kim Kornmayer
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  — Yes   No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  ■ Yes □ No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes • No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination

Is the contract being renewed for	next fiscal year with this Co	ontractor?* (?)	
● Yes ○ No			NO COSTON AND AND AND AND AND AND AND AND AND AN
Renewal Information for I	Next Fiscal Year		•
Budget Units and Amoun	ts Charged to each E	Budget Unit	
Budget Unit Number*	Amount Charged to Uni	it* Expense/GL Code No.*	
9501	\$ 21,794.00	574000	
Budget Manager*	Secon	ndary Budget Manager*	
Ramirez, Priscilla	Oshma	an, Jodel	
Fiscal Year* (?)	Amou	nt* (?)	
2023	\$ 21,7		
Next Fiscal Year Not to Exceed A	mount for Master Pooled Co	ontracts	
Contract Funding Source*			
State Grant			
Contract Content Change	es		<u></u>
Are there any required changes to	o the contract language?*	?)	
○ Yes ® No			
Will the scope of the Services cha	ange?*		
○ Yes ® No			
Is the payment deadline different	than net (45)?*		
Yes No			
Are there any changes in the Peri	formance Targets?*		
○ Yes ® No			
Are there any changes to the Sub	mission deadlines for notes	or supporting documentation?*	
○ Yes ● No			
File Upload (?)			
Contract Owner			•
Contract Owner* (?)		The second secon	
Please Select Contract Owner			
Kim Kornmayer			
Budget Manager Approva	al(s)		6
A STATE OF THE STA	and the state of t	and the control of th	A State of the State of the State of

Approved by	
Priscitta M. Ramirez	
Contract Owner Approval	
Approved by	
KIMKOPNMAYER	
Contracts Approval	
Approve*	
Yes	
No, reject entire submission	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/25/2022

HARRIS CENTER S

#### **Annual Renewal Evaluation**

#### **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 7256 Contractor Name\* P-Temporary Housing for Jail Diversion Service Provided\* (?) Master Pool: Nine (9) possible vendors provide temporary housing services for jail diversion. Renewal Term Start Date\* Renewal Term End Date\* 9/1/2022 8/31/2023 Term for Off-Cycle Only (For Reference Only) N/A Agenda Item Submitted For: (?) ✓ Information Only (Total NTE Amount is Less than \$100,000.00) ☐ Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# Other Procurement Method(s)\* Check all that Apply Competitive Proposal Competitive Bid Sole Source Request for Proposal Request for Application Request for Qualification Request for Quote Tag-On Interlocal Consumer Driven Other ■ Not Applicable (If there are no funds required) 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 Vendor/Contractor a Historically Underutilized Business (HUB) (?) Yes No Unknown

Contract NTE (Old Text Field For Reference) (?) \$22,901.00
Contract NTE* (?) \$ 22,901.00
Rate(s)/Rate(s) Description
Unit(s) Served* 9405
G/L Code(s)* 543004
Current Fiscal Year Purchase Order Number* CT141333
Contract Requestor* Priscilla Ramirez
Contract Owner* Kim Kornmayer
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  • Yes   No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ■ Yes □ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)

Renewal Information for N	lext Fiscal Year	$\odot$
Budget Units and Amount	s Charged to each Budge	et Unit
Budget Unit Number* 9405	Amount Charged to Unit* \$ 19,728.00	Expense/GL Code No.* 543004
Budget Manager* Ramirez, Priscilla	Secondary B Oshman, Jod	Budget Manager* el
Fiscal Year* (?) 2023	Amount* (?) \$ 19,728.00	
Next Fiscal Year Not to Exceed An	nount for Master Pooled Contracts	5
Contract Funding Source* County Contract Content Change	S	
Are there any required changes to  Yes No  Will the scope of the Services cha		
○ Yes ● No  Is the payment deadline different t ○ Yes ● No	han net (45)?*	
Are there any changes in the Perfo	ormance Targets?*	
Are there any changes to the Subr	mission deadlines for notes or su	pporting documentation?*
File Upload (?)		
Contract Owner		<b>⊙</b>
Contract Owner* (?) Please Select Contract Owner Kim Kornmayer		
Budget Manager Approva	ıl(s)	<u> </u>
Approved by		
Priscilla M. Ramirez		



#### HARRIS CENTER for

Current Final Year Contract Information	
Current Fiscal Year Contract Information	<b>9</b>
Current Fiscal Year 2022	
Contract ID#* 2021-0078	
Contractor Name*  Angelica Padilla dba Lice Care Solutions, LLC	
Service Provided* (?) Lice Removal Services	
Renewal Term Start Date *	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100 Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# Other	0,000,00)
Procurement Method(s)*	
Check all that Apply	
☐ Competitive Bid	☐ Competitive Proposal
Request for Proposal	Sole Source
Request for Application	<ul> <li>Request for Qualification</li> </ul>
Request for Quote	Tag-On
Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	Other
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
Vendor/Contractor a Historically Underutilized Busine  Yes  No  Unknown	ess (HUB) (?)

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 5,000.00
Rate(s)/Rate(s) Description
Unit(s) Served* 9261
G/L Code(s)* 543053
Current Fiscal Year Purchase Order Number* CT141520
Contract Requestor* Priscilla Ramirez
Contract Owner* Kim Kornmayer
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Ves  No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  ● Yes □ No
Did Contractor adhere to the contracted schedule? ★ (?)  ■ Yes □ No
Were reports, billing and/or invoices submitted in a timely manner?*⟨?⟩  ■ Yes □ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
● Yes ○ No Did Contractor render services consistent with Agency policy and procedures?* (?)
Yes  No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes • No

Renewal Information for Next Fiscal Year				
Budget Units and Amou	unts Charged to each E	Budget Unit		
Budget Unit Number* 9501	Amount Charged to Uni \$ 5,000.00	it* Expense/GL Code No.* 543053		
Budget Manager* Ramirez, Priscilla		ndary Budget Manager* an, Jodel		
Fiscal Year* (?) 2023	Amou \$ 5,00	int* (?) 00.00		
Next Fiscal Year Not to Exceed	Amount for Master Pooled Co	ontracts		
Contract Funding Source*				
Contract Content Chan	ges	$\circ$		
Are there any required change	s to the contract language?*(	?)		
Will the scope of the Services  ○ Yes ● No	change?*			
Is the payment deadline differe	ent than net (45)?*			
Are there any changes in the F	Performance Targets?*			
Are there any changes to the S	Submission deadlines for note	s or supporting documentation?*		
File Upload (?)				
Contract Owner		·		
Contract Owner* (?) Please Select Contract Owner				
Kim Kornmayer  Budget Manager Appro	oval(s)	$oldsymbol{\circ}$		
Approved by				
Priscilla M. Ramirez				

entire submission correction  * Approval Date*	Contract Owner Approval	
entire submission correction  *  Approval Date*	Approved by	
entire submission correction  *  Approval Date *	Kin KOPNMAYER	
entire submission correction  *  Approval Date *	Contracts Approval	
correction  *  Approval Date *	Contracts Approval	And the state of t
correction  *  Approval Date *	Approve*	
correction  *  Approval Date *	Yes	
* Approval Date *	<ul> <li>No, reject entire submission</li> </ul>	
Approval Date*	Return for correction	
	Approved by *	
1kyia Behn 5/27/2022		Approval Date*
	Shaskyia Behn	5/27/2022
	Shaskyia Behn	NIT COMPANY CONTRACTOR AND A STATE OF THE CONTRACTOR AND A STATE O

## EXHIBIT F-11

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

### SNAPSHOT SUMMARY AFFILIATION, GRANTS, MOU and REVENUE AGREEMENTS

	CONTRACTORS	HUBs/MWBE	PRODUCT/SERVICE DESCRIPTION	ACTION TYPE	CONTRACT PERIOD	FUNDING	COMMENTS
	FY22 CONTRACTS						O STATE OF THE STA
	AFFILIATION AGREEMENTS						
_1	University of North Texas Health Science System	No	Clinical Field Placements	New	05/10/22- 05/31/25	General Revenue (GR)	This Agreement will allow students enrolled at the University of North Texas Science System-Fort Worth to complete Psychiatric clinical field placements as part of their degree requirements.
	MOU						
2	Spring Branch Community Health Center	No	Memorandum of Understanding	New	6/1/2022 - 6/30/2023	General Revenue (GR)	This agreement will allow Spring Branch Community Health Center to collaborate with Substance Use Disorder Outreach Program (SUDOP) and Harris Center by allowing SUDOP to provide outreach and engagement services to individuals with a substance use disorders or substance use problems that will help clients maintain retention in recovery. SUDOP will also provide Mental Health services and referrals to medical care on an as needed basis.
3	University of Texas Health Science Center@Houston ER Opioid Engagement System (HEROES)	No	Memorandum of Understanding	New	7/1/2022 - 7/31/2023	General Revenue (GR)	This new MOU is a collaboration between SUDOP and The Harris Center wherein SUDOP will provide outreach and engagement service to individuals with a substance and/or alcohol use disorders to help clients have stabilization in recovery. SUDOP will also provide Mental Health Services and referrals to medical care on an as needed basis.
4	The Council on Recovery - Discovery Choices MOU	No	Discovering Choices Outpatient Treatment MOU	FY23 Renewal	9/1/2022 - 8/31/2023	General Revenue (GR)	Annual renewal of the Discovering Choices Outpatient Treatment MOU
	REVENUE						
5	Indigo House, Inc.	No	Consumer Driven Contract	New	6/1/2022 - 8/31/2023	State	New Provider Agreement to provide Day Habilitation Services for Consumer at one of the following locations. (Hillcroft Empowerment Center, Humble Service Center, Pasadena Day Program).
6	The Essentials HCS	No	Consumer Driven Contract	New	6/1/2022 - 8/31/2022	State Grant	New Provider Agreement to provide Day Habilitation Services ffor Consumeer at one of the following locations. (Hillcroft Empowerment Center, Humble Service Center, Pasadena Day Program).
7	NGC Healthcare Services, Inc.	No	Consumer Driven Contract	FY23 Renewal	09/01/22- 08/31/23	Revenue	Annual renewal of Revenue Agreement to provide Day Habilitation Services as requested by Consumer.
8	Divine Embrace Health Services	No	Consumer Driven Contract	FY23 Renewal	09/01/22- 08/31/23	Revenue	Annual renewal of Revenue Agreement to provide Day Habilitation Services as requested by Consumer.
9	Assured Quality Care Services, LLC	No	Consumer Driven Contract	FY23 Renewal	09/01/22- 08/31/23	Revenue	Annual renewal of Revenue Agreement to provide Day Habilitation Services as requested by Consumer.
10		No	Consumer Driven Contract	FY23 Renewal	09/01/22- 08/31/23	Revenue	Annual renewal of Revenue Agreement to provide Day Habilitation Services as requested by Consumer.
11		No	Consumer Driven Contract	FY23 Renewal	09/01/22- 08/31/23	Revenue	Annual renewal of Revenue Day Habilitation Services as requested by Consumer.
12	Weathers & Associates	No	Consumer Driven Contract	FY23 Renewal	09/01/22-08/31/23	Revenue	Annual renewal of Revenue Agreement to provide Behavioral and Community Support Services through the STARS Clinic.

0	N	lw		
A	4	IA	RR	S
Ments	A.	$\mathbb{E}$	MAR	R,
Menta	iber	ealti	ı anı	illi

2022	\$ 0.00						
	\$ 0.00						
Fiscal Year* (?)	Amount* (?)						
If contract is off-cycle, specify the contract term (?)							
5/10/2022	5/31/2025						
Contract Term Start Date * (?)	Contract Term End Date * (?)						
	<u>.</u>						
New Contract							
Funding Information*							
✓ Not Applicable (If there are no funds required)	Other						
☐ Interlocal	Consumer Driven						
Request for Quote	☐ Tag-On						
Request for Application	Request for Qualification						
Request for Proposal	Sole Source						
Competitive Bid	☐ Competitive Proposal						
Check all that Apply							
Procurement Method(s)*							
Other							
SOW-Change Order-Amendment#							
Revenue							
Grant Proposal							
Board Approval (Total NTE Amount is \$100,000.00+	·)						
Information Only (Total NTE Amount is Less than \$1							
Agenda Item Submitted For:*(?)	400,000,000						
CENTER SYSTEM-FORT WORTH	DD & THE UNIVERSITY OF MORTH TEXAS SCIENCE						
	DD & THE UNIVERSITY OF NORTH TEXAS SCIENCE						
Parties* (?)							
6/21/2022							
Date Presented*							
Full Board							
Resource Committee							
Presented To*							
2022-0418							
Contract ID #*	Contract ID #*						
JNIVERSITY OF NORTH TEXAS SCIENCE CENTER							
	Contractor*						
¥							
Contract Section	<u> </u>						
Methal Health and 100	Mile I Walt Table and Table 1 and 1						

Funding Source

General Revenue (GR)

Contract Description / Type* (?)				
Personal/Professional Services	☐ Consultant			
Consumer Driven Contract	✓ New Contract/Agreement			
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> </ul>			
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 Raing Provided * (?)			
THIS AGREEMENT WILL ALLOW STUDENTS ENROLLED AT THE UNIVERSITY OF NORTH TEXAS SCIENCE SYSTEM-FORT WORTH TO COMPLETE CLINICAL FIELD PLACEMENTS AS PART OF THEIR DEGREE REQUIREMENTS. THE STUDENTS WILL UTILIZE THE SKILLS GAINED THROUGH EDUCATION WHILE ADHERING TO AGENCY POLICY AND PROCEDURES.				
Contract Owner*				
Terence Freeman				
Previous History of Contracting with Vendor/Contrac	ctor*			
○ Yes ○ No ● Unknown				
Vendor/Contractor a Historically Underutilized Busir	ness (HUB)* (?)			
○ Yes ○ No ● Unknown				
8				
Community Partnership* (?)				
Yes  No  Unknown				
Specify Name*				
UNIVERSITY OF NORTH TEXAS SCIENCE CENTER				
SYSTEM-FORT WORTH				
Supporting Documentation Upload (?)				
Learning Objectives PSYC 4040 21-22.doc	56.5KB			
	04-			
Vendor/Contractor Contact Person				
Name*				
Name KENDRA HAAS				
Control of the Contro				
Address*				
Street Address				
3500 Camp Bowie Boulevard				
Address Line 2				
City	State / Province / Region			
Fort Worth	TX			
Postal / Zip Code	Country			
76107-2644	US			
Phone Number*				
817-735-5470				
Email*				
Kendra.Haas@unthsc.edu				
Budget Section	0			

Budget Units and Amounts Charged to each Budget Unit						
Budget Unit Number* 1108	Amount Charged	to Unit*	Expense/GL Code No.* N/A			
Budget Manager Brown, Erica		Secondary Budget Campbell, Ricardo	Manager			
Provide Rate and Rate Descriptions	s if applicable * (?)					
Project WBS (Work Breakdown Stro N/A	ucture)* (?)					
Requester Name Williams, Jedonne		Submission Date 5/10/2022				
Budget Manager Approval	(s)		0			
Approved by  Ekica Bhown		Approval Date 5/10/2022				
Procurement Approval	an kan a kan a kan a a a a a a a a a a a		0			
File Upload (?)						
Approved by		Approval Date				
Contract Owner Approval			0			
Approved by  Terence Preeman		Approval Date 5/11/2022				
Contracts Approval						
Approve*  Yes  No, reject entire submission Return for correction  Approved by*						
Shaskyia Behn		Approval Date* 5/13/2022				

#### **Executive Contract Summary Contract Section** Contractor\* Spring Branch Community Health Center Contract ID #\* 2022-0409 Presented To\* Resource Committee Full Board Date Presented\* 6/21/2022 Parties\* (?) Spring Branch Community Health Center and The Harris Center for Mental Health and IDD Agenda Item Submitted For: \* (?) ☑ Information Only (Total NTE Amount is Less than \$100,000.00) ■ Board Approval (Total NTE Amount is \$100,000.00+) 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 \* (?) 6/1/2022 6/30/2023 If contract is off-cycle, specify the contract term (?)

Fiscal Year\* (?) 2023

Amount\* (?)

\$ 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	Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Servi	
This agreement will allow Spring Branch Community Healt Substance Use Disorder Outreach Program (SUDOP) and SUDOP to provide outreach and engagement services to disorders or substance use problems that will help clients SUDOP will also provide Mental Health services and referneeded basis.	l Harris Center by allowing individuals with a substance use maintain retention in recovery.
Program Director: Geoffrey Ball	
Contract Owner*	
Kim Kornmayer	
Previous History of Contracting with Vendor/Contract	or*
Vendor/Contractor a Historically Underutilized Busine	ss (HUB)* (?)
○ Yes ○ No ● Unknown	
Community Partnership * (?)	
50 - 046-644 - 4-0-0004-0 <del></del>	
Yes    No    Unknown	
Specify Name *	
Spring Branch Community Health Center	
Supporting Documentation Upload (?)	
Spring Branch Community Health Center attachment 1.do	cx 68.66KB
Spring Branch Community Health Center attachment 2.do	
Vendor/Contractor Contact Person	
Name *	
Yandeh Jallow, Director of Supportive Housing	
10. P.C.3 (2018) - Color (p. 9 model * Control developed about 10.0 model * € (p. 0 model 2010 color 2010 col	
Address*	
800 W Sam Houston Pkwy S	
Suite 200	*
Houston	TX
77042-1908	US
Phone Number*	
Office:(713) 462-6565 Ext: 287	
(1 10) TOZ-0000 LAL ZUI	

Email*						
yjallow@sbchc.net			6			
Budget Section	NA CONTRACTOR STREET, ASSOCIATION					
Budget Units and Amounts Charged to each Budget Unit						
Budget Unit Number*	Amount Charge	d to Unit*	Expense/GL Code No.*			
9263	\$ 0.00		0			
Budget Manager Oshman, Jodel		Secondary Budge Macleod, Ann	t Manager			
And the sale description of the other contract of the second seco						
Provide Rate and Rate Description na	s if applicable * (?)					
Project WBS (Work Breakdown Str	ructure)*(?)					
Requester Name		Submission Date				
Singh, Patricia		5/4/2022				
Budget Manager Approva	l(s)					
Approved by						
Todel Oshman		Approval Date 5/4/2022				
Procurement Approval			<b>○</b>			
File Upload (?)						
Ammanual bu						
Approved by Sign		Approval Date				
Contract Owner Approval	and activities with a self-self-self-self-self-self-self-self-		lacktriangle			
Approved by						
Kin KORNMAYER		Approval Date 5/5/2022				
Contracts Approval						
Approve*						
<ul><li>Yes</li><li>No, reject entire submission</li></ul>						
Return for correction						

Approved by \*

Shaskyia Behn

Approval Date\*
5/5/2022

	0	The			
N.	12	H	ARI NI	H	3
0	(0)	CE	N/I	IC N	П
W	ntal I	100	lih a	mil	M

HARRIS Executive Contract Sum	imary
Contract Section	
Contractor*	
UT Health Houston ER Opioid Engagement System (HE	ROES)
Contract ID #*	
2022-0423	
Presented To*	
Resource Committee     Full Board	
Date Presented * 6/21/2022	
Parties* (?)	
UT Health Houston ER Opioid Engagement System (HE	ROES) and The Harris Center for Mental Health and
IDD	
Agenda Item Submitted For:* (?)	
✓ Information Only (Total NTE Amount is Less than \$10	
<ul><li>☐ Board Approval (Total NTE Amount is \$100,000.00+)</li><li>☐ Grant Proposal</li></ul>	)
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
Funding Information *	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
7/1/2022	7/31/2023
If contract is off-cycle, specify the contract term (?)	
Fiscal Year* (?)	Amount* (?)
2023	\$ 0.00
Fire dia a Constant	

Funding Source

General Revenue (GR)

Contract Description / Type * (?)			
Personal/Professional Services	Consultant		
Consumer Driven Contract	New Contract/Agreement		
	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 Services Being Provided* (?)  This agreement will allow UT Health Houston ER Opioid Engagement System (HEROES) to collaborate with SUDOP and Harris Center by allowing SUDOP to provide outreach and engagement service to individuals with a substance use disorders or alcohol use disorder problems that will help clients maintain retention in recovery. SUDOP will also provide Mental Health services and referrals to medical care on an as needed basis.  The agreement would need to include the following:  1. Mental Health, SUD and AUD referrals to be accommodated between the HEROES and SUDOP for MAT, SUD, AUD, OUD and MH Clients 2. HEROES providing Medication Management for OUD clients ages 16-17 3. Access to HEROS help for First Responders with MH/SUD 4. MAT for OUD and AUD 5. Additional Justice System support for SUD, AUD and MH clients			
Program Director: Geoffrey Ball  Contract Owner*			
Kim Kornmayer			
Previous History of Contracting with Vendor/Contractor  Yes No Unknown	or*		
Vendor/Contractor a Historically Underutilized Busines  ○ Yes ○ No ● Unknown	ss (HUB)* (?)		
Community Partnership * (?)			
Yes  No  Unknown			
Specify Name* UT Health Houston ER Opioid Engagement System (HEROES)			
Supporting Documentation Upload (?)			
Vendor/Contractor Contact Person			
Andrea J Yatsco, Associate Director / Assistant Research Professor			

Address	raille.		
Street Address			
7000 Fannin Street			
Address Line 2			
Suite 190 City	State / Province / R	egion	
Houston	TX	egion	
Postal / Zip Code	Country US		
77030-5400	US		
Phone Number*			
713.500.3581			
Email*			
Andrea.J.Yatsco@uth.tmc.edu			
Budget Section		•	
Budget Units and Amounts	Charged to each Budge	t Unit	
Budget Offits and Amounts	S Charged to each budge	COME	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*	
9263	\$ 0.00	0000	
Pudget Menager	Saaandami Bi	ideat Managar	
Budget Manager		udget Manager	
Oshman, Jodel	Macleod, Ann		
Provide Rate and Rate Descriptions	s if applicable * (?)		
Project WBS (Work Breakdown Stro	ucture) * (?)		
Requester Name	Submission D	Date	
Singh, Patricia	5/18/2022		
Budget Manager Approval	(s)	•	
	(s)	•	
Budget Manager Approval			
Approved by	Approval Date		
Approved by	Approval Date		
Approved by	Approval Date		
Approved by  Sedel Oshman	Approval Date		
Approved by  Sodel Oshman  Procurement Approval  File Upload (?)	Approval Date 5/18/2022		
Approved by  Sodel Oshman  Procurement Approval  File Upload (?)	Approval Date		
Approved by  Sodel Oshman  Procurement Approval  File Upload (?)	Approval Date 5/18/2022		
Approved by  Sodel Oshman  Procurement Approval  File Upload (?)	Approval Date 5/18/2022		

Approval Date

Fin Fornmayse 5/19/2022

Contracts Approval

Approve\*

Yes

No, reject entire submission
Return for correction

Approved by\*

Approval Date\*

Shaskyia Behn

5/19/2022

# HARRIS CENTER 100

Mental Health and IDD	
Current Fiscal Year Contract Information	
Current Fiscal Year	
2022	
Contract ID#*	
2021-0228	
Contractor Name *	
The Council on Recovery - Discovery Choices MOU	
Service Provided* (?)	
Discovering Choices Outpatient Treatment MOU	
	*
Renewal Term Start Date*	Renewal Term End Date*
9/1/2022	8/31/2023
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)	
✓ Information Only (Total NTE Amount is Less than \$100	0,000,000
Board Approval (Total NTE Amount is \$100,000.00+)	2,500.00)
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
Contract Description / Type	
<ul><li>Personal/Professional Services</li></ul>	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
Vendor/Contractor a Historically Underutilized Busine	ess (HUB) (?)
<ul><li>No</li></ul>	
Unknown	

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 0.00
Rate(s)/Rate(s) Description
Unit(s) Served* N/A
G/L Code(s)* N/A
Current Fiscal Year Purchase Order Number* N/A
Contract Requestor*  Lance Britt
Contract Owner* Lance Britt
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*    Yes  No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes • No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)
● Yes ○ No  Did Contractor render services consistent with Agency policy and procedures?*  (?)
● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)   No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  ● Yes ○ No

Renewal Information for Next Fiscal Year			
Budget Units and Amounts	s Charged to each	Budget Un	it
Budget Unit Number* 2200	Amount Charged to U \$ 0.00	nit*	Expense/GL Code No.*
Budget Manager* Shelby, Debbie		ondary Budget a, Angelica	Manager*
Fiscal Year* (?)	Amo \$ 0.0	ount* (?)	1
Next Fiscal Year Not to Exceed Am			
Contract Funding Source* General Revenue (GR)			
Contract Content Changes	<b>)</b>		0
Are there any required changes to ○ Yes  No	the contract language?*	(?)	
Will the scope of the Services chan  Yes No	ge?*		
Is the payment deadline different the Yes  No	nan net (45)?*		
Are there any changes in the Perfo  Yes No	rmance Targets?*		
Are there any changes to the Subm	nission deadlines for not	es or supportir	ng documentation?*
File Upload (?)			
Contract Owner			0
Contract Owner* (?) Please Select Contract Owner			
Lance Britt Budget Manager Approval	(s)		
Approved by	t own		
Debbie Chambers Shelby			



# Marris Executive Contract Summary

Mental Health and IDD	
Contract Section	<u> </u>
C-1*	
Contractor*	
Indigo House, Inc.	
Contract ID #*	
2022-0425	
Presented To*	
Resource Committee	
Full Board	
Date Presented *	
6/21/2022	
Parties* (?)	Hause Inc.
The Harris Center for Mental Health and IDD and Indigo	House, Inc.
Agenda Item Submitted For:* (?)	
Information Only (Total NTE Amount is Less than \$1	
☐ Board Approval (Total NTE Amount is \$100,000.00+)	
☐ Grant Proposal	
✓ Revenue	
SOW-Change Order-Amendment#  Other	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	○ Competitive Proposal
Request for Proposal	Sole Source
Request for Application	Request for Qualification
<ul> <li>☐ Request for Quote</li> <li>☐ Interlocal</li> </ul>	☐ 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 * (?)
6/1/2022	8/31/2023
If contract is off-cycle, specify the contract term (?)	
06-01-2022 through 08-31-2023	
Fiscal Year* (?)	
2022	
Funding Source*	
State	

Contract Description / Type " (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
<ul> <li>Memorandum of Understanding</li> </ul>	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 consumers from this provider has requested to recei	
one of our Day Program locations. (Hillcroft Empowerme	T
Pasadena Day Program0.	
Contract Owner*	
Lily Pan	
Previous History of Contracting with Vendor/Contract	tor*
Yes O No O Unknown	
Please add previous contract dates and what service	s were provided*
09-01-2020 through 08-31-2021.	
The state of the control of the cont	
Vendor/Contractor a Historically Underutilized Busine	ess (HUB)* (?)
○ Yes ○ No ⊚ Unknown	
Community Partnership* (?)	
○ Yes ○ No ● Unknown	
Supporting Documentation Upload (?)	
Rate Charges HCS and TxHmL Providers Fiscal Year 20	23.docx 12.93KB
Vendor/Contractor Contact Person	
Veridon/Contractor Contact Ferson	
Name*	
Donald Smothers	
Address*	
Street Address	
6423 Indigo Street	
Address Line 2	
Same as above City	State / Province / Region
Houston	TX
Postal / Zip Code	Country
77074-7202	US
Phone Number*	
832.382.4267	
Email*	
indigohouseinc@msn.com	
Parameter and the control of the con	
Budget Section	。

Budget Units and Amounts	s Charged to e	ach Budget Un	it
Budget Unit Number*	Amount Charge \$ 0.00	d to Unit*	Expense/GL Code No.*
Budget Manager Adams-Austin, Mamie		Secondary Budget Downey, Michael	Manager
Provide Rate and Rate Description See supporting data uploaded.	s if applicable * (?)		
Project WBS (Work Breakdown Str	ructure)* (?)		
Requester Name Wills, Thomas		Submission Date 5/27/2022	
Budget Manager Approva	l(s)	gang di Salar malanda and di Salar di S	6
Approved by  Mamie Adams-Austin		Approval Date 5/27/2022	
Procurement Approval	was the second second		<u> </u>
File Upload (?)			
Approved by		Approval Date	
Contract Owner Approval		and the State of the Control of the	0
Approved by  Lily Pan		Approval Date 5/27/2022	
Contracts Approval	Annual Control of the	na tali i Marana ang kaong dalah saka saka ang	
Approve*  Yes  No, reject entire submission Return for correction  Approved by*		Approval Date*	
Shaskyia Behn		6/1/2022	

# SQ TARRIS Executive Contract Summa

Mental Health and IDD	
Contract Section	
*	
Contractor*	
The Essentials HCS	
Contract ID #*	
2022-0416	
÷	
Presented To *	
Resource Committee	
⊝ Full Board	
Date Presented*	
6/21/2022	
*	
Parties* (?)	
The Harris Center for Mental Health and IDD and The E	ssentials HCS Program.
Agenda Item Submitted For: * (?)	
☐ Information Only (Total NTE Amount is Less than \$10	00,000.00)
Board Approval (Total NTE Amount is \$100,000.00+)	
Grant Proposal	
✓ Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s) *	
Competitive Bid	Competitive Proposal
<ul><li>☐ Request for Proposal</li><li>☐ Request for Application</li></ul>	<ul><li>☐ Sole Source</li><li>☐ Request for Qualification</li></ul>
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 * (?)
6/1/2022	8/31/2022
	0/01/2022
If contract is off-cycle, specify the contract term (?)	
NA	
Fiscal Year* (?)	
2022	
Funding Source*	
State Grant	

Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
<ul> <li>Memorandum of Understanding</li> </ul>	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 Servi	ces Being Provided* (?)
The consumers from this provider has requested to receiv	
one of our Day Program locations.	
Contract Owner*	
Mike Downey	
Previous History of Contracting with Vendor/Contract	or*
○ Yes ● No ○ Unknown	
Vendor/Contractor a Historically Underutilized Busine	ss (HUR)* (?)
658	33 (1102)
○ Yes ○ No ⊚ Unknown	
Community Partnership* (?)	
○ Yes ○ No ⑥ Unknown	
Supporting Documentation Upload (?)	
Supporting Documentation Opioad (1)	
Vendor/Contractor Contact Person	
Name*	
Sandra Cornelius	
Address*	
PO Box	
300809	
Texas	77230
Houston	PO Box
Phone Number*	
713.598.2424	
Email*	
essentialshcs@gamil.com	
Budget Section	$^{\circ}$
Budget Units and Amounts Charged to e	each Budget Unit

Budget Unit Number\* Expense/GL Code No.\* Amount Charged to Unit\* 3585 \$ 0.00 000 **Budget Manager** Secondary Budget Manager Adams-Austin, Mamie Downey, Michael Provide Rate and Rate Descriptions if applicable \* (?) See attached. Project WBS (Work Breakdown Structure) \* (?) Requester Name **Submission Date** Wills, Thomas 5/9/2022 Budget Manager Approval(s) Approved by Approval Date Mamie Adams-Austin 5/9/2022 Procurement Approval File Upload (?) Approved by Approval Date Sign **Contract Owner Approval** Approved by Approval Date Michael D Downey 5/10/2022 Contracts Approval Approve\* Yes No, reject entire submission Return for correction Approved by \* Approval Date\* Shaskyia Behn 5/10/2022

# HARRIS Annual Renewal Evaluation

Mental Health and IDD	tari na 1940 ang manganggan na manganggan na manganggan na manggan na manganggan na manggan na manggan na mang
Current Fiscal Year Contract Information	n 📀
Current Fiscal Year	
2022	
Contract ID#*	
6403	
Contractor Name*	
NGC Healthcare Services, Inc.	
Service Provided* (?)	
The Contractor shall provide Day Habilitation Services for	or designated, agreed upon
Consumers	and
Renewal Term Start Date *	Renewal Term End Date *
9/1/2022	8/31/2023
3/1/2022	0/31/2023
Term for Off-Cycle Only (For Reference Only)	
N/A	
Agenda Item Submitted For: (?)	
Information Only (Total NTE Amount is Less than \$1	00,000.00)
Board Approval (Total NTE Amount is \$100,000.00+)	
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
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
<ul> <li>□ Pooled Contract</li> <li>☑ Renewal of Existing Contract</li> </ul>	☐ Lease ☐ Other
Noneward Existing Contract	Co Othor
Vendor/Contractor a Historically Underutilized Busin	ness (HUB) (?)
○ No	
<ul><li>Unknown</li></ul>	

	Contract NTE (Old Text Field For Reference) (?) 0
	Contract NTE* (?) \$ 0.00
	Rate(s)/Rate(s) Description  Intermittent (LON 1) (HCS) Limited (LON 5) (BCS) Extensive  · (tON 8) (HCS) Pervasive (LON 6) (HCS) TxHmL  (DAYHAB)* Employment Assistance Supportive Employment  Ba.U · \$25.32/day per consumer \$27.86/day pereonsumer  \$32.91/day per consumer \$41.11/day per consumer \$25.57  /day per consumer \$25.00 per hour
	Unit(s) Served*
	G/L Code(s)*
	Current Fiscal Year Purchase Order Number*
	Contract Requestor* Thomas Wills
	Contract Owner* Tiffanie Williams-Brooks
	File Upload (?)
-	Evaluation of Current Fiscal Year Devicemens
	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*
	Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes   ○ No
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)
•	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?* Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?* Yes No  Did Contractor adhere to the contracted schedule?* Yes No  Were reports, billing and/or invoices submitted in a timely manner?* Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* Yes Yes No
•	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the

Renewal Determination			
Is the contract being renewed	for next fiscal year with this Contracto	r?* (?)	
Yes  No			
Renewal Information for	or Next Fiscal Year		
No. of the state o			
Budget Units and Amo	unts Charged to each Budge	t Unit	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*	
3585	\$ 0.00	000	
Budget Manager*	Secondary Bu	udget Manager*	
Adams-Austin, Mamie	Downey, Micha	ael	
Fiscal Year* (?)	Amount* (?)		
2023	\$ 0.00		
Contract Content Changes  Are there any required changes to the contract language?* (?)			
<ul><li>Yes ● No</li><li>Will the scope of the Services change?*</li><li>Yes ● No</li></ul>			
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 (?)			
Rate Charges HCS and TxHmL Providers Fiscal Year 2023.docx 12.93KB			
Contract Owner			
Contract Owner* (?)			
Please Select Contract Owner Lily Pan			
Budget Manager Approval(s)			

Approved by	
Mamie Adams Austin	
Contract Owner Approval	
Approved by	
Lity Pan	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/31/2022

HARRIS CENTER for Mental Health and IDI

Current Fiscal Year Contract Information	Ó	
Current Fiscal Year 2022		
Contract ID#* 6410		
Contractor Name*  Divine Embrace Health Services		
Service Provided* (?) The Contractor shall provide Day Habilitation Services for designated, agreed upon Consumers		
Renewal Term Start Date* 9/1/2022	Renewal Term End Date* 8/31/2023	
Term for Off-Cycle Only (For Reference Only) N/A		
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100  Board Approval (Total NTE Amount is \$100,000.00+)  Grant Proposal  Revenue  SOW-Change Order-Amendment#	0,000.00)	
Other  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)	<ul> <li>□ Competitive Proposal</li> <li>□ Sole Source</li> <li>□ Request for Qualification</li> <li>□ Tag-On</li> <li>✔ Consumer Driven</li> <li>□ Other</li> </ul>	
Contract Description / Type		
Personal/Professional Services Consumer Driven Contract Memorandum of Understanding Affiliation or Preceptor BAA/DUA Pooled Contract Renewal of Existing Contract	Consultant  New Contract/Agreement  Amendment to Existing Contract  Service/Maintenance  IT/Software License Agreement  Lease  Other	
Vendor/Contractor a Historically Underutilized Busine  Yes  No  Unknown	ess (HUB) (?)	

	Contract NTE (Old Text Field For Reference) (?) 0
	Contract NTE * (?)
	\$ 0.00
	Rate(s)/Rate(s) Description  Intermittent (LON 1) (HCS) Limited (LON 5) (HCS) Extensive (LON 8) (HCS) Pervasive (LON 6) (HCS) TxHmL (DAY BAB)* Employment Assistance Supportive Employment Bak \$2S.32/day per consumer \$27 .86/day per consumer \$25.57 /day per consumer \$25.00 per hour
	Unit(s) Served*
	G/L Code(s)* 0
	Current Fiscal Year Purchase Order Number*
	Contract Requestor* Thomas Wills
	Contract Owner* Tiffanie Williams-Brooks
	File Upload (?)
THE REAL PROPERTY.	Evaluation of Current Fiscal Year Performance
Accommon agency of the last of	Evaluation of Current Fiscal Year Performance  Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
MANAGEMENT AND ADDRESS OF THE PERSONS ASSESSED.	Have there been any significant performance deficiencies within the current fiscal year?*
NAME AND ADDRESS OF THE PARTY O	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)
	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?* Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?* Yes No  Did Contractor adhere to the contracted schedule?* Yes No  Were reports, billing and/or invoices submitted in a timely manner?* Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* Yes Yes
THE PROPERTY OF THE PROPERTY O	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)  Yes No
THE PROPERTY OF THE PROPERTY O	Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?* Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?* Yes No  Did Contractor adhere to the contracted schedule?* Yes No  Were reports, billing and/or invoices submitted in a timely manner?* Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* Yes Yes

Renewal Determination			
Is the contract being renewed for	or next fiscal year with this Contracto	or?* (?)	
● Yes ○ No			
Renewal Information for Next Fiscal Year			
Pudget Units and Amou	nto Charred to sook Budge	111-4	
	nts Charged to each Budge		
Budget Unit Number* 3585	Amount Charged to Unit* \$ 0.00	Expense/GL Code No.*	
Budget Manager*		udget Manager*	
Adams-Austin, Mamie	Downey, Michael		
Fiscal Year* (?)	Amount* (?)		
2023	\$ 0.00		
Next Fiscal Year Not to Exceed	Amount for Master Pooled Contracts		
000	The same for master 1 series as a series as a		
Contract Funding Source*			
State			
Contract Content Chang	jes	<u> </u>	
Are there any required changes to the contract language?* (?)			
○ Yes  ® No			
Will the scope of the Services of	hange?*		
○ Yes   No	in.		
Is the payment deadline different than net (45)?*  Yes  No			
	erformance Targets?*		
Are there any changes in the Performance Targets?*  Ves  No			
Are there any changes to the Su	ubmission deadlines for notes or sup	porting documentation?*	
O Yes  No			
File Upload (?)	avoide as Fire at Vena 2002 de ave	40 00VD	
Rate Charges HCS and TxHmL Pr	roviders Fiscal Year 2023.docx	12.93KB	
Contract Owner		<b>O</b>	
Contract Owner* (?)			
Please Select Contract Owner Lily Pan			
	(2)(2)		
Budget Manager Approval(s)			

Approved by	
Mamie Adams-Austin	
Contract Owner Approval	ĵ.
Approved by	
Lity Pan	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/31/2022

	OF SHEET		
deve	1110		10
$\Re$	## BAN	ни	388
die	Tellan	Id N PM	100
	PRINIP	10 0 1/1	$\chi_{j0}$
Managal	a to company	100000	11010

Mental Health and IDD		
Current Fiscal Year Contract Informatio	n	
	and the second section of the second section of the second	
Current Fiscal Year 2022		
Contract ID#*		
2021-0141		
Contractor Name*		
Assured Quality Care Services, LLC		
Service Provided* (?)		
Day Hab Contract		
Renewal Term Start Date*	Renewal Term End Date*	
9/1/2022	8/31/2023	
Term for Off-Cycle Only (For Reference Only)		
Agenda Item Submitted For: (?)		
Information Only (Total NTE Amount is Less than \$10		
Board Approval (Total NTE Amount is \$100,000.00+)		
Grant Proposal		
Revenue		
<ul><li>SOW-Change Order-Amendment#</li><li>■ Other</li></ul>		
Procurement Method(s)*		
Check all that Apply		
Competitive Bid	☐ Competitive Proposal	
Request for Application	<ul><li>☐ Sole Source</li><li>☐ Request for Qualification</li></ul>	
Request for Application Request for Quote	Tag-On	
Interlocal	Consumer Driven	
Not Applicable (If there are no funds required)	☐ Other	
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     Service → Ser	
BAA/DUA	☐ IT/Software License Agreement	
Pooled Contract	Lease	
Renewal of Existing Contract	☐ Other	
Vendor/Contractor a Historically Underutilized Busin	ess (HUB) (?)	
○ Yes		
No		
O Unknown		

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 0.00
Rate(s)/Rate(s) Description Revenue Agreement
Unit(s) Served* N/A
G/L Code(s)* N/A
Current Fiscal Year Purchase Order Number* N/A
Contract Requestor* Thomas Wills
Contract Owner* Lily Pan
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  Yes  No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*  ■ Yes □ No
Did Contractor adhere to the contracted schedule?* (?)  ● Yes ⊝ No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  ■ Yes □ No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  ● Yes ○ No
Maintained legally required standards for certification, licensure, and/or training?* (?)  • Yes • No
Renewal Determination
Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes • No

Renewal Information for Next Fiscal Year			
Budget Units and Amounts Charged to each Budget Unit			
Budget Unit Number*	Amount Charged to Unit* \$ 0.00	Expense/GL Code No.*	
Budget Manager* Adams-Austin, Mamie	Secondar Downey, N	y Budget Manager* /lichael	
Fiscal Year* (?) 2023	Amount* \$ 0.00	(?)	
Next Fiscal Year Not to Exceed A	mount for Master Pooled Contra	acts	
Contract Funding Source*			
Contract Content Chang	es	<u> </u>	
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  Yes  No	t than net (45)?*		
Are there any changes in the Performance Targets?*  O Yes  No			
Are there any changes to the Submission deadlines for notes or supporting documentation?*  Yes  No			
File Upload (?) Rate Charges HCS and TxHmL Pro	oviders Fiscal Year 2023.docx	12.93KB	
Contract Owner			
Contract Owner* (?) Please Select Contract Owner Lily Pan			
Budget Manager Approv	al(s)		
Approved by			
Mamie Adams-Austin			

Approved by	
Lity Pan	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Shaskyia Behn	5/31/2022

# HARRIS CENTER or Annual Renewal Evaluation

Mental Health and IDD		
0 15 17 0 1 11 0		
Current Fiscal Year Contract Informatio	n 💍	
Current Fiscal Year		
2022		
Contract ID#*		
2022-0368		
Contractor Name*		
Citi Health Group Inc.		
Service Provided * (?)		
The consumers assigned to this provider has chosen to	attend the Hillcroft Empowerment	
Center		
Renewal Term Start Date*	Renewal Term End Date *	
9/1/2022	8/31/2023	
Term for Off-Cycle Only (For Reference Only)		
N/A		
Agenda Item Submitted For: (?)		
☐ Information Only (Total NTE Amount is Less than \$10	00.000.00)	
Board Approval (Total NTE Amount is \$100,000.00+)		
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	
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	
Vendor/Contractor a Historically Underutilized Busin	ness (HUB) (?)	
Yes		
○ No		
<ul><li>Unknown</li></ul>		

	Contract NTE (Old Text Field For Reference) (?) 0
	Contract NTE* (?) \$ 0.00
	Rate(s)/Rate(s) Description
	Unit(s) Served* 3585
	G/L Code(s)*
	Current Fiscal Year Purchase Order Number* N/A
	Contract Requestor* Thomas Wills
	Contract Owner* Lily Pan
	File Upload (?)
Spinister Spinis	Evaluation of Current Fiscal Year Performance
	Have there been any significant performance deficiencies within the current fiscal year?*  ○ Yes ● No
	Were Services delivered as specified in the contract?* <ul> <li>● Yes</li> <li>○ No</li> </ul>
	Did Contractor perform duties in a manner consistent with standards of the profession?*   • Yes • No
	Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
	Were reports, billing and/or invoices submitted in a timely manner?* (?)  ● Yes ○ No
	Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)  • Yes • No
	Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes • No
	Maintained legally required standards for certification, licensure, and/or training?* (?)  ● Yes ○ No
Section 1997	Renewal Determination
	Is the contract being renewed for next fiscal year with this Contractor?* (?)  • Yes • No

## Renewal Information for Next Fiscal Year Budget Units and Amounts Charged to each Budget Unit Budget Unit Number\* Amount Charged to Unit\* Expense/GL Code No. \* 3585 \$ 0.00 000 Budget Manager\* Secondary Budget Manager\* Adams-Austin, Mamie Downey, Michael Fiscal Year\* (?) Amount\* (?) 2023 \$ 0.00 Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts 000 Contract Funding Source\* State **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 (?) Rate Charges HCS and TxHmL Providers Fiscal Year 2023.docx 12.93KB Contract Owner Contract Owner\* (?) Please Select Contract Owner Lily Pan Budget Manager Approval(s) Approved by Mamie Oddams-Odustin

Contract Owner Approval	
Approved by	
Lity Pan	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
<ul> <li>Return for correction</li> </ul>	
Approved by *	
	Approval Date*
Shaskyia Behn	5/31/2022

00	The			
$\Re$	ATT.	ARI	RIS	
010	CH	NT	DIE	fo
Monto	District	O. S.	WIN.	កា

### **Annual Renewal Evaluation**

### **Current Fiscal Year Contract Information Current Fiscal Year** 2022 Contract ID#\* 6618 Contractor Name\* Weathers & Associates Service Provided\* (?) The Contractor shall provide day habilitation services for designated, agreed upon consumers Renewal Term Start Date\* Renewal Term End Date\* 9/1/2022 8/31/2023 Term for Off-Cycle Only (For Reference Only) N/A Agenda Item Submitted For: (?) Information Only (Total NTE Amount is Less than \$100,000.00) Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# Other Procurement Method(s)\* Check all that Apply Competitive Proposal Competitive Bid Request for Proposal Sole Source Request for Application Request for Qualification Tag-On Request for Quote Interlocal ✓ Consumer Driven Other ✓ Not Applicable (If there are no funds required) Contract Description / Type Personal/Professional Services Consultant New Contract/Agreement Consumer Driven Contract Amendment to Existing Contract Memorandum of Understanding Service/Maintenance Affiliation or Preceptor BAA/DUA ☐ IT/Software License Agreement Pooled Contract Lease Renewal of Existing Contract Other Vendor/Contractor a Historically Underutilized Business (HUB) (?) Yes O No Unknown

N/A	
Contract NTE* (?) \$ 0.00	
Rate(s)/Rate(s) Description Intermittent (HCS) \$22.05/day per consumer Limited (HCS) \$24.10/day per consumer Extensive (HCS) \$31.78/day per consumer Pervasive (HCS) \$39.63/day per consumer TxHmL (DAY HAB)* \$21.08/day per consumer Employment Assistance \$25.00 per hour Supportive Employment \$25.00 per hour	
Unit(s) Served*	
G/L Code(s)* 0	
Current Fiscal Year Purchase Order Number*	
Contract Requestor* Thomas Wills	
Contract Owner* Lily Pan	
File Upload (?)	
Evaluation of Current Fiscal Year Performance	
Evaluation of ourient riscal real remains.	
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No	
Have there been any significant performance deficiencies within the current fiscal year?*	
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*	
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*	
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*  Did Contractor adhere to the contracted schedule?*	
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?*(?)	
Have there been any significant performance deficiencies within the current fiscal year?*  Yes No  Were Services delivered as specified in the contract?*  Yes No  Did Contractor perform duties in a manner consistent with standards of the profession?*  Yes No  Did Contractor adhere to the contracted schedule?*(?)  Yes No  Were reports, billing and/or invoices submitted in a timely manner?*(?)  Yes No  Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the	

Renewal Determination				
Is the contract being renewed for next fiscal year with this Contractor?* (?)				
Yes     No				
Renewal Information for	Next Fiscal Year	0		
Budget Units and Amounts Charged to each Budget Unit				
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*		
3585	\$ 0.00	000		
Budget Manager*	Secondary I	Budget Manager*		
Adams-Austin, Mamie	Downey, Mic	hael		
Fiscal Year* (?)	Amount* (?)			
2023	\$ 0.00			
	mount for Master Pooled Contract	s		
000				
Contract Funding Source*				
State				
Contract Content Changes				
Are there any required changes t	o 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 Per	formance Targets?*			
○ Yes ● No	ionnance rargets?			
Are there any changes to the Submission deadlines for notes or supporting documentation?*  Yes  No				
File Upload (?)  Rate Charges HCS and TxHmL Providers Fiscal Year 2023.docx 12.93KB				
Nate Onlarges 1100 and TATITIC Floviders Fiscal Teal 2020.000X 12,93ND				
Contract Owner				
Contract Owner* (?)				
Please Select Contract Owner				
Lily Pan				
Budget Manager Approval(s)				

Approved by	
Mamie Oddams-Odustin	
Contract Owner Approval	
Approved by	
Lity Pan	
Contracts Approval	
Approve*	
<ul><li>Yes</li></ul>	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by*	
	Approval Date*
Shaskyia Behn	5/17/2022



Current Fiscal Year Contract Information	
Current Fiscal Year 2022	
Contract ID#* 6628	
Contractor Name* Weathers & Associates	
Service Provided* (?) DayHab Services	
Renewal Term Start Date* 9/1/2022	Renewal Term End Date* 8/31/2023
Term for Off-Cycle Only (For Reference Only) N/A	
Agenda Item Submitted For: (?)  Information Only (Total NTE Amount is Less than \$100 Board Approval (Total NTE Amount is \$100,000.00+) Grant Proposal Revenue SOW-Change Order-Amendment# 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 Qualification
Request for Quote Interlocal	☐ Tag-On  ✓ Consumer Driven
Not Applicable (If there are no funds required)	Other
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
Vendor/Contractor a Historically Underutilized Busine  Yes  No  Unknown	ess (HUB) (?)

Contract NTE (Old Text Field For Reference) (?) 0
Contract NTE* (?) \$ 0.00
Rate(s)/Rate(s) Description  Behavioral Support Services @ a rate of \$72.12/ hour  Community Support Services@ a rate of \$29.96/hour
Unit(s) Served*
G/L Code(s)* 0
Current Fiscal Year Purchase Order Number*
Contract Requestor* Margo Childs
Contract Owner* Tiffanie Williams-Brooks
File Upload (?)
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  O Yes  No
Were Services delivered as specified in the contract?*  ● Yes ○ No
Did Contractor perform duties in a manner consistent with standards of the profession?*   No
Did Contractor adhere to the contracted schedule?* (?)  • Yes • No
Were reports, billing and/or invoices submitted in a timely manner?* (?)  • Yes O No
Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)  • Yes • No
Did Contractor render services consistent with Agency policy and procedures?* (?)  • Yes • No
Maintained legally required standards for certification, licensure, and/or training?* (?)  ■ Yes ○ No
Renewal Determination

Is the contract being renewed for next fiscal year with this Contractor?* (?)					
Yes    No					
Renewal Information for Next Fiscal Year					
Budget Units and Amounts Charged to each Budget Unit					
Budget Unit Number*	Amount Charged to	Amount Charged to Unit*			
3638	\$ 0.00		n/a		
Budget Manager*	S	Secondary Budget Manager*			
Adams-Austin, Mamie	D	Downey, Michael			
Fiscal Year* (?)	A	mount* (?)			
2023	\$	0.00			
Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts					
Contract Funding Source*					
State					
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 (?)	rovidere Fiscal Veer door	12.0	2ND		
Rate Charges HCS and TxHmL Providers Fiscal Year .docx 12.93KB					
Contract Owner				<u>^</u>	
Contract Owner* (?)					
Please Select Contract Owner					
Janice Baines					
Budget Manager Approval(s)					

Approved by

Contract Owner Approval

Approved by

Janice Baines

Contracts Approval

Approve\*

Yes

No, reject entire submission

Return for correction

Approved by\*

Approved by\*

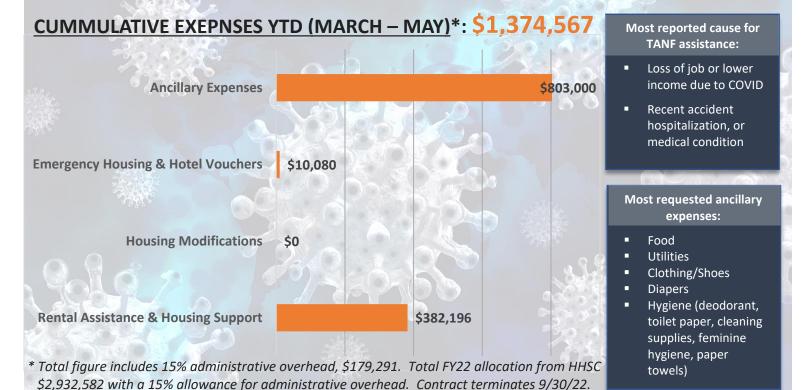
Approved by\*

Approval Date\*

5/16/2022

## EXHIBIT F-12

## TANF Pandemic Emergency Assistance Funds



#### **DEMOGRAPHICS**

#### **UNDUPLICATED # OF FAMILIES SERVED:705**

- AVERAGE AGE: 19 YEARS Range 1 year – 63 years
- AVERAGE # OF ADULTS IN HOUSEHOLD:2
  Range 1 8 adults
- AVERAGE # OF MINORS IN HOUSEHOLD:3
  Range 1 10 minors
- PRIMARY SERVICE DIVISION
   444 Children's Mental Health
   175 Adult Mental Health
   49 IDD/ECI

49 – IDD/ECI

30 – Forensics

7 – CPEP

PRIMARY DIAGNOSIS

209 – ADHD

148 – Major Depressive Disorder

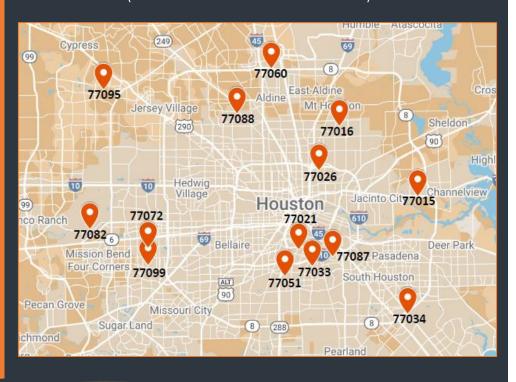
81 – Bipolar Disorder

77 - DMDD

48 - Conduct Disorder

#### ZIP CODES WITH MOST FREQUENCY

(11+ CLIENTS PER ZIP CODE)



## EXHIBIT F-13



# Moving From A Compliance Focus Program To A Culture Of Quality: The Harris Center Case Study

May 12, 2022 – 1:00 p.m. ET



Luming Li, MD, MHS
Chief Medical Officer
The Harris Center



Wayne Young
Chief Executive Officer
The Harris Center

### **Key Objectives & Purpose**

- Understand the "Why Now" for embedding a continuous quality improvement culture
- Understand the key difference between a compliance culture and a continuous quality improvement culture
- Understand the conflicts and challenges between performance requirements and continuous quality improvement
- Hear about one agency's evolution and steps for implementing a continuous learning culture

Organizations must embrace a culture of nimbleness, evolution, and learning to respond to constant change. This session will focus on how organizations can evolve into a learning culture - one that supports continuous learning and improvement while balancing the need for high levels of performance.



Compliance Versus
Continuous Quality
Improvement & Learning
Cultures: Key Differences



## **Continuous Quality Improvement Strategic Vision**

Move from a Quality Assurance/Compliance *Program* 

To a Quality Improvement
Centric *Organization* embedded
in a continuous improvementdriven culture



### **Summary Of Findings: Key Elements Of Compliance Culture**

**Regulatory Requirements** 

Required Reporting/Compliance Measure Reporting

**Six Sigma Tools** 

Minimum Focus on Training/Learning/Research

**Health and Safety/Adverse Incidents** 

**Quality Assurance** 

### Summary Of Findings: Key Elements Of A CQI Culture

**COMMUNICATION** — prominent language about continuous improvement; striving for excellence

ACCOUNTABILITY — focus on everyone accountable; all levels involved

**COLLABORATION** — systemically cross matrixed

**IMPROVEMENT** — focus on what can be learned; what can be improved

INNOVATION — significant commitment of time and money to evaluation and research; iterations

PERSONNEL — linking personal growth to company mission

## **Key Challenges & Inherent Conflicts**

- 1. Investment of Money, People and Time
- Conflict Between What is Externally Required vs. What is Internally Desired
- 3. Balance of Compliance/Regulatory with Continuous Learning Model
- 4. Inefficiency of Continuous Learning
  - Billable Time vs. Unbillable Time
- 5. Hierarchal vs. Cross Matrixed Organizations



## EXHIBIT F-14

#### Transforming Lives





### Moving from a Compliance Focus Program To a Culture of Quality: The Harris Center Case Study

- Mission: Transform the lives of people with behavioral health and IDD needs
- Vision: Empower people with behavioral health and IDD needs to improve their lives through an accessible, integrated and comprehensive recovery-oriented system of care



### The Harris Center

Houston, TX

As the largest behavioral and developmental disability care center in Texas, The Harris Center provides a full continuum of services to 88 sites across Harris County and serves over 80,000 individuals annually.

Services are offered in over 40+ languages to better serve one of the most diverse and multi-cultural communities in the nation.

The Harris Center is the state-designated Local Mental Health Authority and the Local Intellectual and Developmental Disability Authority serving Harris County, Texas.





# Full Continuum of Services in 88 Service Locations in Harris County





**Mental Health and Substance Use** 

**Disorders** 



**Intellectual and Developmental Disabilities** 



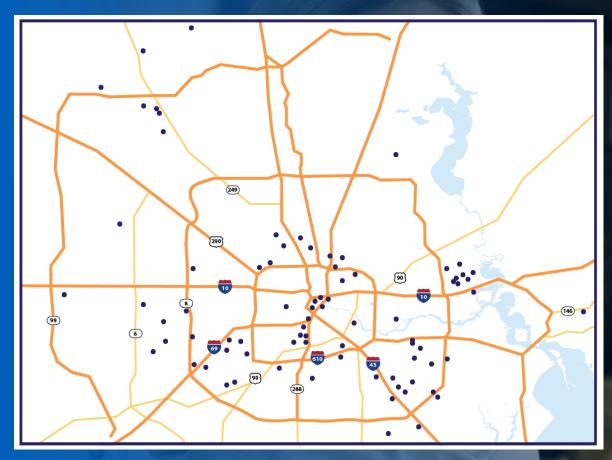
**Forensic** 



**Access/Crisis Line** 



Comprehensive Psychiatric Emergency Program





## **Reach of Services**



8oK+
Individuals
Served



24.3K Adult Mental Health



**6.8K**Children/Adolescent
Mental Health



20.8K
IDD & Autism
Services



155K Crisis Line Calls



**20K**COVID-19 Support Calls



1.9K911 Calls Diverted



**16.2K**Psychiatric Crisis



3.4K
Forensic Mental
Health





- Unique structural factors
  - Scope/Scale
    - Our organizational size allows us a bit of room try things that others might not be able to try
  - DSRIP
    - Brought focus on "outcome" or impact measures
      - Aligned funding to improvement in measures
    - Created real synergy with quality measures and revenue for those programs
  - Strong external partnerships
    - County/State/City
    - Academic institutions
    - Other healthcare organizations
    - Law enforcement
- EHR enhancement and investment
  - Adopted <u>Epic</u> in April 2021
    - Impact on partnership (hospital district and academic/hospital partnership)



### Organizational Journey on Quality/Safety

Context leading up to present day:

#### **External scrutiny**

- External Agency Assessments
- Featured news article
- Board focus on quality/safety creation of monthly Board Quality Committee
- State Performance Measures different stakeholders / different perspectives



## Formation of PI department

- Identified as strategic priority on strategic plan
- Expanded personnel to include Director role
- Investment in resource/training:
   Six Sigma certification for PI
   Specialists



### Enhancement in Quality Standards

- Pursuit of accreditation standards through CARF / CCBHC
- Pilot with Optum: Movement toward Value-based Care – focused on quality measures & cost



## The Harris Center

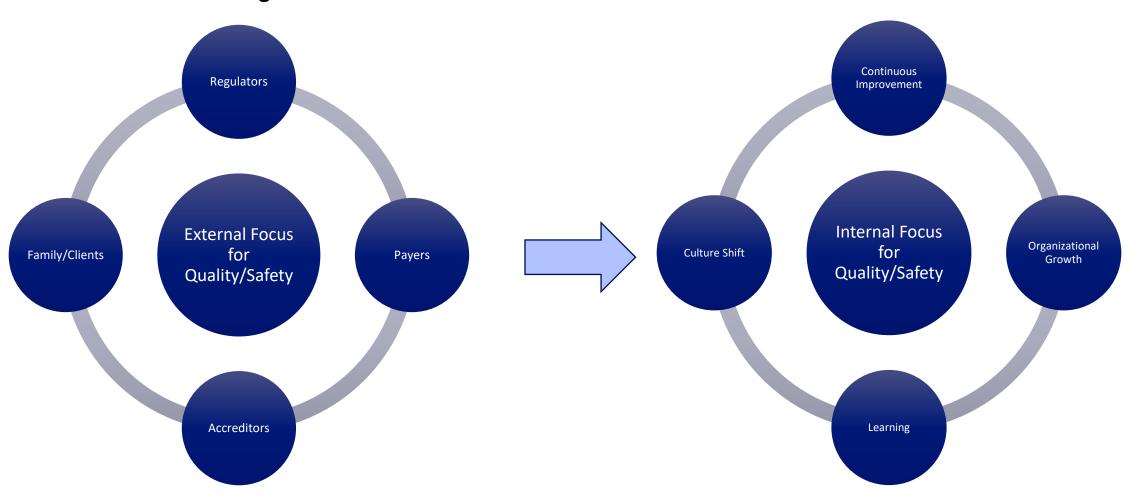
**Case Study** 

### What's the shift in mindset?



Compliance Mindset:
Do what's expected by
others to not get in trouble

Growth/Improvement Mindset: Always learning to provide the best possible care



### How does learning play a role?



#### **Learning Health Systems**



- Leadership commitment to a culture of continuous learning and improvement
- **Evidence** is used in real-time to guide care
  - IT methods employed to share new evidence with clinicians to improve decision-making
- Include patients as vital members of the learning team
- **Data and care experiences** used to improve care
- Continually assess outcomes refine processes and training to create a feedback cycle for learning and improvement





2022 - 2024 Strategic Plan Focus Areas



• Quality as a key focus:

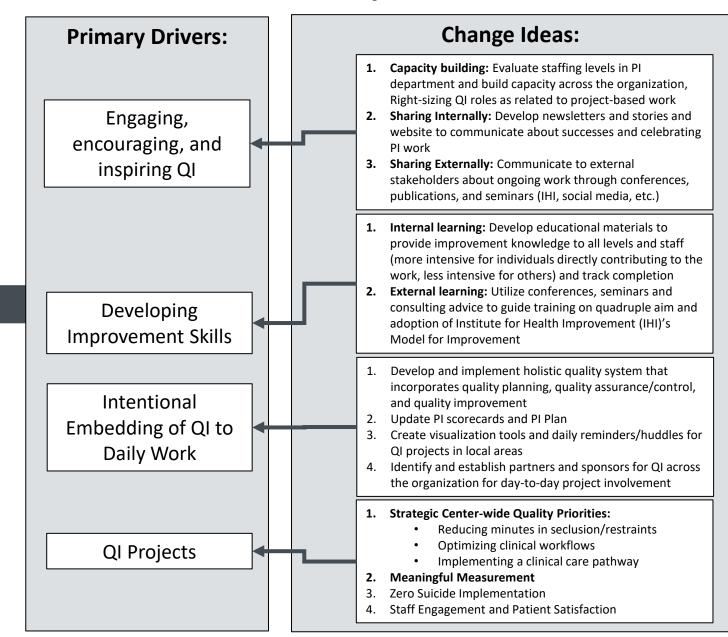
Develop and Implement Robust Quality Improvement Infrastructure Consistent with Industry Standards

#### **Quality Improvement at The Harris Center: Key Drivers**

Global Aim: To Transform the Lives of People with Behavioral Health and IDD Needs

SMART Aim: Develop and Implement Robust Quality Improvement (QI) Infrastructure Consistent with Industry Standards (by August 31, 2022)







### **Key Elements to Building a Robust QI Infrastructure**









Executive Oversight (Creating a VP-Level Position)



Clinical Project
Management Team
(Creating New Team of 5, including a Director)



**Analytics Team** (Realigning existing data analyst positions)

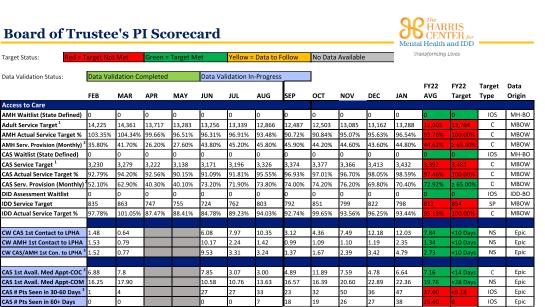


External Learning (Relief Performance Improvement Position & Consulting with Quality Experts)

## **Data/Measures:** Moving from Numbers to Trend Analysis and Focusing on Real-time Dashboard Building

Page 5 of 67



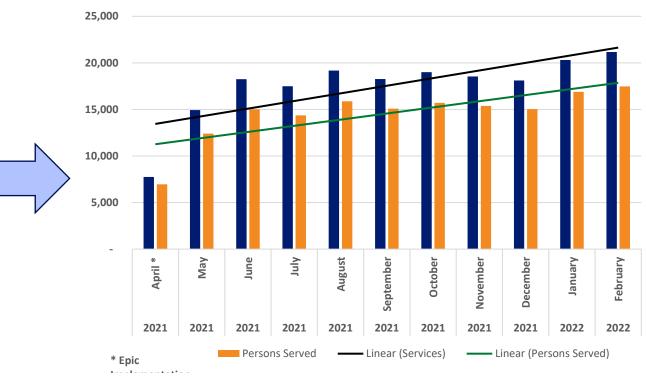


<sup>-</sup> AMH and CAS Service Targets continue to trend up. Presentation will provide a more in-depth look.

<sup>3-</sup> Pre-Epic reporting for these measures AMH and CAS limited the data capture for patient seen in 60- days category (the timing of when the report was run impacted the counts for individual appointments as the measure was captured prospectively). New data reporting for these measures are retrospectively captured based on all completed appointments and more accurately reflects total appointment counts.







<sup>2-</sup> State service provision data reporting includes only face to face and tele-video, and excludes telephone encounters. The state authorized the use of telephone encounters as a response to the COVID-19 pandemic and holds all LMHA's harmless for this measure. AMH would meet the target if telephone encounters were included in the data.

## Page 486 of 527 HARRIS CENTER for Mental Health and IDD Transforming Lives

## **Data/Measures:** Moving from Numbers to Trend Analysis and Focusing on Real-time Dashboard Building



## Page 487 of 527 The HARRIS CENTER for Mental Health and IDD Transforming Lives

## **Data/Measures:** Moving from Numbers to Trend Analysis and Focusing on Real-time Dashboard Building



### Organizational Supports: Enhancing Supports for Learning and Quality/Safety for Managers and Frontline Staff

Page 488 of 527

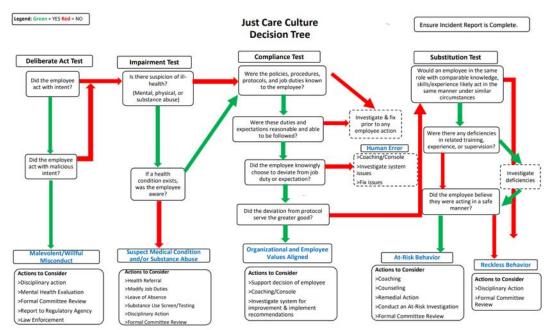
#### **Event Reporting:**

Launch better technology for event review



#### **Just Culture:**

**Build decision support tool for managers** 







## **General Trainings:** Trainings for staff members throughout the organization

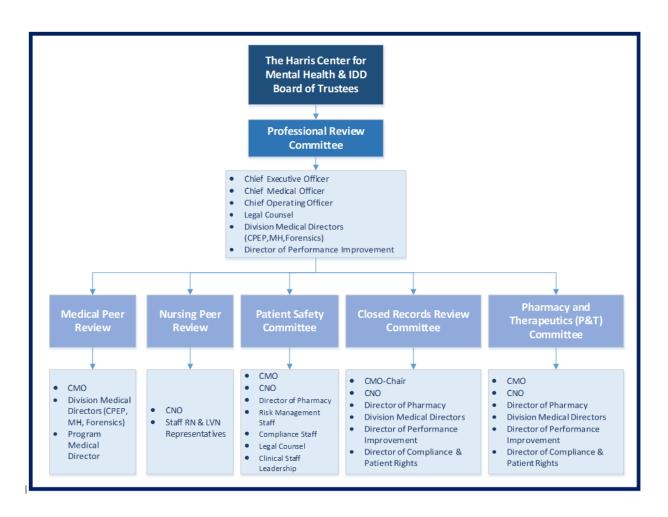
- Key topics in behavioral health care
  - MH First Aid
  - Suicide safety planning
  - Handle with Care
- Topics: Suicide risk assessment, safety event reporting

## Targeted Training for Specific Stakeholder Groups: Example – Medical Staff

- Learning from other organizations
  - Invited speakers to share about workflow and operational processes
  - Leveraging EMR to enhance suicide care and ease of use
- Enhanced CME offerings
  - Topics have included case discussions, advanced discussion on suicide/violence risk assessment

## **Learning Processes:** Aligning Committee Structures to Enhance Engagement and Learning Focus





- Define each committee's function
- Incorporate apparent cause analysis tool to review cases
- Include Just Culture approach to case review
- Expand stakeholder engagement
  - Create pharmacy peer review committee
  - Include interdisciplinary engagement on systems improvements

### Clinical Redesign: Advancing Suicide Care



## Zero Suicide (ZS) Main Implementation Team:

Oversight Zero Suicide Implementation Activities/Initiatives Reports to Executive Leadership



#### <u>Subcommittees</u>

(ZS Implementation Components):

Develop Work Products and Action Steps Reports back to ZS Main Implementation Team

#### **ZS Implementation Team**

**Executive Leader / ZS Chair** 

**ZS Initiative Leader** 

**ZS Implementation Coordinator** 

**Communications and Education Leads** 

Peer Leader

**Department Leaders:** 

Ы

**Health Analytics** 

Pharmacy

Nursing

IT

**Special Projects** 

Outpatient

**Emergency Services** 

IDD

Forensic

<u>Train</u>

<u>Identify</u>

**Engage** 

<u>Treat</u>

**Transition** 

**Improve** 

#### **ZS Subcommittee Projects:**

- Improve transitions of care and enhance communication across settings
- Develop a standardized suicide risk assessment across clinic locations
- Enhance agency focus on Zero Suicide



### **Summary & Future Directions**

#### **Summary**

- Quality is a critical focus and commitment for The Harris Center
- We are taking several tactical steps in key domains to deep our commitment: People, Data/Measures, Organizational Supports, Training/Education, and Learning Processes (Committees)
- We have evolved our approach to data and reporting to support quality projects
- We have enhanced multiple quality and safety supports and committee structures within our organization
- Several projects showcase the positive impact of our approach

#### **Future Directions**

- Fully staff for proposed positions/team expansions
- Sustain ongoing efforts culture of improvement and quality focus
- Evaluate progress and outcomes for quality/safety
- Move further toward value-based care opportunities with emphasis on quality



### **Adult Outpatient Behavioral Health Services**

### **Crisis Diversion**

- Crisis Call Diversion Program
- Crisis Intervention
   Response Teams with HPD and Sheriff's Office
- Homeless Outreach Team (HOT) – Collaboration with HPD
- Chronic Consumer
   Stabilization Initiative
   (CCSI) Collaboration with
   HPD
- Mobile Crisis Outreach Team (MCOT)
- Harris County Mental Health Jail Diversion Program

### **Ongoing Services**

- Case management and referrals
- Peer-to-Peer counseling
- Mental illness/Substance use disorder assessments and eligibility
- Psychosocial and rehab services
- Psychiatric services
- Job training assistance and supports
- Housing-related services
- Dual diagnosis services
- Texans Recovering Together Crisis Counseling Program
- Cognitive Behavioral Therapy and COBALT web-based therapy
- Integrated care / CCBHC model of care
- Coordination/Eligibility Assistance with Harris Health

### **Intensive Services**

- Continuity of care for those leaving state hospitals
- New START re-entry services (TCOOMMI)
- Assertive Community
  Treatment
- Early Onset Psychosis Program
- Mental Health Jail
   Diversion Program
   community-based
   services and supports
- Reintegration Court Re-Entry services
- Supportive Housing

### Crisis Services

### **Crisis Intervention**

- Crisis Line
- Mobile Crisis Outreach Teams (MCOT)
- Crisis Intervention Response Teams
- Psychiatric Intervention Portal/Court Liaison for HCPC Admission
- IDD Crisis Services
- Harris County Mental Health Jail Diversion Program
- Homeless Outreach Team Collaboration with Houston Police Department (HOT)
- Crisis Call Diversion Program
- Crisis Management for Children and Youth

### **Residential & Continuity of Care**

- Respite, Rehabilitation and Re-Entry Center
- Post Hospitalization Crisis Residential Unity (PHSRU)
- Peers for Hope House
- Open Door Mission
- Dennis Street Single Room Occupancy (SRO)
- Chronic Consumer Stabilization Initiative (CCSI)
- Branard Street Crisis Respite Apartments
- Co-Occurring Disorder (COD) Program
- Community Treatment Initiative
- Projects for Assistance in Transition from Homelessness (PATH)
- Integrated Care Partnership with federally qualified health centers
- Harris Health Coordination/Eligibility Assistance

### **Crisis Services**

- Crisis Stabilization Unit (CSU)
- Harris County Psychiatric Center (HCPC) - contract
- Peer Support
- Assessments and Referrals for Mental Illness and Substance Use Disorders
- Harris County Psychiatric Intervention (HCPI)
- Dual Diagnosis/Uncomplicated Detox
- Crisis IDD Behavioral Support
- NeuroPsychiatric Center Emergency Services



### The Respite, Rehabilitation and Re-Entry Center

108 Bed Facility to address the psychological, occupational, interpersonal and health needs of our clients who are homeless and have serious mental illnesses to improve their ability to function in society



**Hospital to Home** 



Jail Re-Entry



**Judge Ed Emmett Mental Health Diversion Center** 



Mental Health Supportive Housing



**Outpatient Competency Restoration** 



**Mental Health Apartment Unit** 

### **Reference List**

- 1. IHIPsychologyofChangeFramework\_SLIDES.pdf
- 2. The Fifth Discipline P.Senge (summary) | MudaMasters
- 3. Peter Senge and the learning organization infed.org:
- 4. <u>Improving Health and Health Care Worldwide | IHI Institute for Healthcare Improvement</u>
- SampathBaldozaLenociEdwardsBarker\_IntegratedApproachtoQuality\_HCExec\_ Nov2021.pdf
- 6. <u>Learning Health Systems: Making the Case Against Business as Usual</u> (ahrq.gov)
- 7. <u>Baylor Scott & White Health: Building a Foundation for Continuous Improvement</u> (ahrg.gov)
- 8. Denver Health: How a Safety Net System Maximizes Its Value (ahrq.gov)
- 9. https://www.ahrq.gov/sites/default/files/wysiwyg/lhs/lhs\_case\_studies\_hca.pdf
- 10. Kaizen: Culture of Continuous Improvement | Lean Production
- 11. Gemba Walk: Where the Real Work Happens (kanbanize.com)
- 12. What is Lean? | Lean Thinking Lean Enterprise Institute
- 13. <u>University of Utah Health: Creating a Formula for Value-Based Care (ahrq.gov)</u>
- 14. MBPI Closing Key Note, Monica Oss
- 15. The OPEN MINDS Recommendations Report for The Harris Center
- The Fifth Discipline, First Education, The Art and Practice of the Learning Organization. 1990, Peter Senge





# The Future Of Person-Centered Care In California – The Pacific Clinics Case Study

May 26, 2022 – 1:00 p.m. ET



Scott Fairhurst
Vice President, Outcomes &
Evaluation, Analytics & Training
Pacific Clinics



Laura Pancake
Senior Vice President, Clinical Operations
Los Angeles/South Coast Regions
Pacific Clinics

### Transforming Lives





# Persons with IDD and Involvement in the Criminal Justice System:

Community Services, Diversion, and Incarceration

Presented By: Wayne Young MBA, LPC, FACHE

The Harris Center, Chief Executive Officer





As the largest behavioral health and developmental disability care center in Texas, The Harris Center provides a full continuum of services in 88 sites across Harris County and serves over 90,000 individuals annually. Our operating budget in FY2022 is \$305M.

Services are offered in over 40+ different languages to better serve one of the most diverse and multi-cultural communities in the nation.

The Harris Center is the state-designated Local Mental Health Authority and the Local Intellectual and Developmental Disability Authority serving Harris County, Texas.





# Transforming lives by providing over 1.5 million services to more than 90K people



90K+
Individuals Served



**599K**Adult Mental Health
Services



214K Child/Adolescent Mental Health Services



215.3K
IDD & Autism Services



379.2K
Crisis Line and
Access Calls



**20K**COVID-19 Support Calls



**5.4K** 911 Calls Diverted



**131.7K**Psychiatric Crisis
Services



91.2K
Early Childhood
Intervention



### **IDD Services**

Services and Supports in the Community

### **Intellectual and Developmental Disability Services**

Over 13,000 clients served

### **Authority Services**

- Pre-admission Screening and Resident Review (PASRR) Service Coordination
- Intake and Eligibility; Interest List Maintenance
- Service Coordination; Continuity of Services
- Community First Choice;
   Enhanced Community
   Coordination
- Texas Home Living and Home & Community Based Services (HCS)
- General Revenue Service Coordination
- Service, Authorization and Monitoring

### **Provider Services**

- In and Out of Home Respite
- Employment Assistance and Vocational Training
- Community Supports
- Day Habilitation
- Clinical Services:
  - Psychotherapy;
  - Applied Behavioral Analysis;
  - Behavioral Supports;
  - Feeding Therapy;
  - Social Skills groups.

### **Specialized Services**

- Early Childhood Intervention (ECI) Services (Ages 0-3)
- ICF/ID/Texas Home Living Residential Services
- IDD Crisis Intervention and Respite Services
- Community Outreach and Education
- Integrated Care Partnership with federally qualified health centers
- Harris Health Coordination/Eligibility Assistance

### **Emergency Responses**



Keeping Persons out of the Justice System



### **Emergency Alternatives**











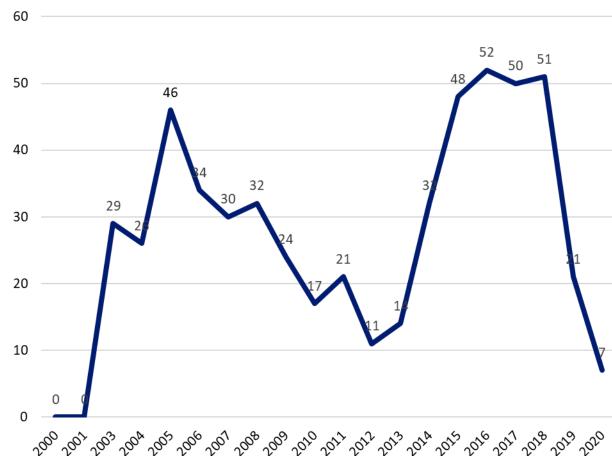


### **Mobile Crisis Outreach Team (MCOT)**

• The Mobile Crisis Outreach Team
(MCOT) is a community-based, non-law enforcement response to people experiencing a mental health crisis.



### **MCOT Calls involving a Person with IDD**

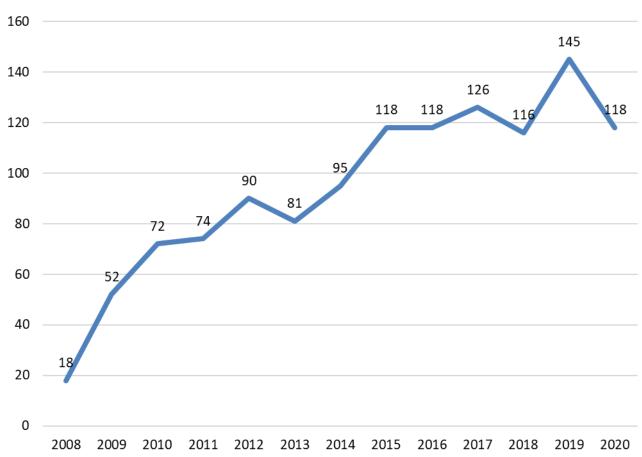


## Page 507 of 527 The HARRIS CENTER for Mental Health and ID

### **Crisis Intervention Response Teams (CIRT)**

- The Crisis Intervention Response
  Teams (CIRT) partner a Crisis
  Intervention Trained deputy with a
  master's level clinician and is the
  highest-level response to a person
  in crisis.
- The Houston Police Department and the Harris County Sheriff's Office have 27 CIRT units.
- Only 4.1% of all calls result in individuals being transported to jail.

### **CIRT Calls Involving a Person with IDD**

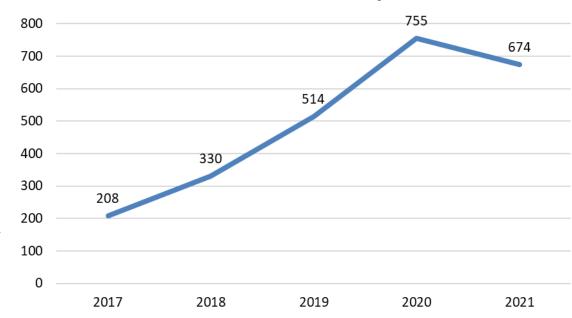


### **IDD Crisis Teams**



- Multi-disciplinary team that includes IDD crisis intervention specialists.
- The majority of people served have cooccurring disorders – intellectual disability and/or autism.
- Referrals come from the crisis line, MCOT, CIRT, schools, families, DFPS, and community partners.
- Cases can be open up to 30 days.
- Behavioral specialists and RN assist as needed.

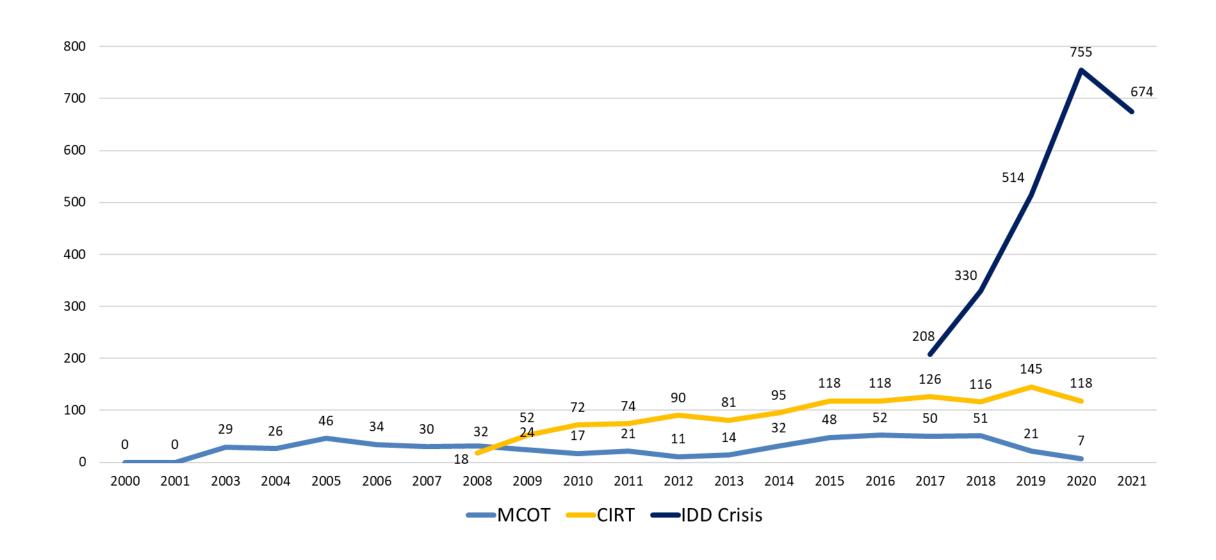
### **IDD Crisis Team Responses**

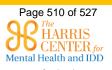






### Interplay between MCOT, CIRT, and IDD Crisis Teams





**Better Informed Law Enforcement** 

Project geared towards improving law enforcement interaction with people diagnosed with autism.

Sticker in window alerts HCSO that a person in the has is a part of the project.

The database has information that can be helpful for law enforcement know to improve their pending interaction.



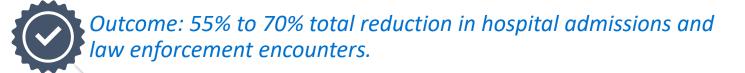


### **Divert to What?**

### **Chronic Consumer Stabilization Initiative (CCSI)**



- Collaboration between Houston Police Department and The Harris Center.
- Identifies, engages, and serves persons with a serious and persistent mental illness/IDD and have frequent encounters with the HPD.
- Reduces reliance on police and psychiatric emergency services with community-based intensive case management.
- Participation is voluntary.
- One officer, one Master's level clinician, and 5 case managers have a caseload of 70 consumers.
- About 10% of the caseload are individuals with IDD.





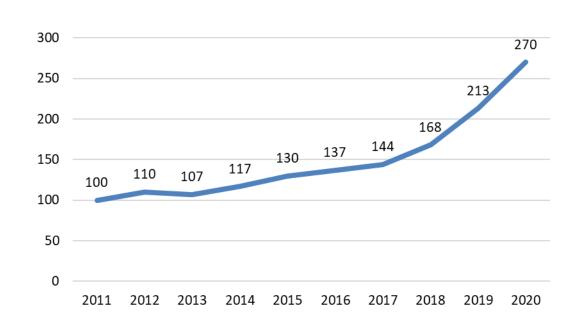
### **Neuropsychiatric Center**

- Located in the Texas Medical Center, the Neuropsychiatric Center (NPC) is open 24/7 for acute psychiatric emergencies.
- Voluntary, including walk-ins, and involuntary admissions.
- Up to 48 hours for observation.
- Services include assessment, medication, stabilization, and referrals and linkages to inpatient and outpatient treatment.





NPC Admissions of Persons with IDD





### **Jail Diversion Overview**



- 36 beds for the pre-charge diversion of persons who would have picked up for low level, nonviolent offenses.
- Eligible individuals include adults who have a history of mental illness or IDD, are not in an acute crisis, and voluntarily agree to participate.
- Offenses not eligible for diversion:
  - DWI
  - Offenses involving a weapon
  - Assault
  - Terroristic Threat
  - Burglary of a Motor Vehicle

- Domestic violence offenses (i.e. assault-family member, terroristic threat on family member, violation of protective order)
- Any offense where public safety could be compromised

### Jail Diversion @ R3



- 3Rs houses a continuum of voluntary programs for individuals with serious mental illness or intellectual/developmental disabilities who are diverted from jail or transitioning back to community from an inpatient facilities. The oldest program, mental health jail diversion, began in September 2018.
- If the person with IDD is a current client, the Center integrates current IDD Service Coordinator.
- If the person is not a client, Determination/Eligibility is initiated.
- If needed, a referral may be made to IDD Crisis services for further process integration.
- Since inception, the jail diversion program served 73 patients with IDD, and Outpatient Competency Restoration served two.





### **Jail Diversion Outcomes**





- Diverted 4,259 people with mental illness from the Harris County Jail in its first 3 years of operation.
  - 1 in 54 Diversions was a person with an Intellectual or Developmental Disability
- Justice System Partners evaluated the program in October 2020. Key findings include:
  - There was a 50% reduction in bookings post-diversion.
  - When comparing diversion group to a control group, those diverted were 1.3 times less likely to be booked into jail on a new charge than those not diverted
  - Those diverted with 5+ bookings were 3.1 times less likely to be booked into jail on a new offense than those not diverted
  - Those diverted with no prior bookings were 44 times less likely to be booked into jail on a new offense than those not diverted
  - For every \$1 spent on diversion, the county avoided spending \$5.54 on criminal justice costs.

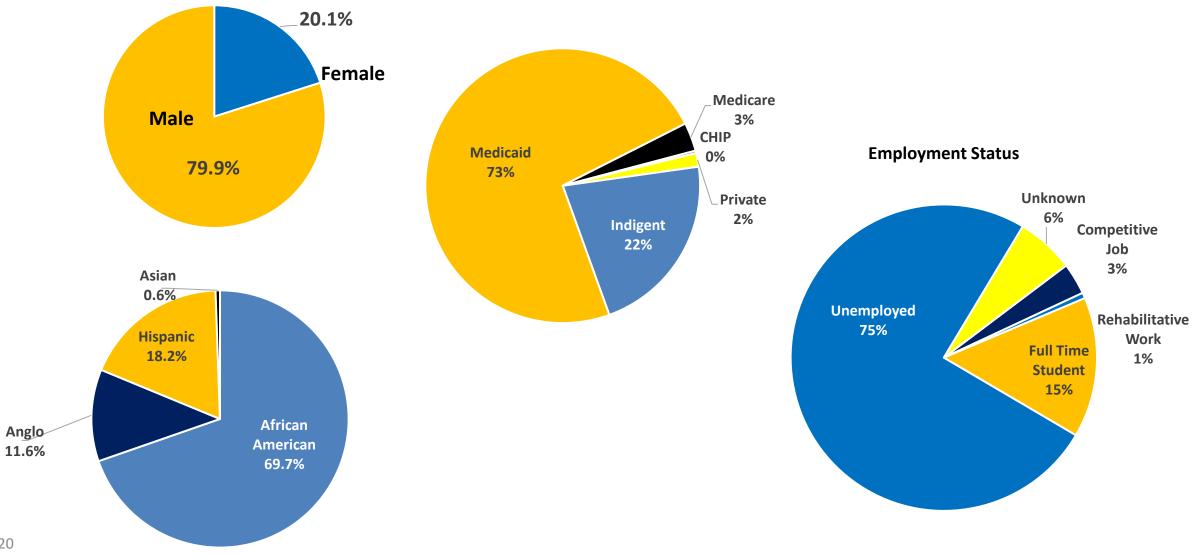


### **Harris County Jail Impact**



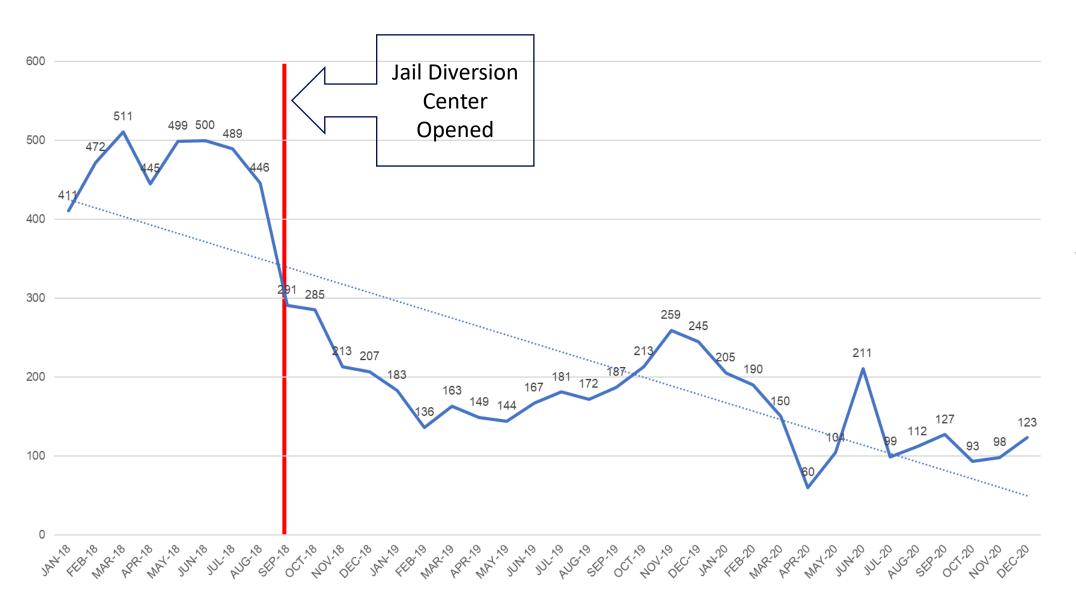
### Demographics for People with IDD who are **Booked into the Harris County Jail**





### Harris County Jail Bookings for Trespassing

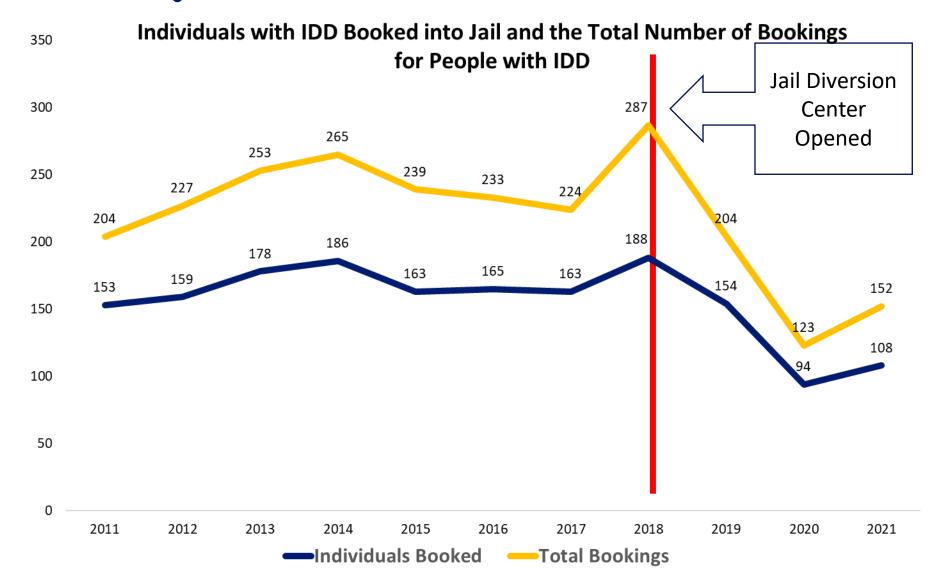




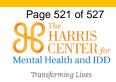
Trespassing was the most common charge for persons with IDD

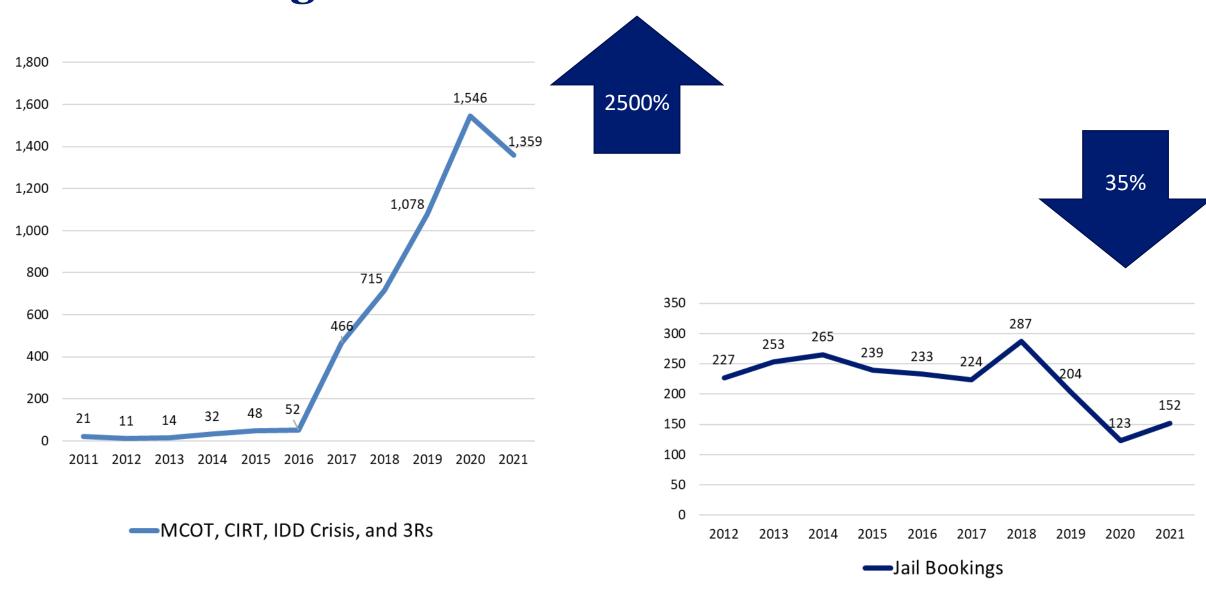


# Individuals with IDD Booked into the Harris County Jail



## IDD Community Crisis Interventions vs. Jail Bookings





## EXHIBIT F-15

### **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

COPSD Co-occurring Psychiatric and Substance Abuse Disorders

COR Council on Recovery

CPEP Comprehensive Psychiatric Emergency Programs
CPOSS Charleston Psychiatric Outpatient Satisfaction Scale

CPS Children's Protective Services

CRCG Community Resource Coordination Group

CRU Crisis Residential Unit
CSC Community Service Center

CSCD Community Supervision and corrections department

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

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

DLA-20 Daily Living Activities-20 Item
DRB Dangerousness review board

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

DSRIP Delivery System Reform Incentive Payment Program

ECI Early Childhood Intervention

EO Early Onset

EPSDT Early Periodic Screening Diagnosis and Treatment

FACT Forensic Assertive Community Team

FF Flex Funds

FSIQ Full Scale Intelligence Quotient FSPA Jail -Forensic Single Portal

FTND Fagerstrom Test for Nicotine Dependence

FY Fiscal Year

GAF Global Assessment of Functioning

GR. General Revenue

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

Local Service Area

LSA

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

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