

The Harris Center for Mental Health and IDD 9401 Southwest Freeway Houston, TX 77074 Board Room #109

Revised

Governance Committee Meeting April 25, 2023 8:30 am

I. DECLARATION OF QUORUM

II. PUBLIC COMMENTS

III. APPROVAL OF MINUTES

A. Approve Minutes of the Board of Trustees Meeting Held on Tuesday, March 28, 2023 (EXHIBIT G-1)

IV. REVIEW AND TAKE ACTION

A. NEW POLICIES

1. Delegation in the absence of the Chief Executive Officer (CEO) (EXHIBIT G-2)

B. POLICY UPDATES/SUBSTANTIAL CHANGES

- 1. Infection Control Plan (EXHIBIT G-3)
- 2. Physician Assistant, Advanced Practice Registered Nurse, Pharmacist Delegation (EXHIBIT G-4)

V. 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.

VI. RECONVENE INTO OPEN SESSION

VII. CONSIDER AND TAKE ACTION AS A RESULT OF THE EXECUTIVE SESSION

VIII. INFORMATION ONLY

- A. Abbreviation List (EXHIBIT G-5)
- IX. ADJOURN

Veronica Franco, Board Liaison Jim Lykes, Chair, Governance Committee The Harris Center for Mental Health and IDD



EXHIBIT G-1

BOARD OF TRUSTEES THE HARRIS CENTER for MENTAL HEALTH AND IDD GOVERNANCE COMMITTEE MEETING TUESDAY, MARCH 28, 2023 MINUTES

CALL TO ORDER

Mr. Jim Lykes, Chairman called the meeting to order at 8:34 a.m. in Conference Room 109, 9401 Southwest Freeway, noting a quorum of the Committee was present.

RECORD OF ATTENDANCE

Committee Members in Attendance: Mr. J. Lykes, Mr. G. Womack, Mrs. N. Hurtado, Dr. G. Santos

Committee Member Absent:

Other Board Member Present: Dr. R. Gearing, Dr. L. Moore, Dr. M. Miller, Jr.

1. DESIGNATION OF BOARD MEMBERS AS VOTING COMMITTEE MEMBERS

Mr. Jim Lykes designated Dr. R. Gearing, Dr. L. Moore and Dr. M. Miller, Jr. as voting members of the committee.

2. **DECLARATION OF QUORUM** The meeting was called to order at 8:34 a.m.

3. PUBLIC COMMENTS

There were no Public Comments.

4. APPROVAL OF MINUTES

Minutes of the Board of Trustees Governance Committee meeting held on Tuesday, February 28, 2023

MOTION: HURTADO SECOND: WOMACK The Motion passed with unanimous affirmative votes

BE IT RESOLVED, Minutes of the Board of Trustees Governance Committee meeting held on Tuesday, February 28, 2023 EXHIBIT G-1 has been approved and recommended to the Full Board.

5. **REVIEW AND TAKE ACTION**

A. NEW POLICIES

Board of Trustees Governance Committee Meeting (3/28/23) MINUTES Page 1 of 5 1. Lobbying

MOTION: WOMACKSECOND: MOOREThe Motion passed with unanimous affirmative votes

BE IT RESOLVED, Lobbying, EXHIBIT G-2 has been approved and recommended to the Full Board.

2. Outreach Screening Assessment Referral (OSAR) Policy and Procedure Manual

MOTION: MOORE SECOND: WOMACK

VOTE: YES: 6NO: 0ABSTENTION: 1The Motion passed with majority affirmative votes

BE IT RESOLVED, Outreach Screening Assessment Referral (OSAR) Policy and Procedure Manual, EXHIBIT G-3 has been approved and recommended to the Full Board.

- B. POLICY UPDATES/MINOR CHANGES
 - 1. Religious Accommodations

MOTION: SANTOS SECOND: WOMACK The Motion passed with unanimous affirmative votes

BE IT RESOLVED, Religious Accommodations, EXHIBIT G-4 has been approved and recommended to the Full Board.

2. Bylaws of the Board of Trustees of The Harris Center for Mental Health and Intellectual Developmental Disabilities

Dr. Santos motioned to table the Board's bylaws and review and propose revisions of the Bylaws at the Board Retreat.

Mrs. Hurtado seconded the motion.

BE IT RESOLVED, Exhibit G-5 is tabled for review at the Board's retreat.

3. Corporate Compliance

MOTION: SANTOS SECOND: WOMACK

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The Motion passed with unanimous affirmative votes

BE IT RESOLVED, Corporate Compliance, EXHIBIT G-6 has been approved and recommended to the Full Board.

4. Family and Medical Leave Act (FMLA)

MOTION: WOMACK SECOND: MOORE The Motion passed with unanimous affirmative votes

BE IT RESOLVED, Family and Medical Leave Act (FMLA), EXHIBIT G-7 has been approved and recommended to the Full Board.

5. Linguistic Competence Services

MOTION: SANTOS SECOND: WOMACK The Motion passed with unanimous affirmative votes

BE IT RESOLVED, Linguistic Competence Services, EXHIBIT G-8 has been approved and recommended to the Full Board.

6. Reporting Allegations of Abuse, Neglect and Exploitation of Children, Elderly Persons with Disabilities

MOTION: SANTOS SECOND: HURTADO The Motion passed with unanimous affirmative votes

BE IT RESOLVED, Reporting Allegations of Abuse, Neglect and Exploitation of Children, Elderly Persons with Disabilities, EXHIBIT G-9 has been approved and recommended to the Full Board

7. Section 504 of the Rehabilitation Act and, the American with Disabilities Act ("ADA") (Consumers)

MOTION: SANTOSSECOND: MOOREThe Motion passed with unanimous affirmative votes

BE IT RESOLVED, Section 504 of the Rehabilitation Act and, the American with Disabilities Act ("ADA")(Consumers), EXHIBIT G-10 has been approved and recommended to the Full Board.

8. Solicitation of/and Acceptance of Donations (Money, Goods or Services)

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MOTION: MOORE SECOND: HURTADO The Motion passed with unanimous affirmative votes

BE IT RESOLVED, Solicitation of/and Acceptance of Donations (Money, Goods or Services), EXHIBIT G-11 has been approved and recommended to the Full Board.

9. State Service Contract Monitoring and Performance Reporting

MOTION: SANTOSSECOND: GEARINGThe Motion passed with unanimous affirmative votes

BE IT RESOLVED, State Service Contract Monitoring and Performance Reporting, EXHIBIT G-12 has been approved and recommended to the Full Board.

10. Weapons

MOTION: SANTOSSECOND: MOOREThe Motion passed with unanimous affirmative votes

BE IT RESOLVED, Weapons, EXHIBIT G-13 has been approved and recommended to the Full Board.

C. POLICY UPDATES/MINOR CHANGES

1. Credentialing Policy

MOTION: MOORE SECOND: HURTADO The Motion passed with unanimous affirmative votes

BE IT RESOLVED, Credentialing Policy, EXHIBIT G-14 has been approved and recommended to the Full Board.

2. Incident Reporting

MOTION: SANTOSSECOND: HURTADOThe Motion passed with unanimous affirmative votes

BE IT RESOLVED, Incident Reporting, EXHIBIT G-15 has been approved and recommended to the Full Board.

Board of Trustees Governance Committee Meeting (3/28/23) MINUTES Page 4 of 5

- 6. **EXECUTIVE SESSION** –No Executive Session
- 7. RECONVENED INTO OPEN SESSION

8. CONSIDER AND TAKE ACTION AS A RESULT OF THE EXECUTIVE SESSION

9. ADJOURN MOTION: GEARING SECOND: SANTOS The meeting was adjourned at 8:56 A.M.

Respectfully submitted,

Veronica Franco, Board Liaison Jim Lykes, Chairman Governance Committee THE HARRIS CENTER for Mental Health and IDD Board of Trustees

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EXHIBIT G-2

Status Pending PolicyStat ID 1	3233618			
	Origination	10/2020 N/A	Owner	Wayne Young: Exec
SP HARRIS	Last Approved	N/A	Area	Leadership
OD CENTER for Mental Health and IDD	Effective	Upon Approval	Document Type	Agency Policy
Transforming Lives	Last Revised	03/2022		
	Next Review	1 year after approval		

LD3A - Delegations in the Absence of the Chief Executive Officer (CEO)

1. PURPOSE

The purpose of this policy is to promote the efficient operation of the Harris Center and to ensure that appropriate Harris Center Executive Leadership are available for input and decision-making in the absence of the Chief Executive Officer (CEO).

2. POLICY

It is the policy of The Harris Center to continue efficient operations and business decision-making when the Chief Executive Officer (CEO) of The Harris Center is not available and input or decisions are required of CEO. For planned absences of the CEO, the CEO will delegate signing, input and decision-making authority as the CEO feels is appropriate. If the CEO has unplanned absences and is not able to formally delegate these authorities, the Chief Operating Officer (COO) is authorized to sign documents, provide input and make decisions during the CEO's absence.

Only the CEO or the Chair of the Board of Trustees may delegate, and/or revoke delegation of, signing, input and decision-making authority. When needed, the COO, under their delegated CEO authority, may sub-delegate to the Chief Financial Officer (CFO).

3. APPLICABILITY/SCOPE

This policy applies to all staff and facilities governed by The Harris Center including, direct and contracted employees.

4. PROCEDURES

N/A

5. RELATED POLICIES/FORMS:

- Signature for Authorization
- Check Signing

6. REFERENCES: RULES/REGULATIONS/ STANDARDS:

N/A

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	04/2023
Legal Review	Kendra Thomas: Counsel	04/2023
Compliance Review	Anthony Robinson: VP	04/2023
Initial Assignment	Shannon Fleming: Counsel	03/2023
Initial Assignment	Wayne Young: Exec	03/2023

EXHIBIT G-3

Status Pending PolicyStat ID 12	253526			
Security The HARRIS CENTER for Mental Health and IDD Transforming Lives	Origination Last Approved Effective Last Revised Next Review	09/2019 N/A Upon Approval 03/2023 1 year after approval	Owner Area Document Type	Vanessa Miller: Mgr Medical Services Agency Policy

MED19P Infection Control Plan

1. PURPOSE

The purpose of this procedure is to formalize and document the Infection Control Plan. The Infection Control Nurse Manager shall review and update the Plan annually. The Plan will comply with the Department of State Health Services (DSHS)₇. Center for Disease Control (CDC), and Occupational Safety and Health Authority (OSHA) regulations. The Harris Center is committed to providing a safe and healthy workplace for all our employees. The Harris Center has developed a COVID-19 Plan ("Covid Plan"). The Covid Plan includes policies and procedures aimed at minimizing the risk of transmission of COVID-19. The Covid Plan was developed and continuously adapted to stay compliant with local, state, and federal guidelines. The recommendations in this Plan are derived from analysis of current epidemiological and microbiologic information. This Plan assures that infection control education, preventative activities that occur within the Agency, and measures to address identified instances related to exposures, are responded to in an effective manner.

The Harris Center has developed a COVID-19 Plan ("Covid Plan"). The Covid Plan includes policies and procedures aimed at minimizing the risk of transmission of COVID-19. The Covid Plan was developed and continuously adapted to stay compliant with local, state, and federal guidelines. The recommendations in this Plan are derived from analysis of current epidemiological and microbiologic information. This Plan assures that infection control education, preventative activities that occur within the Agency, and measures to address identified instances related to exposures are responded to in an effective manner.

2. Objective/SCOPE

The Harris Center for Mental Health and IDD employees and all volunteers and contractors.

3. Regulatory/Reference Documents

Control of Communicable Diseases, <u>Title 25.</u> TAC Part 1, Chapter 97, and Subchapter A <u>. Control of</u> Communicable <u>Diseases</u>

<u>Communicable</u> Disease Prevention and Control Act, <u>Title 2.</u> Texas Health and Safety Code, Subchapter H, <u>SSection</u> 81.301-et seq. Bloodborne Pathogen Exposure Control Plan.

The Houston Department of Health and Human Services.

4. **DEFINITIONS**:

• Communicable Disease:

- An illness due to an infectious agent or its toxic products which is transmitted directly to a well
 person from an infected person or animal or indirectly through an intermediate plant or animal
 host, vector or the inanimate environment. Communicable diseases may spread by physical
 contact with an infected person, contact with a contaminated surface or object, bites from
 insects or animals capable of transmitting the disease and travel through the air. Bacteria,
 fungi, parasites and viruses may cause communicable diseases.
- Control of Infection occurs by:
 - 1. Identifying consumers and/or staff with communicable or potentially communicable infections.
 - 2. Implementing appropriate Infection Control measures.
 - 3. Educating staff on Infection Control procedures and standards.
 - 4. Providing information to all departments related to managing on site Infection control issues.
- Disease Prevention: The prevention of infection in staff and consumers occurs through:
 - 1. Dissemination of Infection Control guidelines.
 - 2. Ongoing updates of Infection control procedures and practices
 - 3. Monitoring of Infection Control practices within the Departments.
- Exposure:
 - 1. Condition of being exposed to an infectious agent.
- Investigation and Surveillance Involves the following:
 - 1. Systematic Data collection.
 - 2. Analysis of the data with determination of specific events to be monitored.
 - 3. Development and implementation of measurable quality improvement plans.
 - 4. Evaluation of the quality improvement plans.
- Reporting of infections occurs by:
 - 1. Staff reporting possible exposures to infectious diseases.
 - 2. Reporting of reportable diseases as required by DSHS (25TACPartl, Chapter 97, and

Subchapter A), Governing Control of Communicable Diseases. Reporting to the DSHS notifiable conditions

5. PROCEDURES:

- A. Disease Prevention occurs by the Infection Control Manager:
- B. Identifying consumers and/or staff with communicable or potentially communicable infections.
- C. Implementing appropriate Infection Control measures.
- D. Partnering with local pharmacies to provide vaccine clinics to employees.
- E. Educating staff on Infection Control procedures, standards and continued updates.
- F. Providing information to all departments related to managing on-site Infection Control issues.
- G. Monitoring of Infection Control Practices within the Department
- H. Investigation and Surveillance Involves the following:
- I. Systematic Data collection
- J. Analysis of the data with a determination of specific events to be monitored.
- K. Development and implementation of measurable quality improvement plans
- L. Evaluation of quality improvement plans.
- M. Reporting of infections occurs by:
- N. Staff reporting possible exposures to infectious diseases.
- O. Reporting of reportable diseases as required byto the DSHS (notifiable conditions and isolates. <u>Communicable Diseases.</u> 25 TAC Part 1, Chapter 97, and Subchapter A), governing Control of <u>Communicable Diseases</u>

6. RELATED POLICIES/FORMS:

- Infection Control Policy
- Reportable Disease Form
- Mask Procedure Risk Management Plan

7. REFERENCES: RULES/REGULATIONS/ STANDARDS

- Association for Professionals in Infection Control and Epidemiology <u>www.apic.org</u>
- Center for Disease Control, <u>www.cdc.gov</u>
- Texas Department of State Health Service <u>www.dshs.state.tx.us</u>

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	04/2023
Final Legal Review	Kendra Thomas: Counsel	04/2023
Initial Legal Review	Shannon Fleming: Counsel	03/2023
Compliance Review	Anthony Robinson: VP	02/2023
Department Review	Luming Li: Chief Medical Ofcr (1101 1817)	11/2022
Initial Assignment	Vanessa Miller: Mgr	11/2022

EXHIBIT G-4

Status Pending PolicyStat ID 12	334315			
Security The HARRIS CENTER for Mental Health and IDD Transforming Lives	Origination Last Approved Effective Last Revised Next Review	09/2020 N/A Upon Approval 03/2023 1 year after approval	Owner Area Document Type	Maria Richardson: Dir Medical Services Agency Policy

MED17A Physician Assistant, Advanced Practice Registered Nurse, Pharmacist Delegation

1. PURPOSE:

The purpose of this policy is to define the process for delegation and supervision of Physician Assistants and, Advance Practice Registered Nurses (PA/APRN) and Pharmacists (RPh, PharmD) by Harris Center physicians.

2. POLICY:

The Harris Center for Mental Health and IDD (Harris Center) employs Physician Assistants (PA), Advanced Practice Registered Nurses (APRN), and Nurse PractitionersPharmacists (RPh, PharmD) who work under the delegated authority of a physician licensed by the Texas Medical Board (TMB). The Harris Center will comply with all rules and regulations that govern this arrangement including those set forth by the Texas Medical Board (TMB) as applicable for Physicians and Physician Assistants, the Texas State Board of Nursing as applicable to APRNs, and the Texas State Board of Pharmacy (TSBP) as applicable to pharmacists. The Harris Center physician and a PA/APRN) who work under the delegated authority of a physician licensed by the Texas Medical Board (TMB). The Harris Center/Pharmacist entering into an agreement to supervise a PA/APRN/Pharmacist will comply with all rules and regulations that govern this arrangement including those set forth by the Texas Medical Board (TMB) and the Texas State Board of Nursing as applicable to APRNs. The Harris Center physician and a PA/ APRN entering into an agreement to supervise a PA/APRN will complete and sign The Harris Center Delegation Protocol and the Prescriptive Authority Agreement, or Collaborative Drug Therapy Management Protocol which outline the scope of medical practice and prescription/drug prescribing parameters. These agreements shall be individualized depending on and based upon the experience and training of the PA/APRN/Pharmacist, as determined by the supervising physician. The Harris Center will set expectations regarding the frequency of supervision and the number of monthly chart reviews completed by the supervising physician.

3. APPLICABILITY/SCOPE:

All Harris Center programs providing medical services.

4. PROCEDURES:

MED1B - Medical Services

MED20B - Pharmacy Services and Outpatient Prescription Purchase Plan

MED17B- Physician Assistant, Advanced Practice Registered Nurse Delegation Protocol Procedure

HR2B- Credentialing and Privileging Guideline & Procedure

5. RELATED POLICIES/FORMS:

- Delegation Authorization Protocol for Advanced Practice Registered Nurses and Physician
 Assistants
- Prescriptive Authority Agreement
- Delegation of Nursing duties to non-Nursing staff
- Prescriptive Authority Agreement
- <u>Collaborative Drug Therapy Management Protocols</u>
- MED1A Medical Services
- MED14A- Delegation and Supervision of Certain Nursing Acts

6. REFERENCES: RULES/REGULATIONS/ STANDARDS:

- Authority of Physicians to Delegate Certain Medical Acts-Texas OccupationsTitle 3, Tex. Occ. Code, Chapter 157
- Physician Assistant Licensing Act, Texas Occupations Code Chapter 204 Physician Assistants-Licensing Requirements, Exemptions, and Renewal, Tex Occ. Code, §§ 204.151-204.353
- Nurses, Texas Occupations Title 3, Tex. Occ. Code, Chapter 301
- Texas Medical Board-Physician Assistants, Title 22 Texas Admin. Code, TAC Part 9, Chapter 185
- Texas Medical Board- Standing Delegation Orders- Title 22 Texas Admin. Code TAC Part 9, Part 9-Chapter 193
- <u>Pharmacists. Drug Therapy Management by a Pharmacist under Written Protocol of a</u> <u>Physician, Title 22 TAC Part 15, § 295.13</u>

- <u>Texas Board of Nursing: <u>https://www.bon.texas.gov/index.asp.html</u>
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- Texas State Board of Pharmacy: https://www.pharmacy.texas.gov/
- <u>Texas Medical Board: https://www.tmb.state.tx.us/</u>

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Compliance Review	Anthony Robinson: VP	03/2023
Department Review	Luming Li: Chief Medical Ofcr (1101 1817)	02/2023
Initial Assignment	Maria Richardson: Dir	02/2023

EXHIBIT G-5

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ABBREVIATION LIST

46B	Not Competent to stand trial HCJ
A ACT ADL AFDC ALF ANSA AOT	Assertive Community Treatment Activities of Daily Living Aid to Families with Dependent Children Assisted Living facility Adult Needs and Strengths Assessment Assisted out- patient treatment
APS ARC AUDIT-C	Adult Protective Services Association for Retarded Citizens Alcohol Use Disorders Identification Test
<u>B</u> BABY CANS BHO BDSS BNSA	S Baby Child Assessment needs (3-5 years) Behavioral Health Organization Brief Bipolar Disorder Symptom Scale Brief Negative Symptom Assessment
CANS CAPES CAPS CARE CARF CAS CBCL CBHN CBT CCBHC CCBHC CCCR CCSI CCU CHIP CIDC CIRT CIWA CMAP CMBHS CMS COC	Child and Adolescent Needs and Strengths Child and Adolescent Psychiatric Emergency Services Child and Adolescent Psychiatric Services Client Assessment and Registration Commission on Accreditation of Rehabilitation Facilities Child and Adolescent Services Children's Behavioral Checklist Community Behavioral Health Network Cognitive behavior therapy Certified Community Behavioral Health Clinic Clinical case review Chronic Consumer Stabilization Initiative Crisis Counseling Unit Children's Health Insurance Plan Chronically III and Disabled Children Crisis Intervention Response Team Clinical Institute Withdrawal Assessment for Alcohol Children's Medication Algorithm Project Clinical Management for Behavioral Health Services Centers for Medicare and Medicaid Continuity of Care

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

D

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
DRB	Dangerousness review board
DSM-5	Diagnostic and Statistical Manual of Mental Disorders, 5 th Edition
DSRIP	Delivery System Reform Incentive Payment Program

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ECI	Early Childhood Intervention
EO	Early Onset Early Periodic Screening Diagnosis and Treatment
EPSDT	Early Periodic Screening Diagnosis and Treatment

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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

<u>g</u> Gaf Gr. Global Assessment of Functioning General Revenue

HHAM-AHamilton Rating Scale for AnxietyHCJPDHarris County Juvenile Probation DepartmentHCPCHarris County Psychiatric CenterHCPIHarris County Psychiatric InterventionHCPSHarris County Protective Services for Children and AdultsHCSHome and Community ServicesHCS-OHome and Community Services - OBRAHCSOHarris County Sheriff's OfficeHHHarris Health SystemHHSHealth Human ServicesHMOHealth Maintenance OrganizationHOTHomeless Outreach TeamHPDHouston Police DepartmentHRCHouston Recovery Center
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ÎCAP	Inventory for Client and Agency Planning
ICC	Interim Care Clinic
ICF-ID	Intermediate Care Facility for Intellectual Disability

ICT-ID IEP

Individual Education Plan Individual Family Support Plan In Home Respite Innovative Resource Group Individualized recovery plan IFSP

IHR

- IRG
- IRP

J

JDC	Juvenile Detention Center
JJAEP	Juvenile Justice Alternative Education Program
JSS	Job Satisfaction Scale

K

L LAR LIDDA LMHA LOC LOS LPHA	Legislative Appropriations Request Local IDD Authority Local Mental Health Authority Level of Care – LOC A= Authorized and LOC R= Calculated Length of Stay Licensed Professional of the Healing Arts
LPHA	Licensed Professional of the Healing Ans
LSA	Local Service Area

M

AVE	
MACRA	Medicare Access and CHIP Reauthorization Act
MAPS	Mental Retardation Adult Psychiatric Services
MBOW	Medicaid Managed Care Report (Business Objects)
MCO	Managed Care Organization
MCOT	Mobil Crisis Outreach Team
MCAS	Multnomah Community Assessment Scale
MDU	Multiple Disabilities Unit
MHW	Mental Health Warrant
MMPI-2	Minnesota Multiphasic Personality Inventory 2 nd Edition
MoCA	Montreal Cognitive Assessment
MSU	Maximum security unit
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NAMI	National Alliance for the Mentally III
NEO	New Employee Orientation
NGRI	Not Guilty for Reason of Insanity (46C)
NPC	Neuro-Psychiatric Center
NWCSC	Northwest Community Service Center

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ÖSAR	Outreach Screening Assessment and Referral
OASS	Overt Agitation Severity Scale
OHR	Out of Home Respite
OVSOM	Office of Violent Sexual Offenders Management

<u>P</u>

P	Patient Assistance Program (for Prescriptions)
PAP	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 Item Version
PHQ-4	Patient Health Questionnaire-9 Modified for Adolescents
PI	Performance Improvement
PIP	Performance Improvement Plan
PMAB	Prevention and Management of Aggressive Behavior
POC	Plan of Care
POC	Plan of Care

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

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<u>Q</u> QAIS QMHP	Quality Assurance and Improvement System Qualified Mental Health Professional
QI	Quality Improvement
QIDS-C	Quick Inventory of Depressive Symptomology-Clinician Rated

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RC	Rehab Coordination
ROI	Release of Information
RM	Recovery Manager
RTC	Residential Treatment Center

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SAM	Service Authorization and Monitoring
SAMHSA	Substance Abuse and Mental Health Services Administration
SC	Service Coordination
SECSC	Southeast Community Service Center
SEFRC	Southeast Family Resource Center
SMAC	Sequential Multiple Analysis tests
SMHF	State mental health facility
SNF	Skilled Nursing Facility
SP	Service Package (SP1, etc)
SPA	Single portal authority
SSLC	State living facility
SWCSC	Southwest Community Service Center
SWFRC	Southwest Family Resource Center
SUD	Substance Use Disorder

T

ŤAC TANF	Texas Administrative code Temporary Assistance for Needy Families
TCOOMMI	Texas Correctional Office on Offenders with Medical or Mental Impairments
TDCJ	Texas Department of Criminal Justice
THKC	Texas Health Kids
THSteps	Texas Health Steps
TIC TMAP	Trauma informed Care Texas Medication Algorithm Project

TMHP TJJD TRR TWC	Texas Medicaid & Healthcare partnership Texas Juvenile Justice Department Texas Resiliency and Recovery Texas Workforce Commission
U UR	Utilization Review
<u>v</u> V-SSS	Visit-Specific Satisfaction Scale
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