

Full Board Meeting
October 28, 2025
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, September 23, 2025
(*EXHIBIT F-1*)

IV. CHIEF EXECUTIVE OFFICER'S REPORT

V. COMMITTEE REPORTS AND ACTIONS

- A. Audit Committee Report and/or Action
(*J. Lykes, Chair*)
- B. Resource Committee Report and/or Action
(*G. Womack, Chair*)
- C. Program Committee Report and/or Action
(*M. Miller, Jr., Chair*)
- D. Quality Committee Report and/or Action
(*J. Lankford, Chair*)
- E. Foundation Report and/or Action
(*N. Hurtado, Chair*)

VI. CONSENT AGENDA

- A. FY'25 Year-to-Date Budget Report-September
(*EXHIBIT F-2*)
- B. October 2025 New Contracts Over 250K
(*EXHIBIT F-3*)
- C. October 2025 Interlocal Agreements
(*EXHIBIT F-4*)
- D. 2026 PI Plan
(*EXHIBIT F-5*)

VII. CONSIDER AND TAKE ACTION

- A. Proposed 2026 Board of Trustees Calendar
(*EXHIBIT F-6 Robin Gearing*)
- B. Resolution-Harris Center Board of Trustees Signature Authorization and Delegation Authority for Certain Items
(*EXHIBIT F-7 Stanley Adams*)
- C. Resolution-Retirement Plan 2026
(*Ninfa Escobar/Kip Baughman*)

VIII. REVIEW AND COMMENT

- A. Strategic Plan Review
(*Wayne Young*)

IX. BOARD CHAIR'S REPORT

X. EXECUTIVE SESSION

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

• As authorized by Section 551.074 of the Texas Government Code, to review and discuss the performance evaluation of the Chief Executive Officer. Dr. Robin Gearing, Board Chair

• As authorized by Section 551.071 of the Texas Government Code, to seek legal advice from attorney regarding amendments to the Harris Center Retirement Plans. Kendra Thomas, General Counsel

• As authorized by Section 551.071 of the Texas Government Code, consultation with attorney regarding Interlocal Agreement between the City of Houston and the Harris Center related to mental health care services for unhoused persons. Kendra Thomas, General Counsel

XI. RECONVENE INTO OPEN SESSION

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

XIII. ADJOURN

Veronica Franco

Veronica Franco, Board Liaison
Robin Gearing, Ph.D., 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 109
9401 Southwest Freeway
Houston, Texas 77074

TYPE OF MEETING: Regular

DATE: September 23, 2025

**TRUSTEES
IN ATTENDANCE:** Dr. Robin Gearing, PhD-Chair
Gerald Womack-Secretary
Dr. Katherine Bacon
Dr. Jeremy Lankford
Resha Thomas

TRUSTEES ABSENT: Jim Lykes, Vice Chairperson
Dr. Max Miller, Jr-Vice Chairperson
Natali Hurtado
Dr. Quianta Moore
Sheriff Ed Gonzalez

I. Declaration of Quorum

Dr. Robin Gearing, Chair, called the meeting to order at 8:33 a.m. noting that a quorum of the Board was in attendance.

II. Public Comments-

No Public Comment

III. Approval of Minutes

MOTION BY: LANKFORD

SECOND: THOMAS

With unanimous affirmative votes

BE IT RESOLVED the Minutes of the Regular Board of Trustees meeting held on Tuesday, August 26, 2025 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. Audit Committee Reports and/or Action-J. Lykes, Chair
- B. Resource Committee Reports and/or Action-G. Womack-Chair
- C. Program Committee Reports and/or Action-M. Miller, Jr. - Chair
- D. Quality Committee Reports and/or Action-J. Lankford-Chair
- E. Foundation Report and/or Action-N. Hurtado, Chair

VI. Consent Agenda

- A. FY'25 Year-to-Date Budget Report-August
- B. September 2025 Contract Amendments Over 250K
- D. Confidentiality and Disclosure of Patient/Individual Health Information
- E. Employee Job Descriptions
- F. Employee Performance Evaluations
- G. Incident Response Policy
- H. Information Security Policy
- I. Obligation to identify individuals or Entities Excluded from Participation in Federal Healthcare Program
- J. Off-Premises Equipment Usage
- K. Signature for Authorization
- L. Suicide/Homicide Prevention
- M. Declaration of Mental Health Treatment
- N. Pregnant Workers and Accommodations
- O. Termination of General Revenue Contract Providers with Harris Center-IDD Services
- P. Recording Policy

MOTION: BACON SECOND: WOMACK

With unanimous affirmative votes

BE IT RESOLVED Consent Agenda items A-B and D- P (Exhibits F2-F3 and F-5 - F17) as presented are approved.

- C. September 2025 Interlocal Agreements

Dr. Lankford recused themselves from deliberating and voting on Interlocal Agreements related to Harris Center Interlocal Agreement with #11-University of Texas M. D. Anderson Cancer Center

MOTION: BACON SECOND: WOMACK

With unanimous affirmative votes

BE IT RESOLVED the Interlocal Agreement with #11 the University of Texas M.D. Anderson Cancer Center as presented under Exhibit F-4, are approved.

VII. Review and Comment

A. **SB30 Overview-** Wayne Young presented the SB30 Overview to the Full Board.

VIII. Board Chair's Report

IX. Executive Session- entered into Executive Session at 9:19am

* 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 §§551.071 and 551.072 of the Texas Government Code, to consult with attorney and deliberate the purchase, exchange, lease or value of real property. Wayne Young, CEO and Ernest Savoy, Senior Assistant General Counsel-Contract Services & Real Estate

- As authorized by Section 551.074 of the Texas Government Code, to review and discuss the performance evaluation of the Chief Executive Officer. Dr. Robin Gearing, Chair and James Lykes, Chair of the Governance Committee

- In accordance with §§551.071 and 551.074 of the Texas Government Code, discussion of a personnel matter. Wayne Young, CEO and Kendra Thomas, General Counsel

X. Reconvene into Open Session-Reconvene into open session at 10:14am

XI. Consider and take action as a result of the executive session **No action taken**

XII. ADJOURN **MOTION: LANKFORD SECOND: BACON**

Motion passed with unanimous affirmative votes.

The meeting was adjourned at 10:14 AM

Respectfully submitted,

Veronica Franco, Board Liaison
Dr. Robin Gearing, Chair, Board of Trustees
The HARRIS CENTER for Mental Health and IDD

EXHIBIT F-2

The Harris Center for Mental Health and IDD

**Results of Financial Operations and Comparison to Original Budget
September 30, 2025**

Fiscal Year 2026

The Harris Center for Mental Health and IDD

Resource Committee

Board of Trustees

The Harris Center for Mental Health and IDD (The Center)

The Report on Results of Financial Operations and Comparison to Original Budget (the Report) submitted herewith was prepared by The Center's Accounting Department.

Responsibility for the accuracy, completeness, and fairness of presentation of the presented data rests with The Center, the Chief Financial Officer and the Accounting department.

We believe the Report, as presented, is materially accurate and is presented in a manner designed to fairly set forth the financial position and results of operations of The Center.

The Center's accounting records for its general fund are maintained on a modified accrual basis of accounting. Under this method, revenues are recognized in the period when they become both measurable and available, and expenditures are recognized when the related fund liability is incurred, if measurable.

The Report submitted herewith was prepared on a budgetary basis which is not in accordance with generally accepted accounting principles nor with financial reporting principles set forth by the Governmental Accounting Standards Board (GASB). The Report has not been audited by an independent auditor.

Stanley Adams

Stanley Adams

Chief Financial Officer

The Harris Center for Mental Health and IDD
Results of Financial Operations and Comparison to Original Budget - Operating Activities
September 30, 2025
Non-GAAP / Budgetary-Basis Reporting
Unaudited - Subject to Change

For the Month Ended						Fiscal Year to Date								
Original			Variance			Original		Variance						
Budget		Actual	\$	%		Budget	Actual	\$	%					
Operating Revenues														
State General Revenue	\$	11,145,628	\$	11,015,619	(130,009)	-1%	\$	11,145,628	\$	11,015,619	(130,009)	-1%		
Harris County and Local		4,683,587		4,196,272	(487,315)	-10%		4,683,587		4,196,272	(487,315)	-10%	A	
Federal Contracts and Grants		4,466,048		3,711,461	(754,587)	-17%		4,466,048		3,711,461	(754,587)	-17%	B	
State Contract and Grants		1,993,454		1,675,977	(317,477)	-16%		1,993,454		1,675,977	(317,477)	-16%	C	
Third Party Billing		3,465,049		3,589,672	124,623	4%		3,465,049		3,589,672	124,623	4%		
Charity Care Pool		3,590,350		3,590,349	(1)	0%		3,590,350		3,590,349	(1)	0%		
Directed Payment Programs		450,000		437,942	(12,058)	-3%		450,000		437,942	(12,058)	-3%		
Patient Assistance Program (PAP)		1,098,200		1,178,723	80,523	7%		1,098,200		1,178,723	80,523	7%		
Interest Income		277,083		192,788	(84,295)	-30%		277,083		192,788	(84,295)	-30%		
Operating Revenues, total	\$	31,169,399	\$	29,588,803	\$	(1,580,596)	-5%	\$	31,169,399	\$	29,588,803	\$	(1,580,596)	-5%
Operating Expenditures														
Salaries and Fringe Benefits	\$	20,480,600	\$	21,040,902	(560,302)	-3%	\$	20,480,600	\$	21,040,902	(560,302)	-3%	D	
Contracts and Consultants		1,260,282		760,079	500,203	40%		1,260,282		760,079	500,203	40%		
Contracts and Consultants-HCPC		3,960,586		3,890,426	70,160	2%		3,960,586		3,890,426	70,160	2%		
Supplies		354,213		43,907	310,306	88%		354,213		43,907	310,306	88%		
Drugs		2,310,715		2,409,030	(98,315)	-4%		2,310,715		2,409,030	(98,315)	-4%		
Purchases, Repairs and Maintenance of:														
Equipment		156,054		43,196	112,858	72%		156,054		43,196	112,858	72%		
Building		281,354		58,687	222,667	79%		281,354		58,687	222,667	79%		
Vehicle		90,602		19,050	71,552	79%		90,602		19,050	71,552	79%		
Software		346,270		58,420	287,850	83%		346,270		58,420	287,850	83%		
Telephone and Utilities		318,602		256,961	61,641	19%		318,602		256,961	61,641	19%		
Insurance, Legal and Audit		209,827		169,185	40,642	19%		209,827		169,185	40,642	19%		
Travel & Training		252,185		19,130	233,055	92%		252,185		19,130	233,055	92%		
Dues & Subscriptions		630,342		332,252	298,090	47%		630,342		332,252	298,090	47%		
Other Expenditures		371,551		812,455	(440,904)	-119%		371,551		812,455	(440,904)	-119%	E	
Operating Expenditures, total	\$	31,023,183	\$	29,913,680	\$	1,109,503	4%	\$	31,023,183	\$	29,913,680	\$	1,109,503	4%
Operating Activities -														
Change in Fund Balance/Net Position	\$	146,216	\$	(324,877)	\$	(471,093)		\$	146,216	\$	(324,877)	\$	(471,093)	

The Harris Center for Mental Health and IDD
Results of Financial Operations and Comparison to Original Budget - Capital Outlay & Debt Service Related Activities
September 30, 2025
Non-GAAP / Budgetary-Basis Reporting
Unaudited - Subject to Change

	For the Month Ended				Fiscal Year to Date			
	Original Budget	Actual	Variance \$	%	Original Budget	Actual	Variance \$	%
Revenues								
Harris County and Local (CHC)	\$ -	\$ -	-		\$ -	\$ -	-	
State Contract and Grants (HHSC)	-	-	-		-	-	-	
Revenues, total	\$ -	\$ -	\$ -		\$ -	\$ -	\$ -	
Expenditures								
Debt Service	\$ 146,216	\$ -	\$ 146,216	100%	\$ 146,216	\$ -	\$ 146,216	100%
Capital outlay	-	97,425	(97,425)		-	97,425	(97,425)	
Expenditures, total	\$ 146,216	\$ 97,425	\$ 48,791		\$ 146,216	\$ 97,425	\$ 48,791	
Excess (Deficiency) of revenues over expenditures	\$ (146,216)	\$ (97,425)	48,791	-33%	\$ (146,216)	\$ (97,425)	48,791	
Other Financing Sources								
Revenue Bonds Issued	-	-	-		-	-	-	
Insurance proceeds	-	-	-		-	-	-	
Sale of Capital Assets	-	-	-		-	-	-	
Other Financing Sources	-	-	-		-	-	-	
Other Financing Uses	-	-	-		-	-	-	
Other Financing Sources, total	\$ -	\$ -	\$ -		\$ -	\$ -	\$ -	
Capital Outlay & Debt Service Activities -								
Change in Fund Balance/Net Position	\$ (146,216)	\$ (97,425)	\$ 48,791		\$ (146,216)	\$ (97,425)	\$ 48,791	

The Harris Center for Mental Health and IDD
Notes to Statements Presented
Non-GAAP / Budgetary-Basis reporting
September 30, 2025

Results of Financial Operations and Comparison to Original Budget

A Harris County and Local Revenue

Several non-grant revenue streams did not see any activity in the month of September. These accounts include the income received from our HUD811 properties and Value/Incentive Based MCO contracts.

B Federal Contract and grants

Our Early Childhood Intervention (ECI) runs on a federal fiscal year (Oct-Sept). However, the contract exhausted its FY25 budget in June 2025, therefore, no revenue has been recognized since that period. In September, expenditures under this grant totaled \$719K, which we expect to recognize in October and we project expenditures to be congruent with revenue by June 2026.

C State Contract and Grants

There are still some contracts that are historically being underspent in their personnel categorical budgets such as CMH, MST, and SMART. There are also some contracts whose revenue is offset by program income such as TCOOMMI. The more program income that is received, the less grant revenue that can be recognized. There are a few contracts that are off due to timing. Most notable are HCC and MHGJ-II. HCC had a portion of its budget allocated towards construction last year. With that portion of the budget now freed up to cover program costs, the program can start ramping up its efforts in other areas to spend down. Not too dissimilar is MHGJ-II. That program started mid-year FY25. The contract will allow almost \$2M in carryforward dollars into FY26.

D Salaries and Fringe Benefits

The \$560K (3%) variance is due to the number of work days during the month. September was a 22 work day month, which is higher than average (21.75), while our budget is flat throughout the year.

E Other expenditures

Other expenditures for September include \$423K in P-card usage that is partially in connection with the County Inspire grant. We expect to recognize revenue of approximately \$324K in October for County Inspire grant expenditures. Additionally, September included a payment of \$150K for Pitney-Bowes postage credits.

The Harris Center for Mental Health and IDD

Balance Sheet

September 30, 2025

Non-GAAP / Budgetary-Basis Reporting

Unaudited - Subject to Change

	August - 2025	September - 2025	Change
Assets			
Current Assets			
Cash and Cash Equivalents			
Cash and Petty Cash	\$ 18,462,361	\$ 22,540,138	\$ 4,077,777
Cash Equivalents	51,980,410	41,441,846	(10,538,564)
Cash and Cash Equivalents, total	\$ 70,442,771	\$ 63,981,984	\$ (6,460,787) AA
Inventories, Deposits & Prepaids	4,365,530	6,104,750	1,739,220
Accounts Receivable:			
Patient A/R, net of allowance	1,743,665	2,074,402	330,737
A/R from other governments	28,211,760	37,881,623	9,669,863 BB
Other A/R	663,200	729,086	65,886
Current Assets, total	\$ 105,426,926	\$ 110,771,845	\$ 5,344,919
Restricted Cash and Cash Equivalents	19,535,261	19,966,242	430,981 CC
Capital Assets:			
Land	12,709,144	12,709,144	-
Building and Improvements	55,610,903	55,610,903	-
Right-to-use assets (Leases & SBITA)	6,312,466	6,312,466	-
Furniture, Equipment and Vehicles	7,960,059	7,960,059	-
Construction in Progress	11,376,400	11,376,400	-
Accumulated Depreciation/Amortization	(38,908,961)	(38,908,961)	-
Capital Assets, net total	\$ 55,060,011	\$ 55,060,011	\$ -
Total Assets	\$ 180,022,198	\$ 185,798,098	\$ 5,775,900
Liabilities & Fund Balance/Net Position			
Liabilities			
Accounts Payable and Accrued Liabilities	\$ 14,452,023	\$ 16,923,228	\$ 2,471,205
Unearned Revenues	9,678,920	13,387,373	3,708,453 DD
Noncurrent liabilities:			
Due within one year	2,713,041	2,963,041	250,000
Due in more than one year	39,553,205	39,321,749	(231,456)
Liabilities, total	\$ 66,397,189	\$ 72,595,391	\$ 6,198,202
Fund Balance/Net Position			
Net Investment in Capital Assets	41,868,788	42,299,769	430,981
Restricted for Capital Projects	19,535,261	19,966,242	430,981 CC
Nonspendable	4,365,530	6,104,750	1,739,220
Assigned	15,434,386	15,434,386	-
Unassigned/Unrestricted	13,212,779	10,611,596	(2,601,183)
Change in fund balance/net position	19,208,266	18,785,964	(422,302)
Fund Balance/Net Position, Total	\$ 113,625,009	\$ 113,202,707	\$ (422,302)
Total Liabilities & Fund Balance/Net Position	\$ 180,022,198	\$ 185,798,098	\$ 5,775,900

The Harris Center for Mental Health and IDD
Notes to Statements Presented
Non-GAAP / Budgetary-Basis reporting
September 30, 2025

Balance Sheet

AA Cash and Investments

The \$6.5M net decrease in cash is primarily due to cash used in normal operations. Q1 payment for the FY26-FY27 State performance contract is expected in October and will result in an increase of cash and unearned revenues and a decrease of A/R from Other Governments.

BB A/R from Other Governments

The increase of \$10.7M is primarily attributable to the Q1 payment for the FY26-FY27 State performance contract not yet received. Q1 payment for the FY26-FY27 State performance contract is expected in October and will result in an increase of cash and unearned revenues and a decrease of A/R from Other Governments.

CC Restricted Cash & Restricted Net Position for Capital Projects

Increase related to the quarterly intercept obligation owed to BNY for the upcoming principal and interest payment in November. This cash is restricted for use for the financing of the approved capital projects and for the payment of principal and interest when due; as such the corresponding net position is restricted for capital projects.

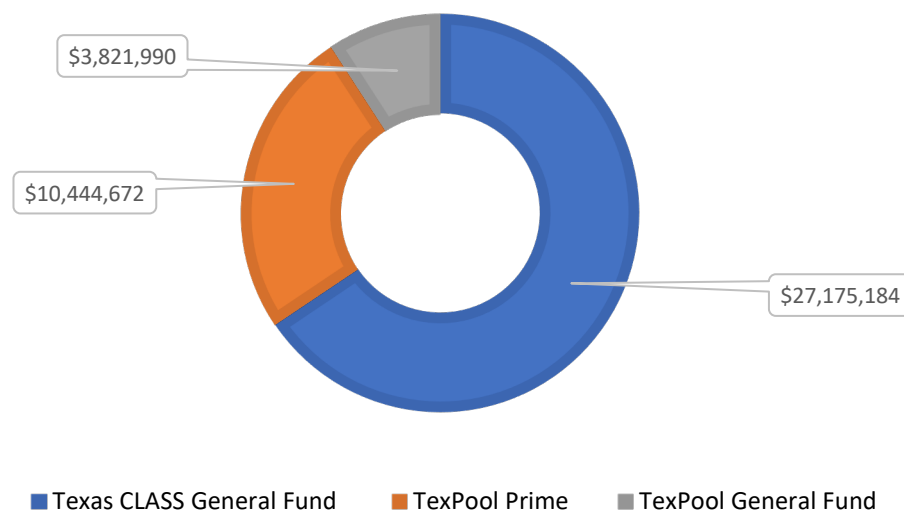
DD Unearned Revenues

Unearned revenues increased by \$3.7M due to receipt of Q1 payment for the LIDDA contract. Q1 payment for the FY26-FY27 State performance contract is expected in October and will result in an increase of cash and unearned revenues and a decrease of A/R from Other Governments.

The Harris Center for Mental Health and IDD
Investment Portfolio
September 30, 2025

Local Government Investment Pools (LGIPs)	Beginning Balance	Transfer In	Transfer Out	Interest Income	Ending Balance	Portfolio %	Monthly Yield
<i>Texas CLASS</i>							
Texas CLASS General Fund	27,078,217			96,966	\$ 27,175,184	65.57%	4.39%
<i>TexPool</i>							
TexPool Prime	21,093,513		(10,700,000)	51,160	10,444,672	25.20%	4.42%
TexPool General Fund	3,808,680			13,311	3,821,990	9.22%	4.31%
<i>TexPool Sub-Total</i>	24,902,193	-	(10,700,000)	64,470	14,266,663	34.42%	4.39%
Total Investments	\$ 51,980,410	\$ -	\$ (10,700,000)	161,436	\$ 41,441,846	99.99%	4.39%
Additional Interest on Checking Accounts				31,352			
Total Interest Earned during the current month				<u>192,788</u>			

Investment Portfolio Weight



3 Month Weighted Average Maturity (Days)	1.00
3 Month Weighted Average Yield	4.36%
3 Month Rolling Weighted Average Daily Treasury Bill Rate (4 week	4.23%
Interest Rate - JPMorgan Hybrid Checking	2.90%
Earnings credit rate (ECR) - JPMorgan Hybrid Checking	3.00%

This Investment Portfolio Report of The Harris Center for Mental Health and IDD as of September 30, 2025, is in compliance with the provisions of the Public Funds Investment Act (PFIA), Chapter 2256 of the Texas Government Code and the Investment Strategy approved by the Board of Trustees.

Approved:

Michael T. Hooper Jr.

Michael T. Hooper Jr.

Director of Financial Accounting & Reporting

The Harris Center for Mental Health and IDD
Monthly Report of Financial Transactions Related to Payments of Liabilities for Employee Benefits
September 30, 2025

Vendor	Description	Monthly Not-To-Exceed ⁽¹⁾	Sep-25	Fiscal Year to Date Total
Lincoln Financial Group (LFG)	Retirement Funds (401a, 403b, 457)	\$3,650,000	\$2,024,342	\$2,024,342
Blue Cross Blue Shield of TX	Health and Dental Insurance	\$3,300,000	\$2,661,108	\$2,661,108
UNUM	Life Insurance	\$310,000	\$0	\$0

Notes:

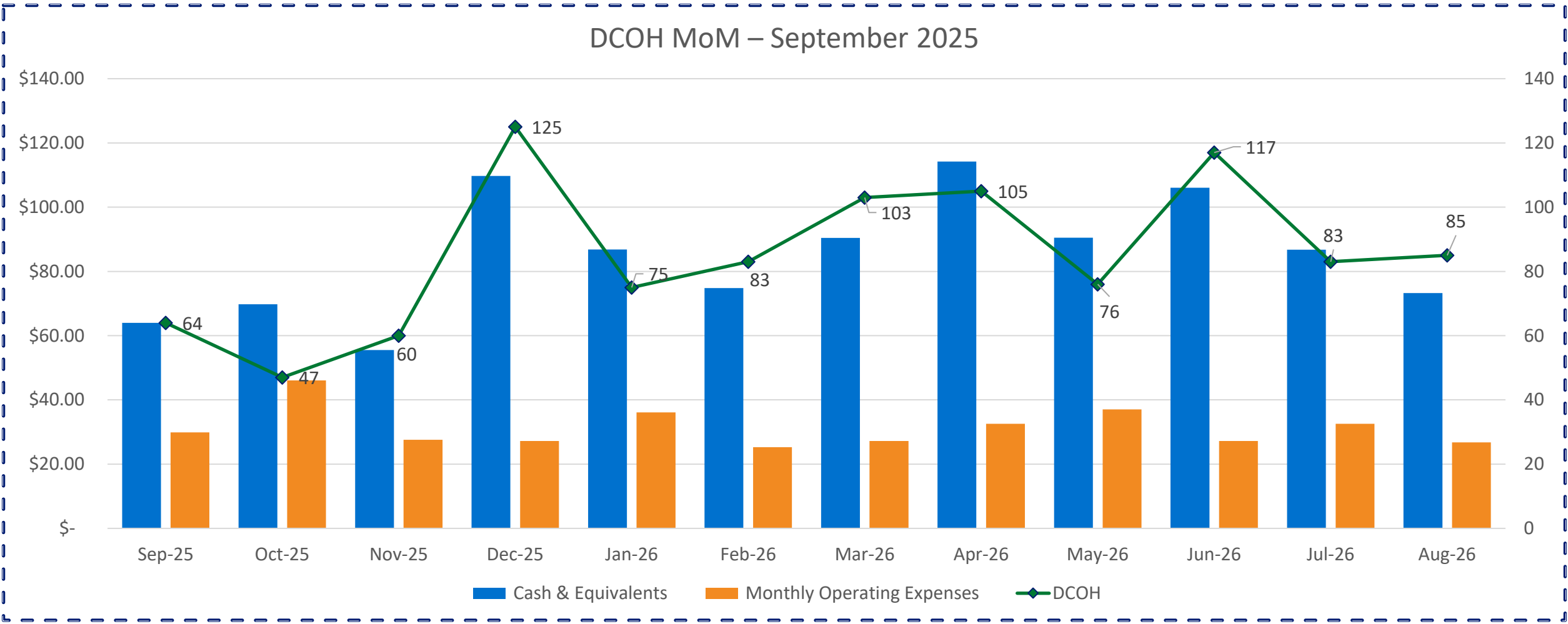
⁽¹⁾ *As established by the Board Resolution approved October 22, 2024: Harris Center Board of Trustees Signature Authorization and Delegation Authority for Certain Items effective September 24, 2024.*



Additional Analysis – September 2025

Days-Cash-On-Hand (DCOH)– as of 09/30/2025

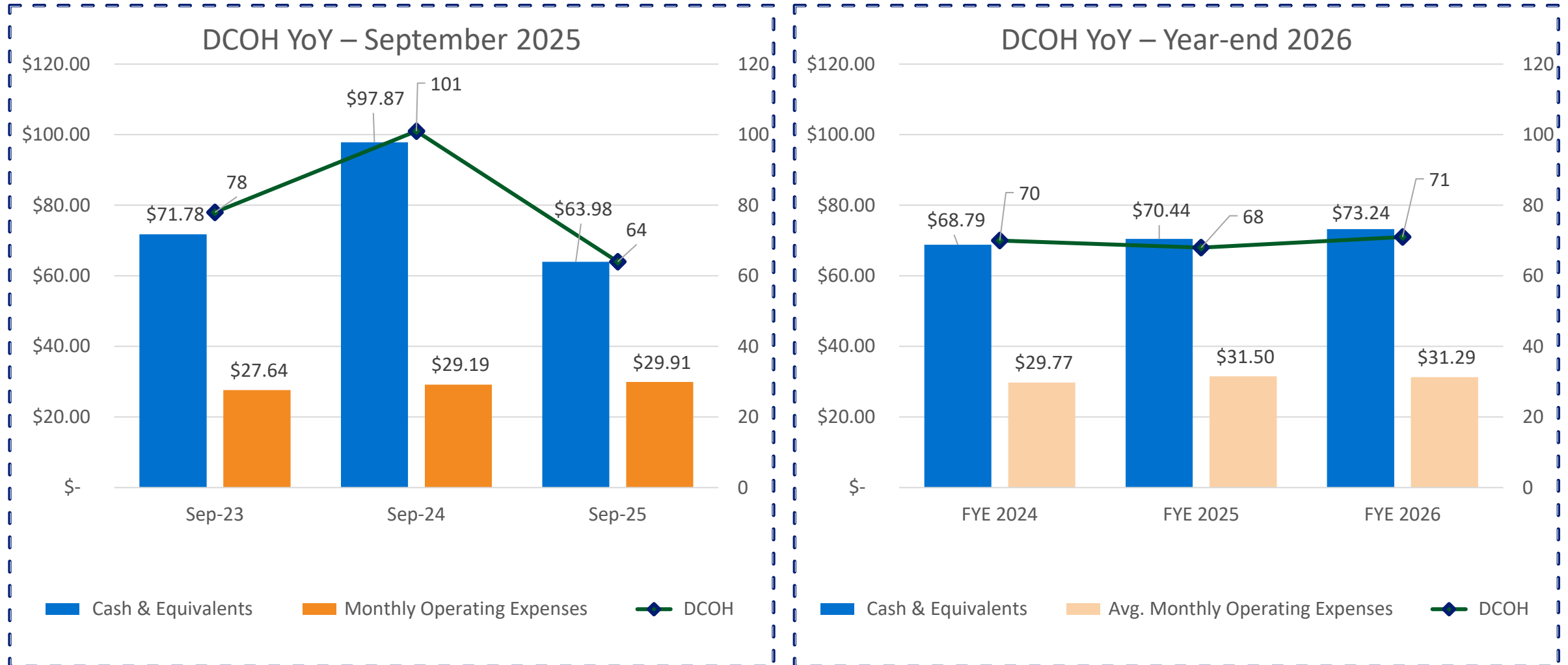
Month-over-month (“MoM”) (\$ amounts in millions)



DCOH = Cash & Equivalents @ Month End divided by Daily Operating Expenses
 Months in FY 2026 after current Month are based on projections

Days-Cash-On-Hand (DCOH)– as of 09/30/2025

Year-over-year ("YoY") (\$ amounts in millions)



DCOH = Cash & Equivalents @ Month End divided by Daily Operating Expenses
Months in FY 2026 after current Month are based on projections

Capital Outlay – as of 09/30/2025

Project/Funding Source 	Year-to-date Total
 Facilities Capital Projects	84,000
Fund Balance	84,000
 IT Capital Projects	-
Fund Balance	-
 NPC Renovation	13,425
Bond Series 2024	13,425
Grand Total	97,425

Funding Source/Project 	Year-to-date Total
 Fund Balance	\$ 84,000
Facilities Capital Projects	\$ 84,000
IT Capital Projects	\$ -
 Bond Series 2024	\$ 13,425
NPC Renovation	\$ 13,425
Grand Total	\$ 97,425

EXHIBIT F-3

**OCTOBER 2025
NEW CONTRACTS
OVER 250k**

OCTOBER 2025
FISCAL YEAR 2026

[illegible]



Executive Contract Summary

Contract Section

Contractor*

UKG Kronos Systems, LLC

Contract ID #*

6685

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

The Harris Center and UKG

Agenda Item Submitted For: * (?)

- ☐ Information Only (Total NTE Amount is Less than \$250,000.00)
☒ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☐ Yes ☒ No

Funding Information*

- ☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

9/1/2025

Contract Term End Date* (?)

8/31/2026

If contract is off-cycle, specify the contract term (?)

Current Contract Amount*

\$ 400,000.00

Increase Not to Exceed*

\$ 8,022.82

Revised Total Not to Exceed (NTE)*

\$ 408,022.82

Fiscal Year* (?)

2026

Amount* (?)

\$ 408,022.82

Funding Source*

General Revenue (GR)

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 Amending FY2026 Renewal Amount

Justification/Purpose of Contract/Description of Services Being Provided* (?)

Harris Center Time and Payroll System

Updated quote received after original FY2026 ECS Renewal was completed.

Contract Owner*

Mustafa Cochinwala

Previous History of Contracting with Vendor/Contractor*
☒ Yes ☐ No ☐ Unknown
Please add previous contract dates and what services were provided*

FY2012 - FY2025

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)
☐ Yes ☒ No ☐ Unknown
Please provide an explanation*

N/A

Community Partnership* (?)
☐ Yes ☒ No ☐ Unknown
Supporting Documentation Upload (?)

UKG - Harris Center FY2026.xlsx

54.9KB

Vendor/Contractor Contact Person**Name***

Chris Layne

Address *

Street Address

297 Billerica Road

Address Line 2

City

Chelmsford

State / Province / Region

MA

Postal / Zip Code

01824-4119

Country

US

Phone Number *

303-726-7503

Email *

chris.layne@kronos.com

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
1130	\$ 408,022.82	553002
Budget Manager	Secondary Budget Manager	
Campbell, Ricardo	Campbell, Ricardo	

Provide Rate and Rate Descriptions if applicable * (?)

N/A

Project WBS (Work Breakdown Structure) * (?)

N/A

Requester Name

Hurst, Richard

Submission Date

8/29/2025

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Approval Date

9/3/2025

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Mustafa Cochinwala

Approval Date

9/3/2025

Contracts Approval

Approve *

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

Approved by *

Belinda Stude

Approval Date *

9/3/2025

EXHIBIT F-4

OCTOBER 2025 INTERLOCAL AGREEMENTS



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2025

Contract ID# *

2023-0737

Contractor Name *

Harris County

Service Provided* (?)

Competency and Sanity Evaluation Services for the Administrative Office of the District Courts

Renewal Term Start Date *

10/1/2025

Renewal Term End Date *

9/30/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☐ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ 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* (?)

\$ 3,402,477.00

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*

Sheenia Williams-Wesley

Contract Owner*

Sean McElroy

File Upload (?)**Renewal Determination****Is the contract being renewed for next fiscal year with this Contractor?* (?)**☒ Yes ☐ No**How does this contract support Agency/Unit Strategic priorities? ***

Provides competency and sanity assessments for inmates in jail and other services for their mental health needs

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.*
6205	\$ 3,402,477.00	540000

Budget Manager*

Williams-Wesley, Sheenia

Secondary Budget Manager*

Reyes, Elizabeth

Provide Rate and Rate Descriptions if applicable* (?)

n/a

Project WBS (Work Breakdown Structure)* (?)

n/a

Fiscal Year* (?)

2026

Amount* (?)

\$ 3,402,477.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

County

Contract Content Changes

Are there any required changes to the contract language? * (?)

☐ Yes ☒ No

Will the scope of the Services change? *

☐ Yes ☒ No

Is the payment deadline different than net (45)? *

☐ Yes ☒ No

Are there any changes in the Performance Targets? *

☐ Yes ☒ No

Are there any changes to the Submission deadlines for notes or supporting documentation? *

☐ Yes ☒ No

File Upload (?)

Contract Owner

Contract Owner* (?)

Please Select Contract Owner

Sean McElroy

Budget Manager Approval(s)

Approved by

Shervina Williams-Wesley

Contract Owner Approval

Approved by

Sean McElroy

Contracts Approval

Approve *

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

Approved by *

Belinda Stude

Approval Date *

9/4/2025

Executive Contract Summary

Contract Section

Contractor*

Harris County Sheriff Office

Contract ID #*

2023-0783

Presented To*

- ☐ Resource Committee
☒ Full Board

Date Presented*

10/21/2025

Parties* (?)

The Harris Center for MH and IDD Services and Harris County Sheriff Office

Agenda Item Submitted For: * (?)

- ☐ Information Only (Total NTE Amount is Less than \$250,000.00)
☒ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?

*

- ☐ Yes ☒ No

Funding Information*

- ☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

10/1/2025

Contract Term End Date* (?)

9/30/2026

If contract is off-cycle, specify the contract term (?)

county fiscal year

Fiscal Year* (?)

2026

Amount* (?)

\$ 1,143,107.00

Fiscal Year* (?)

2027

Amount* (?)

\$ 103,919.00

Funding Source*

County

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

Justification/Purpose of Contract/Description of Services Being Provided* (?)

To provide enhanced treatment planning and continuity of care services to inmates housed in detention facilities operated by the Department.

Contract Owner*

Sean McElroy

Previous History of Contracting with Vendor/Contractor*

☒ Yes ☐ No ☐ Unknown

Please add previous contract dates and what services were provided*

10/1/24 - 9/30/25 Discharge planning services

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

☐ Yes ☐ No ☒ Unknown

Community Partnership* (?)

☒ Yes ☐ No ☐ Unknown

Specify Name*

Harris County

Supporting Documentation Upload (?)**Vendor/Contractor Contact Person****Name***

Harris County Sheriff Office

Address*

Street Address

1001 Preston Street

Address Line 2

8th Floor

City

Houston

Postal / Zip Code

77002-1839

State / Province / Region

Texas

Country

United States

Phone Number*

7132748704

Email*

latoya.silverio@sheriff.hctx.net

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6206	\$ 1,247,026.00	540000
Budget Manager		Secondary Budget Manager
Williams-Wesley, Sheenia		Reyes, Elizabeth

Provide Rate and Rate Descriptions if applicable* (?)

n/a

Project WBS (Work Breakdown Structure)* (?)

n/a

Requester Name

Williams-Wesley, Sheenia

Submission Date

9/2/2025

Budget Manager Approval(s)

Approved by

Sheenia Williams-Wesley

Approval Date

9/2/2025

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Sean McElroy

Approval Date

9/3/2025

Contracts Approval

Approve*

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

Approved by *

Belinda Stude

Approval Date *

9/12/2025



Executive Contract Summary

Contract Section



Select Header For This Contract*

Interlocal

Contractor*

Harris County Sheriff Office IDD and MH Clinical Services

Contract ID #*

2023-0661

Presented To*

☒ Resource Committee

☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

The Harris Center for MH and IDD Services and Harris County Sheriff Office

Agenda Item Submitted For: * (?)

☐ Information Only (Total NTE Amount is Less than \$250,000.00)

☒ Board Approval (Total NTE Amount is \$250,000.00 or more)

☐ 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

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

☐ Yes ☒ No

Funding Information*

☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

10/1/2025

Contract Term End Date* (?)

9/30/2026

If contract is off-cycle, specify the contract term (?)

County fiscal year

Current Contract Amount*

\$ 10,423,770.00

Increase Not to Exceed*

\$ 423,770.00

Revised Total Not to Exceed (NTE)*

\$ 10,625,659.00

Fiscal Year* (?)

2026

Amount* (?)

\$ 9,555,122.00

Fiscal Year* (?)

2027

Amount* (?)

\$ 868,648.00

Funding Source*

County

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

Contract Owner*

Sean McElroy

Previous History of Contracting with Vendor/Contractor*☒ Yes ☐ No ☐ Unknown**Please add previous contract dates and what services were provided***

10/1/24 - 09/30/25 services for inmates with HCSO

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)☐ Yes ☐ No ☒ Unknown**Community Partnership* (?)**☒ Yes ☐ No ☐ Unknown**Specify Name***

Harris County

Supporting Documentation Upload (?)**How does this contract support Agency/Unit Strategic priorities?***

Serving clients to get the resources they need to transition into the community.

Vendor/Contractor Contact Person**Name***

Michael Lanham

Address*

Street Address

1200 Baker Street

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77002-1206

Country

United States

Phone Number*

3462861620

Email*

micheal.lanham@sheriff.hctx.net

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6201	\$ 2,185,978.00	540000

Budget Manager

Williams-Wesley, Sheenia

Secondary Budget Manager

Reyes, Elizabeth

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6202	\$ 2,520,015.00	540000

Budget Manager

Williams-Wesley, Sheenia

Secondary Budget Manager

Jiles, Monalisa

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6203	\$ 1,987,801.00	540000

Budget Manager

Williams-Wesley, Sheenia

Secondary Budget Manager

Reyes, Elizabeth

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6204	\$ 3,729,976.00	540000

Budget Manager

Williams-Wesley, Sheenia

Secondary Budget Manager

Reyes, Elizabeth

Provide Rate and Rate Descriptions if applicable* (?)

n/a

Project WBS (Work Breakdown Structure)* (?)

n/a

Requester Name

Williams-Wesley, Sheenia

Submission Date

9/23/2025

Budget Manager Approval(s)

Approved by

Shenita Williams Wesley

Approval Date

9/23/2025

Contract Owner Approval



Approved by

Sean McElroy

Approval Date

9/24/2025

Contracts Approval



Approved by

Belinda Stude

Approval Date

9/24/2025



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2025

Contract ID# *

2025-1043

Contractor Name *

Harris County Sheriff's Office

Service Provided* (?)

Forensic Single Portal Authority ("FSPA") Program

Renewal Term Start Date *

10/1/2025

Renewal Term End Date *

9/30/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☐ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ 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* (?)

\$ 998,239.87

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*

Sheenia Williams-Wesley

Contract Owner*

Monalisa Jiles

File Upload (?)**Renewal Determination****Is the contract being renewed for next fiscal year with this Contractor?* (?)**☒ Yes ☐ No**How does this contract support Agency/Unit Strategic priorities? ***

Providing services necessary to reduce or ameliorate the stress of incarceration in efforts to reduce lengthy wait times associated with access to competency restoration services

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.*
6207	\$ 998,239.87	540000

Budget Manager*

Williams-Wesley, Sheenia

Secondary Budget Manager*

Reyes, Elizabeth

Provide Rate and Rate Descriptions if applicable* (?)

n/a

Project WBS (Work Breakdown Structure)* (?)

n/a

Fiscal Year* (?)

2026

Amount* (?)

\$ 915,053.21

Fiscal Year* (?)

2027

Amount* (?)

\$ 83,186.66

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source *

County

Contract Content Changes

Are there any required changes to the contract language? * (?)

☐ Yes ☒ No

Will the scope of the Services change? *

☐ Yes ☒ No

Is the payment deadline different than net (45)? *

☐ Yes ☒ No

Are there any changes in the Performance Targets? *

☐ Yes ☒ No

Are there any changes to the Submission deadlines for notes or supporting documentation? *

☐ Yes ☒ No

File Upload (?)

Contract Owner

Contract Owner* (?)

Please Select Contract Owner

Sean McElroy

Budget Manager Approval(s)

Approved by

Shernia Williams-Wesley

Contract Owner Approval

Approved by

Sean McElroy

Contracts Approval

Approve *

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

Approved by*

Belinda Stude

Approval Date*

9/9/2025



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Select Header For This Contract *

Interlocal

Current Fiscal Year

2026

Contract ID# *

2023-0661

Contractor Name *

Harris County Sheriff's Office

Renewal Term Start Date

10/1/2025

Renewal Term End Date

9/30/2026

Term for Off-Cycle Only (For Reference Only)

Agenda Item Submitted For: (?)

- ☐ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☒ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ 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* (?)

\$ 10,000,000.00

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*

Sheenia Williams-Wesley

Contract Owner*

Sean McElroy

File Upload (?)**Renewal Determination****Is the contract being renewed for next fiscal year with this Contractor?* (?)**☒ Yes ☐ No**How does this contract support Agency/Unit Strategic priorities?***

Providing mental health services to inmates and help with transitioning into community

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.*
6201	\$ 1,762,208.00	540000

Budget Manager*

Williams-Wesley, Sheenia

Secondary Budget Manager*

Reyes, Elizabeth

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6202	\$ 2,520,015.00	540000

Budget Manager*

Williams-Wesley, Sheenia

Secondary Budget Manager*

Jiles, Monalisa

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6203	\$ 1,987,801.00	540000

Budget Manager*

Williams-Wesley, Sheenia

Secondary Budget Manager*

Reyes, Elizabeth

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6204	\$ 3,729,976.00	540000
Budget Manager*	Secondary Budget Manager*	
Williams-Wesley, Sheenia	Reyes, Elizabeth	

Provide Rate and Rate Descriptions if applicable (?)

n/a

Project WBS (Work Breakdown Structure) (?)

n/a

Fiscal Year* (?)	Amount* (?)
2026	\$ 9,166,667.00

Fiscal Year* (?)	Amount* (?)
2027	\$ 833,333.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

County

Contract Content Changes

Are there any required changes to the contract language? * (?)

☐ Yes ☒ No

Will the scope of the Services change? *

☐ Yes ☒ No

Is the payment deadline different than net (45)? *

☐ Yes ☒ No

Are there any changes in the Performance Targets? *

☐ Yes ☒ No

Are there any changes to the Submission deadlines for notes or supporting documentation? *

☐ Yes ☒ No

File Upload (?)

Contract Owner

Contract Owner* (?)

Please Select Contract Owner

Sean McElroy

Budget Manager Approval(s)

Approved by

Shemita Williams Wesley

Approved by

Sign

Contract Owner Approval



Approved by

Sean McElroy

Contracts Approval



Approved by

Belinda Stude

Approval Date

9/23/2025



Executive Contract Summary

Contract Section


Contractor*

Spring Branch Independent School District

Contract ID #*

NA

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

Spring Branch Independent School District and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?
 *

☐ Yes ☒ No

Funding Information*

☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

9/11/2025

Contract Term End Date* (?)

8/31/2026

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2026

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 Services Being Provided* (?)

To perform screenings and clinical assessments, psychosocial services as needed, and follow-up services to students within the Spring Branch Independent School District.

Contract Owner*

Tiffanie Williams-Brooks

Previous History of Contracting with Vendor/Contractor*

☒ Yes ☐ No ☐ Unknown

Please add previous contract dates and what services were provided*

2019-Present

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

☐ Yes ☐ No ☒ Unknown

Community Partnership* (?)

☒ Yes ☐ No ☐ Unknown

Specify Name*

Spring Branch Independent School District

Supporting Documentation Upload (?)**Vendor/Contractor Contact Person****Name***

Lance Stallworth

Address*

Street Address

955 Campbell Road

Address Line 2

City

Houston

Postal / Zip Code

77024-2803

State / Province / Region

TX

Country

US

Phone Number*

713-251-2237

Email*

Lance.stallworth@springbranchisd.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
4323	\$ 0.00	000000

Budget Manager

Smith, Janai

Secondary Budget Manager

Shelby, Debbie

Provide Rate and Rate Descriptions if applicable* (?)

0.00

Project WBS (Work Breakdown Structure)* (?)

0.00

Requester Name

Bowser, Mohagony

Submission Date

9/12/2025

Budget Manager Approval(s)

Approved by

Janai Lynnette Smith

Approval Date

9/12/2025

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Sharon Williams Brooks, M.A., LPA

Approval Date

9/12/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/16/2025





Executive Contract Summary

Contract Section

Contractor*

UT Health San Antonio (Be Well Texas MAT-AUD)

Contract ID #*

2025-0999

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

The Harris Center and Be Well Texas

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?
 *

☐ Yes ☒ No

Funding Information*

☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

5/16/2025

Contract Term End Date* (?)

8/31/2025

If contract is off-cycle, specify the contract term (?)

Current Contract Amount*

\$ 25,307.00

Increase Not to Exceed*

\$ 25,307.00

Revised Total Not to Exceed (NTE)*

\$ 50,614.00

Fiscal Year* (?)

2025

Amount* (?)

\$ 25,307.00

Funding Source*

Federal Grant

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

Justification/Purpose of Contract/Description of Services Being Provided* (?)

Contract for MAT-AUD ended on May 15, 2025 and it was amended with the change of the name to (MSUD) extending it from May 16 to June 30, 2025.

This new MSUD contract is to cover the extended ramp-down of the program from May 16-June 30th. Please have Wayne Young or appointee to sign and return back to to Be Well.

Contract Owner*

Kim Kornmayer

Previous History of Contracting with Vendor/Contractor*

☒ Yes ☐ No ☐ Unknown

Please add previous contract dates and what services were provided*

FY24

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

☐ Yes ☐ No ☒ Unknown

Community Partnership* (?)

☒ Yes ☐ No ☐ Unknown

Specify Name*

Be Well Texas

Supporting Documentation Upload (?)

175499_14189_MSUD-08-HARRISCENTER-MSUD-Amendment.pdf

116.59KB

Vendor/Contractor Contact Person**Name***

Nicholas Sheffield

Address*

Street Address

UT Health San Antonio

Address Line 2

City

San Antonio

State / Province / Region

TX

Postal / Zip Code

78229

Country

US

Phone Number*

210-567-4533

Email*

sheffieldn@uthscsa.edu

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9363	\$ 25,307.00	437085
Budget Manager	Secondary Budget Manager	
Oshman, Jodel	Ramirez, Priscilla	

Provide Rate and Rate Descriptions if applicable* (?)

25,307.00

Project WBS (Work Breakdown Structure)* (?)

25,307.00

Requester Name

Sesay, Omar

Submission Date

9/9/2025

Budget Manager Approval(s)

Approved by

Jodel Oshman

Approval Date

9/9/2025

Contract Owner Approval

Approved by

Kim Kornmayer

Approval Date

9/9/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/10/2025

EXHIBIT F-5

The Harris Center System Quality, Safety and Experience Performance Improvement Plan FY 2026

Introduction

The Harris Center System Quality, Safety and Experience Performance Improvement Plan FY 2026 Introduction The Quality, Safety, and Experience Plan is established in accordance with The Harris Center's mission to transform the lives of people with behavioral health and IDD needs. The center's vision is to empower people with behavioral health and IDD needs to improve their lives through an accessible, integrated, and comprehensive recovery-oriented system of care. Our values as a center include collaboration, compassion, excellence, integrity, leadership, quality, responsiveness, and safety. The Quality, Safety and Experience Plan has been established to embrace the principles of transparency of measures and outcomes, accurate measurement and data reporting, and personal and collective accountability for excellent outcomes consistent with Certified Community Behavioral Health Clinic standards and the Commission on Accreditation of Rehabilitation Facilities requirements.

Vision

Our vision is to create a learning health system focused on a culture of continuous quality improvement and safety at The Harris Center to help people live their healthiest lives possible, and to become a national leader in quality and safety in the behavioral healthcare space as it influences dissemination of evidence-based practices.

Mission

We aim to improve quality, efficiency, and access to care and associated behavioral health and IDD services by delivering education, providing technical support, generating, and disseminating evidence, and conducting evaluation of outcomes in support of operational and service excellence and process management across The Harris Center and with external partners.

FY 2026 Goals

- Continue to build upon a learning health system focused on continuous quality improvement, patient safety, improving processes and outcomes.
- Partner with Organizational Development to enhance educational offerings focused on quality and safety education with all new employee orientation (High Reliability, Just Care Culture, Advanced Quality Improvement methodology, etc.).
- Hardwire a process for continuous readiness activities that comply with all legislative regulations and accrediting agencies' standards (e.g., CARF, CCBHC).
- Use transparent, simplified meaningful measures to champion the delivery of high-quality evidence-based care and service to our patients and their families and assure that it is safe, effective, timely, efficient, equitable, and patient centered care.
- Refine and enhance data management governance strategy to support a transparent environment to provide accessible, accurate, and credible data about the quality and equity of care delivered.
- Develop, integrate, and align quality initiatives and cross-functional approaches throughout

The Harris Center organization, including all entities. Enhance current committee structure to cover broad quality and safety work through the System Quality, Safety and Experience Committee. Develop a decentralized Quality Forum that reaches frontline performance improvement (PI) and Health Analytics/Data staff to provide education and tools to lead PI initiatives at their local sites. Develop and strengthen internal learning collaborative process to align with the Harris Center strategic plan for care pathways. IDD Care Pathway.

To ensure alignment with survey readiness as a Certified Community Behavioral Health Clinic (CCBHC) and

Commission on Accreditation of Rehabilitation Facilities (CARF), the System Quality, Safety and Experience plan focuses on indicators related to improving behavioral and physical health outcomes and takes actions to demonstrate improved patterns of care delivery, such as reductions in emergency department use, rehospitalization, and repeated crisis episodes. The Plan incorporates continuous quality improvement (CQI) processes to review known significant events.

The Harris Center CQI process is systematic and data-informed, fostering continuous learning and sustainable improvements across programs. The following steps are core to our quality infrastructure and are actively applied in alignment with the SQSE Plan:

Identify Areas for Improvement (Monthly): Regular analysis of performance measures and outcome data highlights targeted opportunities for improvement.

Root Cause Analysis (RCA): Structured RCA is conducted to uncover systemic or process-level gaps that contribute to performance shortfalls.

Action Plan Development: Multi-disciplinary teams create specific, measurable, and time-bound action plans to address root causes.

Implementation via PDSA Cycle: We employ Plan-Do-Study-Act (PDSA) cycles to test, adapt, and spread interventions.

Monitor and Adjust: Ongoing data collection and performance monitoring ensure responsiveness in quality improvement.

Documentation and Knowledge Transfer: Key learnings and outcomes are documented to support organizational learning and replication.

Transparent Communication: Findings and progress are communicated monthly with leadership and front-line teams to promote a culture of accountability and shared ownership.

FY2026 SQSE Priority Initiatives

The SQSE Plan focuses on initiatives that directly contribute to measurable improvements across key health domains. Highlights include:

- **Enhanced Workforce Training:** Trainings in suicide screening, de-escalation, trauma-informed care, and care management protocols.
- **Standardized Clinical Pathways:** Development and implementation of clinical care pathways to ensure best practice adherence.
- **Law Enforcement Collaboration:** Joint training and engagement initiatives focused on identifying and referring individuals with IDD and/or ASD.

Performance Monitoring and Outcomes:

Progress is tracked using established clinical and operational indicators, with monthly reviews conducted by senior leadership. The SQSE goals support the agency's strategic vision and long-term goals through FY2027, including:

- Zero preventable serious safety events
- Reduction in harm events
- Increased access and improved health outcomes
- Enhanced staff and provider engagement
- Improved patient satisfaction (response rates and top-box scores)
- Equity in service delivery

Key Performance Measures: T-CCBHC Selected Quality Measures

- I-Serv- Time to Service
- DEP-REM-6- Depression Remission at Six Months
- Unhealthy Alcohol Use: Screening & Brief Counseling
- Screening for Non-Medical Drivers of Health
- Adult Follow-up After Hospitalization for Mental Illness
- Controlling High Blood Pressure
- Follow-up After Emergency Department Visit for Alcohol and Other Drug Dependence
- Follow-up After Emergency Department Visit for Mental Health

The integrated Continuous Quality Improvement (CQI) and System, Quality, Safety, and Experience (SQSE) Plan reflect our unwavering commitment to delivering exceptional care. This comprehensive framework not only ensures alignment with regulatory requirements but also drives measurable improvements in clinical outcomes, patient experience, and population health. It empowers teams across the organization to continuously enhance care quality and safety, supports frontline innovation, and fosters a culture of excellence. By ensuring that all improvement efforts are data-driven and patient-centered, the plan serves as a vital tool in advancing our mission and sustaining high performance.

To ensure these goals are met, the System Quality, Safety and Experience Committee will:

- Establish a Rigorous Review Process: Implement a systematic review of CQI outcomes to identify areas for improvement and make necessary adjustments to staffing, services, and availability.
- Focus on Key Performance Indicators: Prioritize indicators related to behavioral and physical health outcomes, emergency department use, rehospitalization rates, and crisis episode frequency.
- Involve Medical Leadership: Engage the Medical Director in overseeing the quality of medical care, ensuring effective coordination and integration with primary care services.
- Address Significant Events: Develop protocols to review and respond to critical incidents, including suicides, overdoses, all-cause mortality, and 30-day hospital readmissions.
- Utilize Data-Driven Strategies: Leverage both quantitative and qualitative data to inform CQI activities, with a particular focus on addressing health disparities among minority populations.
- Implement Continuous Monitoring and Reporting: Establish mechanisms for ongoing monitoring, evaluation, and reporting of CQI activities and outcomes to relevant stakeholders and accreditation bodies.
- Adapt and Improve: Use feedback and data analysis to continuously refine and enhance the CQI plan, ensuring it remains responsive to emerging issues and effective in improving overall performance.

Governing Body

The Harris Center for Mental Health and IDD Board of Trustees is responsible for ensuring a planned, system-wide approach to designing quality goals and measures; collecting, aggregating, analyzing data; and improving quality and safety. The Board of Trustees shall have the final authority and responsibility to allocate adequate resources for assessing and improving the organization's clinical performance. The Board shall receive, consider, and act upon recommendations emanating from the quality improvement activities described in this Plan. The Board has established a standing committee, Quality Committee of the Board of Trustees, to assess and promote patient safety and quality healthcare. The Committee provides oversight of all areas of clinical risk and clinical improvement to patients, employees, and medical staff.

Leadership

The Harris Center leadership is delegated the authority, via the Board of Trustees, and accountability for executing and managing the organization's quality improvement initiatives. Quality leadership provides the framework for planning, directing, coordinating, and delivering the improvement of healthcare services that are responsive to

both community and patient needs that improve healthcare outcomes. The Harris Center leaders encourage involvement and participation from staff at all levels within all entities in quality initiatives and provide the stimulus, vision, and resources necessary to execute quality initiatives.

The Executive Session of the Quality Committee of the Board is the forum for presenting closed record case reviews, urgent case reviews, pharmacy dashboard report including medication errors, and the Professional Review Committee report.

Professional Review Committee (PRC)

The Chief Medical Officer (CMO) is delegated the oversight, via the Board of Trustees, to evaluate the quality of medical care and is accountable to the Board of Trustees for the ongoing evaluation and improvement of the quality of patient care at The Harris Center and of the professional practice of licensed providers. The PRC will act as the authorizing committee for professional peer review and system quality committees (Exhibit A). The committee will also ensure that licensing boards of professional health care staff are properly notified of any reportable conduct or finding when indicated. The Professional Review Committee has oversight of the following peer protected processes and committees:

- Medical Peer Review
- Pharmacy Peer Review
- Nursing Peer Review
- Licensed Professional Review
- Closed Record Review
- Internal Review Board

System Quality, Safety and Experience Committee Membership:

- Chief Executive Officer (Ex-Officio)
- Chief Medical Officer
- Chief Operating Officer
- Chief Nursing Officer (Co-chair)
- Legal Counsel
- Divisional VPs (CPEP, MH, IDD)
- VP, Clinical Transformation and Quality (Chair)
- Director Risk Management/ERM
- Director of Pharmacy Programs
- Director of Quality Assurance and PI
- Director of Behavioral Health
- Director of Children and Adolescents
- Ad Hoc members as needed

System Quality, Safety and Experience Committee

The Quality Committee of the Board of Trustees has established a standing committee, The System Quality, Safety and Experience Committee to evaluate, prioritize, provide general oversight and alignment, and remove any significant barriers for implementation for quality, safety, and experience initiatives across Harris Center programs. The Committee is composed of Harris Center leadership, including operational and medical staff. The Committee will approve annual system-wide quality and safety goals and review progress. The patient safety dashboard and all serious patient safety events are reviewed. Root Cause Analysis, Apparent Cause Analysis, Failure Modes and Effects Analysis, quality education projects, are formal processes used by the Committee to evaluate the quality and safety of mental projects through The Harris Center's quality training program or other performance improvement training programs are privileged and confidential as part of the Quality, Safety & Experience Committee efforts. The Committee also seeks to ensure that all The Harris Center entities achieve standards set forth by the Commission on Accreditation and Rehabilitation Facilities (CARF) and Certified

Community Behavioral Health Clinic (CCBHC).

The System Quality, Safety and Experience Committee has oversight of the following committees, subcommittees and/or processes: (Appendix A)

- Pharmacy and Therapeutics Committee
- Infection Prevention
- System Accreditation
- All PI Councils and internal learning collaboratives (e.g., Zero Suicide, Substance Use Disorders)
- Approval of Care Pathways
- Patient Experience / Satisfaction Subcommittee

The criteria listed below provide a framework for the identification of improvements that affect health outcomes, patient safety, and quality of care, which move the organization to our mission of providing the finest possible patient care. The criteria drive strategic planning and the establishment of short and long-term goals for quality initiatives and are utilized to prioritize quality improvement and safety initiatives.

- High-risk, high-volume, or problem-prone practices, processes, or procedures
- Identified risk to patient safety and medical/healthcare errors
- Identified in The Harris Center Strategic Plan
- Identified as Evidenced Based or "Best Practice"
- Required by regulatory agency or contract requirements Methodologies
- The Model for Improvement (Appendix B) and other quality frameworks (e.g., Lean, Six Sigma) are used to guide quality improvement efforts and projects
- A Root Cause Analysis (RCA) is conducted in response to serious or sentinelevents
- Failure Mode and EffectsAnalysis (FMEA) is a proactive tool performed for analysis of a high risk process/procedure performed on an as needed basis (at least annually)
- Data Management Approach andAnalysis

Data is used to guide quality improvement initiatives throughout the organization to improve safety, treatment, and services for our patients. The initial phase of a project focuses on obtaining baseline data to develop the aim and scope of the project. Evidence-based measures are developed as a part of the quality improvement initiative when the evidence exists. Data is collected as frequently as necessary for various reasons, such as monitoring the process, tracking balancing measures, observing interventions, and evaluating the project. Data sources vary according to the aim of the quality improvement project, examples include the medical record, patient satisfaction surveys, patient safety data, financial data.

Benchmarking data supports the internal review and analysis to identify variation and improve performance. Reports are generated and reviewed with the quality improvement team. Ongoing review of organization wide performance measures are reported to committees described in the Quality, Safety and Experience governance structure.

Reporting

Quality, Safety and Experience metrics are routinely reported to the System Quality, Safety and Experience Committee. System Quality, Safety and Experience Committee is notified if an issue is identified. Roll up reporting to the Quality Board of Trustees on a quarterly basis and more frequently as indicated.

Evaluation and Review

At least annually, the Quality, Safety and Experience leadership shall evaluate the overall effectiveness of the Quality, Safety and Experience Plan and program. Components of the plan met, and this document is maintained to reflect an accurate description of the Quality, Safety and Experience program.

The Model for Improvement¹

Forming the Team:

Including the right people on a process improvement team is critical to a successful improvement effort. Teams vary in size and composition. Each organization builds teams to suit their own needs.

Setting Aims:

Improvement requires setting aims. The aim should be time-specific and measurable; it should also define the specific population of patients that will be affected.

Establishing Measures:

Teams use quantitative measures to determine if a specific change leads to an improvement.

Selecting Changes

All improvements require making changes, but not all changes result in improvement. Organizations therefore must identify the changes that are most likely to result in improvement.

Testing Changes

The Plan-do-Study-Act (PDSA) cycle is shorthand for testing a change in the real work setting – by planning it, trying it, observing the results, and acting on what is learned. This is the scientific method used for action-oriented learning.

Implementing Changes:

After testing a change on a small scale, learning from each test, and refining the change through several PDSA cycles, the team can implement the change on a broader scale — for example, for an entire pilot population or on an entire unit.

Spreading Changes:

After successful implementation of a change or package of changes for a pilot population or an entire unit, the team can spread the changes to other parts of the organization or in other organizations.

¹ Sources:

Langley GL, Nolan KM, Nolan TW, Norman CL, Provost LP. The Improvement Guide: A Practical Approach to Enhancing Organizational Performance.

The Plan-Do-Study-Act (PDSA) cycle was originally developed by Walter A. Shewhart as the Plan-Do-Check-Act (PDCA) cycle. W. Edwards Deming modified Shewhart's cycle to PDSA, replacing "Check" with "Study." [See Deming WE. The New Economics for Industry, Government, and Education. Cambridge, MA: The MIT Press; 2000.]

Root Cause Analysis (RCA):

The key to solving a problem is to first truly understand it. Often, our focus shifts too quickly from the problem to the solution, and we try to solve a problem before comprehending its root cause. What we think is the cause, however, is sometimes just another symptom. One way to identify the root cause of a problem is to ask "Why?" five times. When a problem presents itself, ask "Why did this happen?" Then, don't stop at the answer to this first question. Ask "Why?" again and again until you reach the root cause.

Failure Modes and Effects Analysis (FMEA):

FMEA is a tool for conducting a systematic, proactive analysis of a process in which harm may occur. In an FMEA, a team representing all areas of the process under review convenes to predict and record where, how, and to what extent the system might fail. Then, team members with appropriate expertise work together to devise improvements to prevent those failures — especially failures that are likely to occur or would cause severe harm to patients or staff. The FMEA tool prompts teams to review, evaluate, and record the following:

Steps in the process

Failure modes (What could go wrong?)

Failure causes (Why would the failure happen?)

Failure effects (What would be the consequences of each failure?)

Teams use FMEA to evaluate processes for possible failures and to prevent them by correcting the processes proactively rather than reacting to adverse events after failures have occurred. This emphasis on prevention may reduce the risk of harm to both patients and staff. FMEA is particularly useful in evaluating a new process prior to implementation and in assessing the impact of a proposed change to an existing process.

EXHIBIT F-6

*The HARRIS CENTER for
Mental Health and IDD*
Board of Trustees Meetings
DRAFT
2026

<u>JANUARY</u> <i>Committee</i> 20 – Audit 20 – Resource 20 – Program 20 – Quality <i>Board of Trustees</i> 27 – Board	<u>FEBRUARY</u> <i>Committee</i> 17 – Governance 17 – Resource 17 – Program 17 – Quality <i>Board of Trustees</i> 24 – Board	<u>MARCH</u> <i>Committee</i> 17 – Governance 17 – Resource 17 – Program 17 – Quality <i>Board of Trustees</i> 24 – Board	<u>APRIL</u> <i>Committee</i> 21 – Audit 21 – Resource 21 – Program 21 – Quality <i>Board of Trustees</i> 28 – Board	<u>MAY</u> <i>Committee</i> 19 – Governance 19 – Resource 19 – Program 19 – Quality <i>Board of Trustees</i> 26 – Board	<u>JUNE</u> <i>Committee</i> 16 – Governance 16 – Resource 16 – Program 16 – Quality <i>Board of Trustees</i> 23 – Board
<u>JULY</u> <i>Committee</i> 21 – Audit 21 – Resource 21 – Program 21 – Quality <i>Board of Trustees</i> 28 – Board 28 – Budget	<u>AUGUST</u> <i>Committee</i> 18 – Governance 18 – Resource 18 – Program 18 – Quality <i>Board of Trustees</i> 25 – Board	<u>SEPTEMBER</u> <i>Committee</i> 15 – Governance 15 – Resource 15 – Program 15 – Quality <i>Board of Trustees</i> 22 – Board	<u>OCTOBER</u> <i>Committee</i> 20 – Audit 20 – Resource 20 – Program 20 – Quality <i>Board of Trustees</i> 27 – Board 27 – Annual Board Training	<u>NOVEMBER</u> <i>Committee**</i> 10 – Governance 10 – Resource 10 – Program 10 – Quality <i>Board of Trustees</i> 17 – Board Meeting**	<u>DECEMBER</u> <i>Board of Trustees</i> 15 – Full Board ** (as needed)

- The Audit Committee Meetings are normally held at 8:30 a.m. (January, April, July, and October)
- The Governance Committee Meetings are twice a quarter alternating with the Audit Committee at 8:30 am.
- The Resource Committee Meetings are normally held at 9:00 a.m.
- The Program Committee Meetings are normally held at 10:00 a.m.
- The Quality Committee Meetings are normally held at 11:00 a.m. on the 3rd Tuesday
- Full Board Meetings are normally held on the 4th Tuesday of each month at 8:30 a.m.
- **The November Committees and Board and the December Board Meeting are usually moved up early due to the Holidays.
Meetings held in the Board Room (#109) at 9401 Southwest Freeway

EXHIBIT F-7



The HARRIS CENTER for Mental Health and IDD

BOARD RESOLUTION

**Harris Center Board of Trustees Signature Authorization and
Delegation Authority for Certain Items**

WHEREAS, The Harris Center Board of Trustees (the "Board") has determined that in order for the business operations of the Harris Center to function in a proper and efficient manner, it is necessary and prudent for this Board to delegate certain powers and control over the Harris Center's affairs to designated officers at The Harris Center.

RESOLVED, for purposes of this resolution, the Chief Executive Officer and the Chief Financial Officer shall each be considered an "Authorized Officer," individually, and collectively, the "Authorized Officers".

RESOLVED, that the following actions authorizing payment or transfer in the name and on behalf of the Harris Center, without Board signature approval, for certain items was approved by the Board of Trustees on this date:

1. The Board resolves that the Authorized Officers, collectively, are empowered, authorized and directed to authorize payment in the name and on behalf of the Harris Center, without Board signature approval, the below liabilities for employee benefits with stated monthly not-to-exceed amounts. Approval and authorization by each Authorized Officer is required to initiate and complete the payment or transfer of liabilities for employee benefits. Each Authorized Officer must affix his or her own signature (physical or electronic, as permitted) to any foregoing payment or transfer to conclusively establish authority and approval to carry out this resolution;

Vendor	Description	Monthly Not-to-Exceed
Lincoln Financial Group	Retirement Funds (401a, 403b, 457)	\$3,650,000
Blue Cross Blue Shield of TX - through December 31, 2025	Health and Dental Insurance	\$3,300,000
Cigna – January 1, 2026 – December 31, 2026	Health and Dental Insurance	\$3,300,000
UNUM	Life Insurance	\$310,000



Transforming Lives

- II. The Chief Financial Officer shall prepare a monthly report of all financial transactions related to the payment of the liabilities for employee benefits and submit the report to the Harris Center Board of Trustees Resource Committee. The Chief Financial Officer shall ensure all supporting documentation sufficient to demonstrate the business purpose of the transaction(s), its occurrence and the accuracy of the amount are retained and available upon request by the Harris Center Board of Trustees.

ALL OF THE FOREGOING SHALL BE EFFECTIVE

October 28, 2025

Robin E. Gearing, PH.D., Chair
The Harris Center for Mental Health and IDD
Board of Trustees

Gerald Womack, Secretary
The Harris Center for Mental Health and IDD
Board of Trustees

STATE OF TEXAS
COUNTY OF HARRIS

Subscribed and sworn to before me this _____ day of
_____, 2025.

Notary Public in and for the State of Texas

My Commission Expires: _____

Notary ID: _____