

Program Committee Meeting
March 17, 2026
10:00 am

- I. DECLARATION OF QUORUM**
- II. PUBLIC COMMENTS**
- III. APPROVAL OF MINUTES**
 - A. Minutes of the Board of Trustees Program Committee Held on Tuesday, February 17, 2026
(EXHIBIT P-1)
- IV. CONSIDER AND TAKE ACTION**
 - A. Approve IDD-PAC Minutes from November 4, 2025
(EXHIBIT P-2)
- V. REVIEW AND COMMENT**
 - A. IDD Services Division Update
(EXHIBIT P-3 Evanthe Collins)
 - B. Medical Services Update
(EXHIBIT P-4 Luming Li/Maheshkumar Patel)
- VI. 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 any time during the course of this meeting to seek legal advice from its attorney about any matters listed on the agenda.**
- VII. RECONVENE INTO OPEN SESSION**
- VIII. CONSIDER AND TAKE ACTION AS A RESULT OF THE EXECUTIVE SESSION**
- IX. ADJOURN**

Veronica Franco

**Veronica Franco, Board Liaison
Max A. Miller, Jr, MTh, D.D. Chairman
Program Committee
The Harris Center for Mental Health and IDD
Board of Trustees**

EXHIBIT P-1

BOARD OF TRUSTEES
The HARRIS CENTER for
Mental Health and IDD
PROGRAM COMMITTEE MEETING
TUESDAY, FEBRUARY 17, 2026
MINUTES

Dr. M. Miller, Jr., Board Chair, called the meeting to order at 10:03 a.m. in Room 109 of the 9401 Southwest Freeway location, noting a quorum of the Committee was present.

RECORD OF ATTENDANCE

Committee Members in Attendance: Dr. M. Miller Jr., Dr. K. Bacon, Dr. R. Gearing,

Committee Member in Absence: Dr. Q. Moore, R. Thomas

Other Board Members in Attendance: Dr. J. Lankford

1. CALL TO ORDER

The meeting was called to order at 10:03 a.m.

2. DESIGNATION OF BOARD MEMBERS AS VOTING COMMITTEE MEMBERS

Dr. Miller, Jr. designated Dr. Lankford as a voting member.

3. DECLARATION OF QUORUM

Dr. Gearing declared a quorum of the committee was present.

4. PUBLIC COMMENTS

There were no Public Comments.

5. Approve the Minutes of the Board of Trustees Program Committee Meeting Held on Tuesday, January 20, 2026.

MOTION BY: GEARING SECOND BY: LANKFORD

With unanimous affirmative votes

BE IT RESOLVED that the Minutes of the Board of Trustees Program Committee meeting held on Tuesday, January 20, 2026 under Exhibit P-1, are approved and recommended to the Full Board for acceptance.

6. REVIEW AND COMMENT

A. Forensic MH Division FY25 Annual Review Presentation-Mona Jiles and Sean McElroy presented the Forensic MH Division FY25 Annual Review Presentation to the Program Committee.

7. EXECUTIVE SESSION

No Executive Session was needed.

8. RECONVENE INTO OPEN SESSION

9. ADJOURN

There being no further business, the meeting adjourned at 10:59 am.

MOTION BY: BACON SECOND BY: LANKFORD

**Veronica Franco, Board Liaison
Max A. Miller, Jr. Mth, D.D., Chairman
Program Committee
THE HARRIS CENTER *for* Mental Health *and* IDD
Board of Trustees**

EXHIBIT P-2

THE HARRIS CENTER
INTELLECTUAL AND DEVELOPMENTAL DISABILITIES
PLANNING ADVISORY COUNCIL

**Prepared by: The Office of the Vice President for Intellectual and
Developmental Disabilities Services**

November 4, 2025

MEMBERS IN ATTENDANCE: Judy Blake (Advocate); Dory Cayten (Advocate); Charles Davis (Harris County Psychiatric Center); Tasheara Jennings Gobert (Texas Workforce Solutions – Vocational Rehabilitation Services); Naila Ibrahim (Dar-us-Sakina); Kennitha Jenkins (Consumer Advocate); Elworth Lusk (Consumer Advocate); Cassandra Malveaux (Harris Co. Protective Services); Dr. Olivia McGill (Harris County Juvenile Probation Department); Dr. Deborah Pearson (McGovern Medical School, UT Health Science Center – Houston, Dept. Psychiatry); Kayla Rosenthal for Damien Harris (The Center for Pursuit); Dr. Bill Schnapp (Community Member); Shelley Townsend (University of Houston); Mary Jane Williams (Advocate); Albert Williamson (Spring Independent School District)

MEMBERS ABSENT: Mercedes Alejandro (Advocate); Cynthia Fannin (Richmond State Supported Living Center); Ellen Goudeau (Advocate); Angel Ponce (Mayor's Office for People w/ Disabilities); Michael Roberts (Down Syndrome Association of Houston); Gene Rowe (Advocate); Jennifer Singletary (Region 4 Education Service Center); Janniece Sleigh (The Arc of Harris County); **VACANT** (Community Care Services Eligibility – HHSC)

OTHERS ATTENDANCE:

The Harris Center Staff: Maddison Adimora; Dr. Katherine Bacon; Dr. Evanthe Collins; Annie Cuba; Hillary Dang; Randi Garza; Ericka Degracia; Cindy Hernandez; Francisco Hernandez; Cassandra Johnson; Kenyonika Johnson; Amanda Jones; Consuelo Martinez; Alejandra McKinney; Dana Sobers-Ben; Katrina Ware; Amanda Willis

PUBLIC ATTENDEES: LaVette Allen; Antionnette Bowens-Whitaker (UTHealth); Sharon Cheng (Light & Salt Association); Dr. Ellen Fremion (Baylor College of Medicine); Jeff Furrh (Waller Independent School District); Grace Kong; Jeesoo Lee; Roger Liao; Eric Prim (Texas Workforce Solutions); Maria Thompson (Spring Independent School District)

I. **Call to Order**
The virtual meeting of The Harris Center Planning Advisory Council (IDD-PAC) was called to order at 10:01 AM by Mary Jane Williams, Co-Chair. A quorum was present.

II. **Approval of Minutes**
The minutes from the October 7th meeting were presented to the Council for approval.

MOTION BY: Dory Cayten

SECOND BY: Albert Williamson

The minutes from October 7, 2025 were approved as submitted.

III. **Call for Public Comment**
There was no public comment at this time.

IV. **Council Training**
Presenter: Dr. Ellen Fremion, Associate Professor Internal Medicine and Pediatrics – Baylor College of Medicine

Baylor IDD Clinic Overview

Dr. Ellen Fremion, Chief of Adult Transition Medicine, provided an overview of Baylor's Intellectual and Developmental Disabilities (IDD) Clinic, including its history, service model, and patient transition process. Dr. Freeman shared that the clinic serves individuals aged 19 and older and operates at both Baylor College of Medicine and the Center for Pursuit. She emphasized the importance of strong coordination between pediatric and adult providers to ensure continuity of care for individuals transitioning into adult services.

Dr. Fremion reviewed the clinic's accepted insurance plans, screening for social determinants of health, and the range of resources available to patients with IDD, including behavioral health supports and services for aging adults with IDD. Council members Judy Blake and Dory Cayten asked questions related to insurance coverage, social determinants screening, and dementia care, which Dr. Fremion addressed.

IDD Care Services and Collaboration Discussion

The Council discussed the scope of services provided by Dr. Fremion's clinic, which specializes in primary care for individuals with IDD, including patients transitioning from the Complex Care Clinic at Texas Children's Hospital. Dr. Fremion explained that while the clinic focuses on IDD primary care, they collaborate closely with the Baylor Medical

MINUTES FROM INTELLECTUAL AND DEVELOPMENTAL DISABILITIES PLANNING ADVISORY COUNCIL

November 4, 2025

PAGE 2

System to ensure patients have access to specialty services. She highlighted a weekly partnership with gynecologist Dr. Harris, who provides on-site services one day per week.

Ms. Blake emphasized the importance of this collaboration, noting the challenges families often face in securing specialty care for adults with IDD. She shared an example involving a family who experienced difficulty locating appropriate gynecological services. Council members also discussed ongoing challenges related to care coordination across regions and identified the need for expanded services, including vocational supports, to better meet the needs of individuals with IDD.

Access Challenges: Provider Shortages and Wait Times

LaVette Allen raised concerns regarding the limited availability of gynecologists and extended wait times for medical appointments. Dr. Freeman acknowledged these challenges as resource-related and shared that the clinic is exploring potential solutions, including expanded training opportunities for physician assistants.

Ms. Allen also asked how community members could help increase awareness and support for these services based on her daughter's recent experience. Dr. Freeman encouraged advocacy efforts, including contacting state representatives to support increased funding for adult IDD care and strengthening partnerships such as the collaboration with Texas Children's Hospital. She noted that while funding exists for pediatric integrated care models, similar investment is needed to expand adult services.

V. Call for Subcommittee Reports

A. Adult and Juvenile Justice Subcommittee

Judy Blake mentioned ongoing efforts to finalize a committee for a 2026 conference.

B. Public Outreach/Social Engagement (Candy Cane Ball) Subcommittee

The Candy Cane Ball is scheduled for December 7th from 3pm – 6pm at the Bayou City Event Center. The event is open to the public and includes dinner, dessert, and gifts.

Dory Cayten highlighted the need for volunteers. Eight hundred people are expected to attend. There is a \$10 fee.

Old Business

A. Legislative Updates – Amanda Jones, J.D., Director of Government and Public Affairs

Amanda Jones provided an update about the Health and Human Services Commission accepting comments on legislative appropriation requests by November 24th. Everyone was reminded to vote in the upcoming election.

Mary Jane Williams shared an update from the Attendant Care Coalition, noting concerns regarding inconsistencies in attendant pay rates following the increase of the base rate to \$13 per hour. She explained that not all agencies are implementing the increased rate and that the coalition is conducting a survey to gather data on actual wages being paid, including instances where attendants are earning less than the established rate. Ms. Williams stated that she would share the survey link with Council members through Cindy and encouraged anyone experiencing issues related to attendant care wage increases to participate so their feedback can be included.

B. Subcommittee Survey Results:

During the meeting in October, Mary Jane Williams proposed the formation of four committees for Council member participation, focused on public awareness, educational and transition to adulthood, dual diagnosis, and the juvenile and adult justice systems. Ms. Williams reviewed the results of the committee preference survey, noted the low response rate and encouraged members to complete the survey to indicate their committee interests.

C. Meeting Dates and Locations:

Sept 9 Harris Center	Oct 7 Zoom	Nov. 4 Zoom
Dec 9 Harris Center	Jan 6 Cancelled	Feb 3 TEAMS
March 3 Harris Center	April 7 TEAMS	May 5 TEAMS
June 2 TEAMS	July Cancelled	August 4 TEAMS

VI. New Business

Mary Jane Williams discussed the approval of new family and organizational member applications, with Kennitha Jenkins and Albert making the necessary motions

- Organizational Member Applicant: Waller Independent School District represented by Jeff Furrh

MINUTES FROM INTELLECTUAL AND DEVELOPMENTAL DISABILITIES PLANNING ADVISORY COUNCIL

November 4, 2025

PAGE 3

- Organizational Member Applicant: Light & Salt Association represented by Sharon Cheng
- Family Advocate Member Applicant: LaVelle Allen
- Family Advocate Member Applicant: Jenny Cheng

MOTION BY: Kennitha Jenkins**SECOND BY: Albert Williamson**

The family and organizational member applications will be submitted to The Harris Center Board of Trustees for review and approval.

Mary Jane Williams announced that the IDD-PAC will transition to using Microsoft TEAMS in the new year. Cindy Hernandez will send the invite with the Microsoft TEAMS link.

VII. Call for Consideration of Communication, Advice and Recommendations from Public and Private Agencies and Organizations

No consideration of communication, advice, or recommendations were presented from the public or private agencies at this time.

VIII. Consideration of Board Requests for Advice Concerning Service Needs and/or Implementation Priorities – Dr. Katherine Bacon

Dr. Katherine Bacon reported that she did not have any new updates for the Council at this time. However, she stated that she would follow up on the organizational application submitted by Avondale House (represented by Keving Kern).

Dr. Bacon also stated that due to schedule conflicts, she will not be able to attend the Blueprint nor the Candy Cane Ball.

IX. Vice President's Report – Dr. Evanthe Collins, Vice President, IDD Service Division/Grants & State Contracts

Amanda Willis, Director of IDD Clinical Services, provided several clinical updates. She reported that during FY25, the Crisis Program completed 454 crisis assessments, averaging approximately 38 assessments per month. She also shared TELUTS data, noting that 41 exact IDD matches were identified in Harris County during the last fiscal year, averaging about 10 per quarter, with required follow-up conducted in collaboration with the Mental Health Forensics Division and Service Coordination.

Ms. Willis announced the 4th Annual Blueprint Entrepreneurial Market for neurodiverse individuals, scheduled for December 3 from 10:00 a.m. to 2:00 p.m. at The Harris Center's main location, featuring more than 30 vendors, including returning and first-time participants. She encouraged Council members to attend and help spread awareness.

She also recognized the Coffee House Program for receiving the first annual Susan J. Fortis Impact Award through The Harris Center Foundation, which includes a \$5,000 grant to support client-related supplies for the Blueprint Market and Coffee House Academy. Additionally, the program was nominated for an Innovation Award during Healthcare Quality Week 2025.

Ms. Willis acknowledged members of the STARS team for their support of an individual involved in the criminal justice system and shared that, through a foundation grant, the program is beginning to utilize virtual reality technology to support skills development. She concluded by noting that since July 2025, a licensed behavior analyst has been embedded at the Harris County Psychiatric Center and Dunn Behavioral Sciences Center to provide behavioral assessments, consultations, and staff training.

Following the clinical update, Mary Jane Williams asked whether the number of crisis assessments had increased compared to the prior year and whether there were any observable trends. She noted potential impacts related to extended waiver waitlists, lack of community supports, and individuals transitioning out of the school system without services, and expressed interest in understanding whether these factors may be contributing to increased crisis activity.

Amanda Willis responded that she would need to review the data to determine year-over-year trends and offered to follow up with additional information.

Dr. Collins then shared two additional division updates. She recognized David Ambers, a direct service professional with over 30 years of service in the ICF and Day Habilitation programs, who was recently honored as Direct Service Professional of the Year by AAIDD. Dr. Collins noted that Mr. Ambers was acknowledged at the most recent Board meeting and that photos would be shared with the group.

Dr. Collins also acknowledged Kenyonika Johnson, Director of Early Childhood Intervention (ECI) Services, for receiving formal recognition from HHSC on her one-year anniversary. She shared that HHSC commended Ms. Johnson for her leadership, commitment, and significant improvements to the ECI program, noting that such recognition from a state agency is rare and reflects the substantial progress made since the program's transition back to the IDD Division.

EXHIBIT P-3



#IDDTEAMELITE



Dr. Evanthe Collins, Vice President IDD Services



ABOUT US



BUDGET/STAFF

\$43.9 mil annual budget

- 5% Local
- 14% ARPA/Federal Grants
- 38% HHSC
- 43% 3rd Party Billing

502 FTEs

ELIGIBILITY

ECI Eligibility

Birth - 36 months
Medical diagnosis, deaf/hard of hearing, blind/visually impaired, or developmental delay

Traditional IDD Services Eligibility

Birth - End of Life
Intellectual Disability (previously mental retardation), Autism

SERVICES

ECI Services

Occupational Therapy, Speech Therapy, Physical Therapy, Dietician Services, Case Management

Traditional Divisional Services

Eligibility Determination, Service Coordination, Behavioral Supports, Crisis Intervention, Crisis Respite, Outpatient Psychosocial Services, Autism Socialization Programs, Intermediate Care Facilities (residential), In-Home and Out-of-Home Respite, Day Habilitation, Employment Assistance, Applied Behavior Analysis, Medicaid Waiver Enrollment/Monitoring, Nursing Facility Transition, Community 1st Choice



ABA-SKIP Participant



THE 4th ANNUAL BLUEPRINT

A HOLIDAY MARKET FEATURING ARTISTS WITH AUTISM & IDD

Shop. Celebrate. Support.

Join The Harris Center for a festive holiday market spotlighting the creative talents of neurodivergent artists.

- Unique handmade gifts and artwork
- Perfect for holiday shopping
- Food trucks



Over 350 attendees
 30+ vendors
 More than \$6,000 in earnings



IDD RESOURCE & DISASTER PREPAREDNESS EVENT

SATURDAY, AUGUST 16TH | 10AM-2PM

THE HARRIS CENTER - ROOM 104
9401 SOUTHWEST FWY
HOUSTON TX 77074

250 backpacks
 100 ECI backpacks
 2026 IDD calendar



HHSC PERFORMANCE TARGET



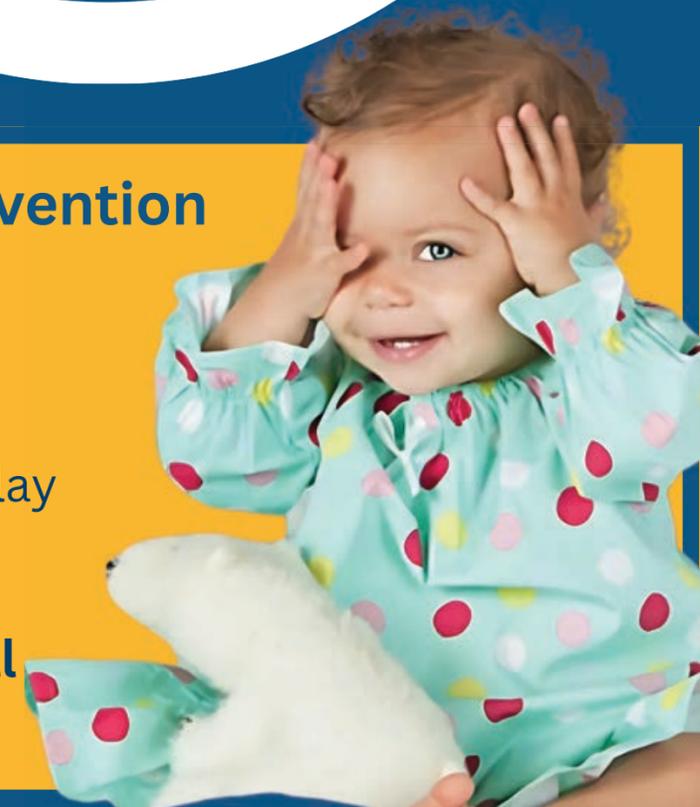
WHAT'S HAPPENED SINCE OCTOBER 2025



Early Childhood Intervention (ECI) Expansion

Medical Diagnosis
 Deaf/Blind/Impaired
 25% Developmental Delay
 33% Language Only

Additional 9 medical conditions added



LAUNCHING! TO ADULTHOOD PROGRAM



- Young adults (18-25 years old) with autism spectrum disorder (ASD) without an intellectual disability
- 12-week evidence-based therapy program (cognitive behavioral therapy, acceptance and commitment therapy, and motivational interviewing)
- 3-month internship, March 1st – May 31st, 2026
- Minimum commitment of 10 hours per week. Compensation paid by UTHHealth via Next Autism grant
- Marketing, data base creation, data analysis, file digitization, program intake/organization/distribution, community outreach, etc.



IDD
16 Interns

CPEP
1 Intern

PI
1 Intern

WHAT'S NEXT

Dual-Diagnosis Care

Baylor College of Medicine
Dr. Shelly Rote
.20 FTE contract
STARS IDD Clinic

Medicaid Interest List

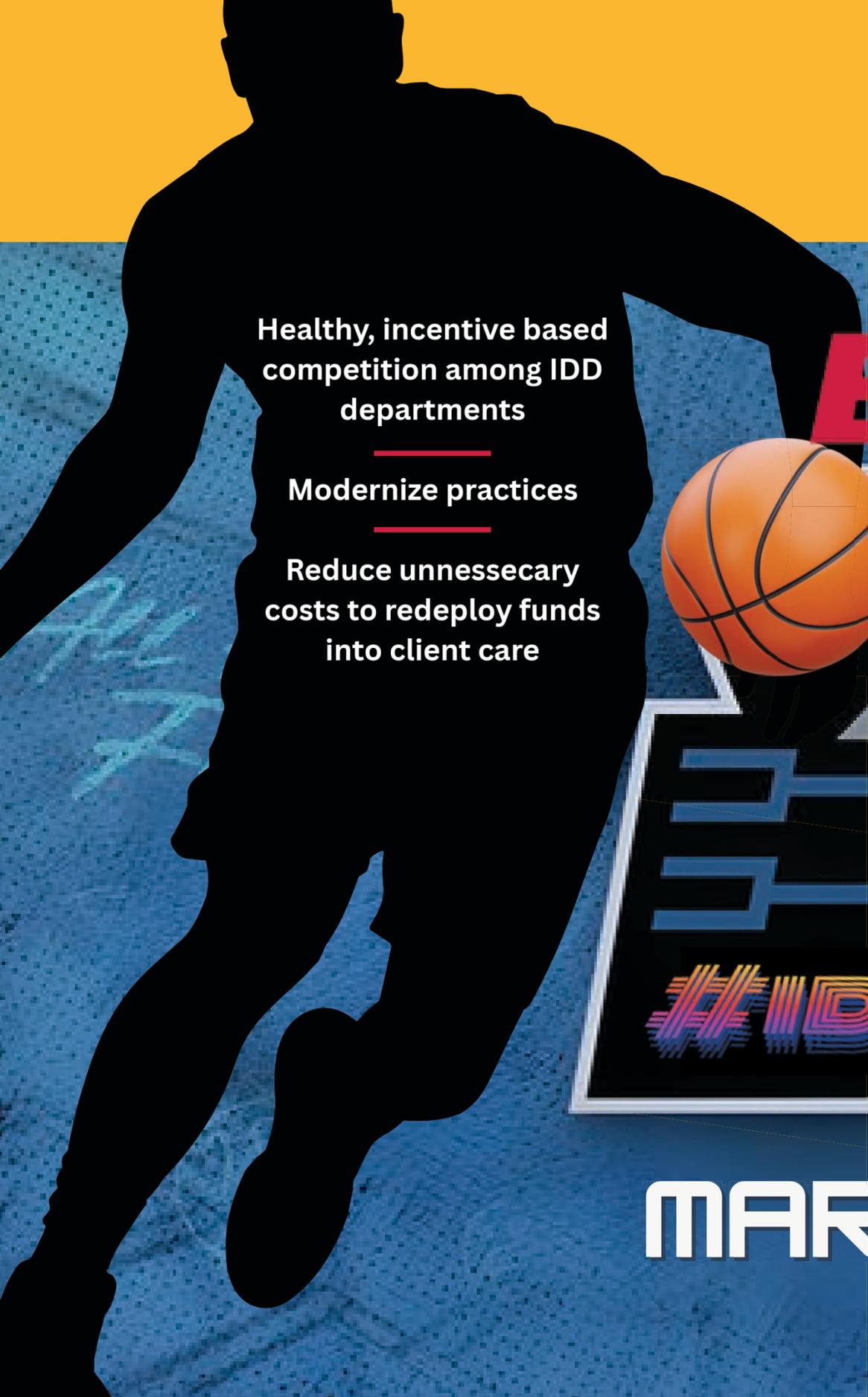
Feb. - Aug. 2026

HCS 105 (20 Harris)
17-18 year wait

TXHML 5,600 (1,229 Harris)
15-16 year wait



WHAT'S NEXT



Healthy, incentive based competition among IDD departments

Modernize practices

Reduce unnessecary costs to redeploy funds into client care



Epic MyChart

MARCH MADNESS

#IDDTEAMELITE

MARCH 2ND - 31ST



Cuba

Willis

Johnson

Dr. H

???

WINNER

???

All the Teams

WHAT'S NEXT



ECI RISE



Inspire



ABA-SKIP

RISE (RESPONSIVE INTERVENTION SERVICES & ENGAGEMENT) - \$3.8MIL

- IDD Resource Specialists resource referral, Medicaid waiver interest lists;
- ECI RISE - access to therapies to address developmental delays (OT, PT, Speech, etc.) and Certified Family Partners (Peer Support);
- ABA-SKIP - applied behavior analysis by BCBAs to increase socialization and communication skills.

INSPIRE - \$4.2MIL

Financial grants to low-income residents to purchase assistive technology, learning materials, services, and respite care.

Closeout Inspire June

Closeout RISE July

Staff Transition

Open House

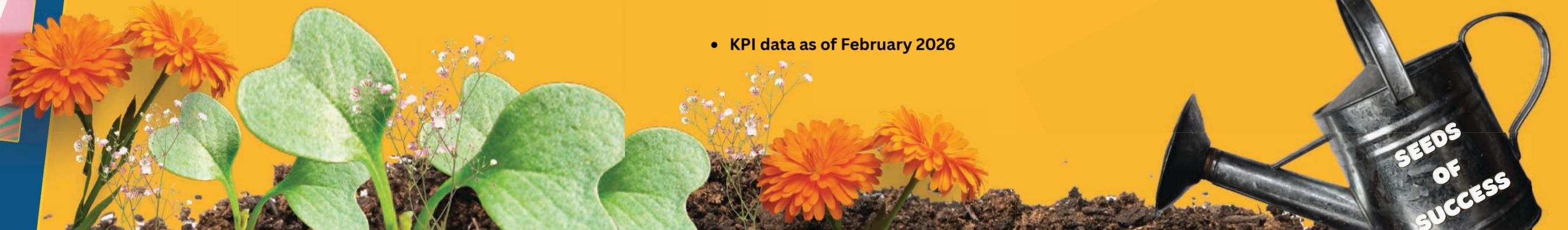
RISE KPIs

	Target	Achieved
Disability call center encounters *cumulative	19,400	31,884
ABA-SKIP (autism) children served *cumulative	85	92
ECI children served *cumulative	131	254

Inspire KPIs

	Target	Achieved
Unduplicated families served *cumulative	325	466
Consumer engagement/outreach *cumulative	320	24,022
Amount of consumer services purchased *cumulative	\$2,054,160	\$2,292,345

• KPI data as of February 2026



COLLABORATIONS

UT HEALTH & IDD FEEDING CLINIC

- Rotate pediatricians, psychologists, neurologist, OT/SLP, and dieticians to better understand avoidant/restrictive food intake disorders and therapeutic interventions.
- Explore clinical expansion via grant opportunities.

MAYOR'S OFFICE FOR PERSONS WITH DISABILITIES

- Annual ADA celebration aligning with Disability Pride Month on July 25th at Metropolitan Multi-Service Center
- This year's event will focus on IDD/ mental health

IDD PLANNING ADVISORY COUNCIL

- Annual summer justice conference
- Focus on advocacy/preparations for 90th session

SUNSET COMMISSION IDD DISCUSSION

ECI RISE



#DEFLECTION

IDD Plaza

What

- Deflection
- Crisis Respite
- Diversion
- Psychiatric
- Med Mgmt
- Nursing
- Psychosocial

1st Floor

- Secured Intake
- Recreation
- Day Treatment Rooms
- Observation
- De-escalations Rooms
- Geo Tracking

2nd Floor

- Gender-Specific Floors
- ADA Compliant Rooms
- Calming Rooms
- Single/Double Occupancy
- Intensive Needs Room



680

680

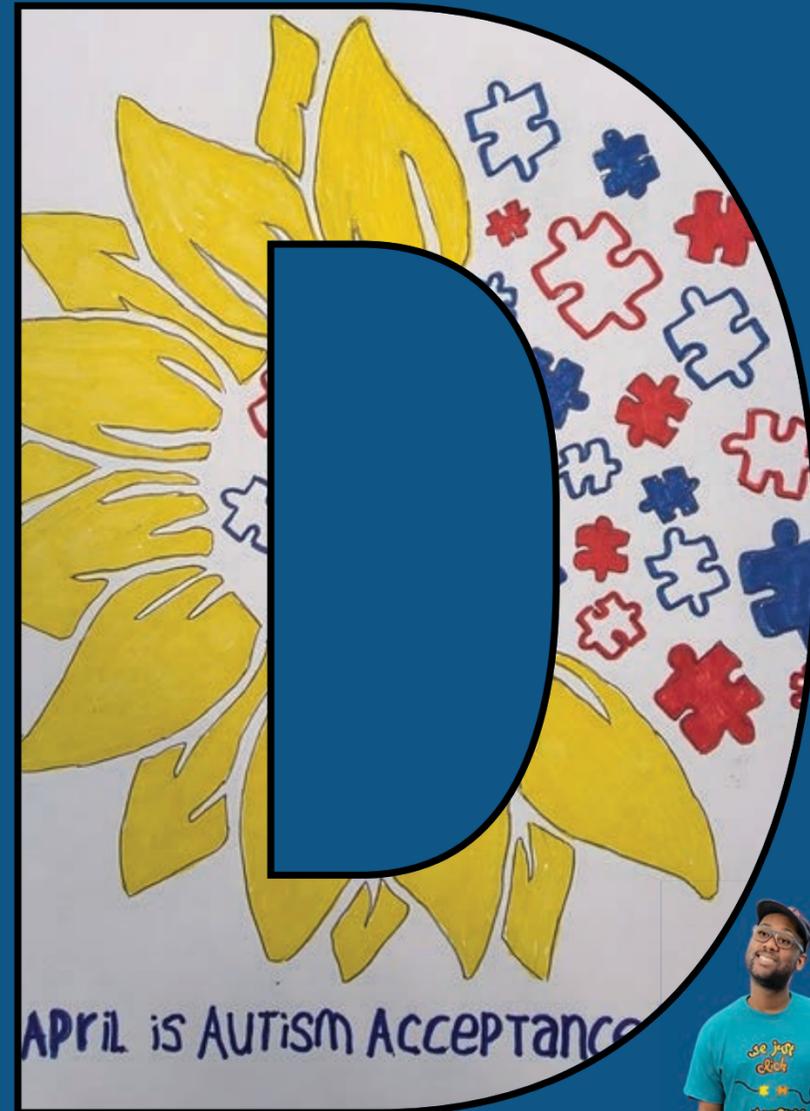
HONORABLE

MENTIONS

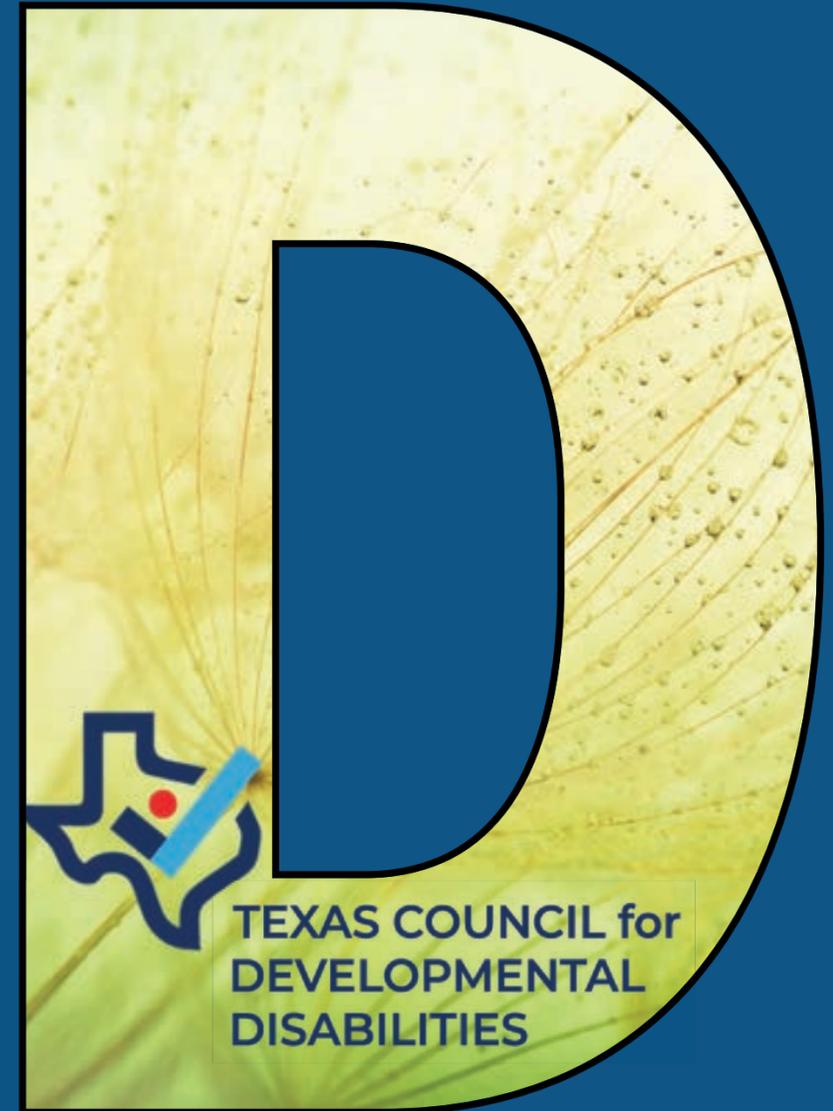


P4: National Caregiving Month Resolution honoring the endless dedication of our IDD families - November 2025

P1: January 2026 recognition of IDD RISE program for bridging the gap in unmet disability needs in the Second, Third, and Fifth Wards, Sunnyside, and Sharpstown.



Back by popular demand, our Coffeehouse participants have a new design for the 2026 autism acceptance t-shirts.



Texas Council for Developmental Disabilities Public Policy Committee presentation highlighting THC's work on behalf of persons with IDD.



ICF Group Home Residents at Houston Livestock & Rodeo Parade
February 28, 2026

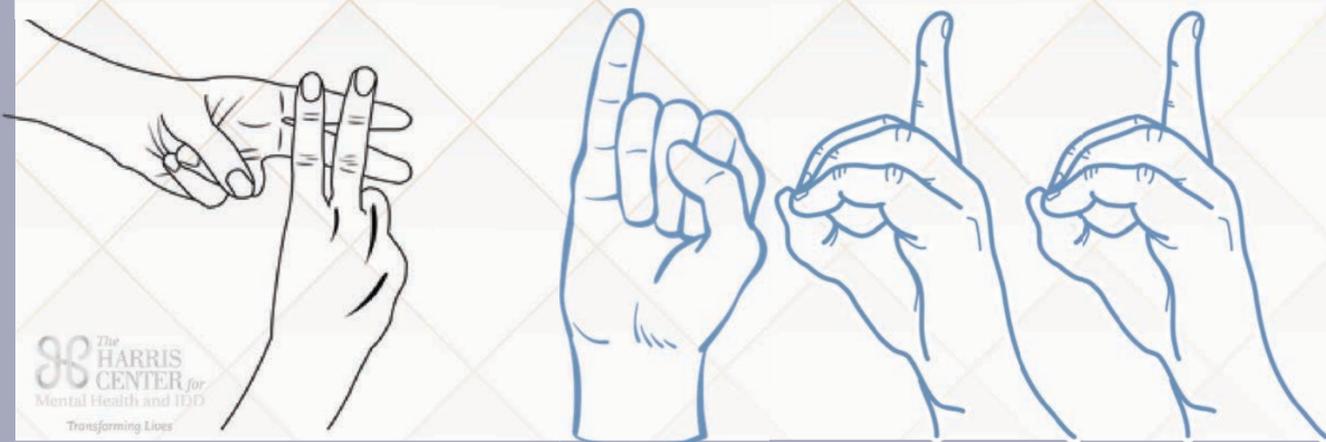
AWARENESS

ACCEPTANCE

INCLUSION



#iddteamELITE



ICF Group Home Residents at Paasadena Friday Night Dance



IN YOUR OWN TIME

Understanding the impact of what we do from those we serve

Family Feedback, Inspire

“On behalf of our family, I want to express our deepest gratitude for the incredible support and service we received through the Inspire Grant. Every participant we worked with was not only helpful but truly went above and beyond to ensure we understood the program and all necessary documentation.

Your team's dedication was evident in the multiple follow-ups, even when we missed calls, ensuring that nothing was left unresolved. Antonio went out of his way to accommodate our schedule and secure a convenient appointment time, extremely informative and proactive in making sure everything was a smooth and positive experience. Everyone was so nice and warm and offered to help take items to our cars. We are beyond grateful for the time, effort, and care that your team has provided. This experience has been insightful, and we sincerely pray that the items we receive will support him in making meaningful progress toward a more inclusive environment.

Thank you again for everything you have done for our family. Your kindness and commitment will truly make a difference.” Anonymous Parent comment.

Family Feedback, ABA-SKIP

“I think that Fernando is more social and patient right now. This is helping him in transitions to back to school. All the staff are kind to the kids. They take the time to go out and walk with the kids. The clinic has an open space which is comfortable with the kids. The staff is making the place enjoyable for the kids. The staff is making the place enjoyable for the kids.” Parent of a 6 year old.

Family Feedback, Inspire

“I really love that everyone in the program is helpful. I applied and, in a week, I got already contacted and in two weeks I was approved. Georgia is non-verbal but she started communicating after receiving her specialized equipment. The staff had given me suggestions on equipment, and I wanted and I was able to get what I wished for Georgia. It is so hard to get this kind of support for children with autism, and this is just a blessing. The staff and the program made an impact into our lives!” Parent of 6 year old.

Family Feedback, ABA-SKIP

“Jayden is more patient. He learned more strategies to calm down and waiting for his turns and transitioning which he struggled in the past. Staff are friendly, and I like how they rotated with each of the kids making them feel comfortable with everybody. I like the clinic especially the mats and the station areas where the kids can calm down.” Parent of a 8 year old.

IN YOUR OWN TIME

Understanding the impact of what we do from those we serve

Family Feedback, ECI RISE

The Harris Center's ECI RISE program has been and continues to be valuable for my 15 month old twin girls, who were born three months early. Upon discharge from the NICU, my family was quickly introduced to a team of professionals to evaluate my our girls' developmental needs. Over the last year, this team has continuously shown up to help my twins by providing informational and educational resources, such as age-appropriate community events and children's books, and consistent occupational therapy services to treat their moderate gross and fine motor delays. The ECI RISE program has assisted us in understanding our daughters' motor abilities and given us the tools and confidence to help them meet their goals. My family and I are appreciative of these free services, especially after our twins' three-month NICU stay. Without having to worry about the cost of services, we can focus our attention on our girls' growth." Parent of 26-month-old twins.

Family Feedback, ECI RISE

My son, born three months prematurely, joined the RISE program in late August. He began by attending weekly physical therapy sessions and with the guidance of his therapist was able to quickly advance beyond the expectations of his adjusted age. He recently began to work with Veronica Ajose, an occupational therapist within the RISE program, once a week as well. In only a short period of time his fine motor skills are developing well. He is now beginning to use a pinch grip to pick up small pieces of food. We could not be happier with their expertise and the great deal of support they are providing him with." ~Parent of 10-month-old

Family Feedback, ECI RISE

My family became a little chaotic very quickly as we went from 1 to 3 kids in a matter of months. My Foster son, was developmentally delayed due to being born positive with amphetamines and was dropped within 24 hours of birth. His upper extremities were holding him back even further as he had delayed muscles development. The Rise program has offered PT and OT and he has formed a great bond with both therapists. We see him crawling already at 10 months which was a huge surprise. His therapy has given him the core strength and he needed to sit up and begin eating solids. We are so happy at the care every staff member has had not only for him, but our entire family. They remember details about all my kids to stay connected to us and help us connect to each other." ~ Parent of 25 month 25-month-old

Family Feedback, ECI RISE

The E.C.I. program here at The Harris Center has been a godsend. My 2yr old son wasn't speaking and mainly communicated through squeaks and hand gestures but since working with his Speech Therapist he has been talking more he can identify shapes, colors, letters and some numbers. It's been such an amazing experience to be a part of and we will be sad to age out of the program but we will be taking everything we've learned with us to continue expanding on my son's speech. Everyone has been so hands on here even going as far as making sure that I still have opportunities for my son even after aging out and I am forever grateful for everything. Parent of a 35-month-old.

A Parent's Journey

From the very first day Djuna started physical therapy (PT) at ECI RISE to now, only a few short months have passed, yet the progress we've seen in her has been nothing short of remarkable. For us as her family, it's not just about seeing her physical abilities improve, but also witnessing an emotional and personal journey filled with hope and joy.

In the beginning, Djuna was extremely shy and introverted. She felt overwhelmed in a new environment and was hesitant to try anything unfamiliar. Back then, her muscle control was still underdeveloped: she couldn't jump, needed help to climb stairs, and would often freeze halfway up because she was scared. As parents, we worried and wondered how long it would take for her to make progress.

But from the very first session, Ms. Kayla guided Djuna with incredible patience, professionalism, and warmth. She started with simple, playful activities, helping Djuna learn through fun and encouragement. Slowly, we began to see changes: the first time she held onto the railing and stepped up on her own, the first time she dared to leave the ground and jump, the first time she willingly held Ms. Kayla's hand to exercise together—each moment was a milestone for us.

Now, Djuna can confidently control her muscles. She can go up and down stairs on her own and even jump with joy, wearing a big smile on her face. The transformation from a quiet, timid girl with limited mobility to a confident child eager to participate and challenge herself has been incredible and heartwarming.

We are deeply grateful to Ms. Kayla for her dedication, patience, and encouragement. Without her thoughtful guidance and consistent support, Djuna could not have made such extraordinary progress in such a short time. This growth is not only physical but also emotional and social, and we believe it will lay a strong foundation for Djuna's future. ~Parent of 35-month-old.



Staff Voices

J.A - Speech/Language Pathologist

As the newest member of the ECI RISE team, I've felt excited and inspired by this program since the moment I first read the job posting. Traditional ECI is such a vital and impactful service, but its reach is sometimes limited by eligibility requirements. What makes the ECI RISE program so special is that it bridges that gap—supporting families who may not qualify for traditional ECI but still need guidance, support, and resources.

I'm truly grateful to be part of a program that empowers families to recognize that they are their child's best teacher. We work together to strengthen developmental skills and build confidence every step of the way. Even in my short time on the team, I've witnessed remarkable progress among the families we serve. It's incredibly rewarding to see parents gain peace of mind, knowing they're not alone and that we're working side by side toward the best possible outcomes for their child.

For example, one child was enrolled in the ECI RISE program in August due to concerns about language development. At that time, they were using about 20 words—mostly single words—and had just started to combine two words into short phrases. By September, this same child was using over 50 words and frequently forming 3-word phrases and sentences following just one session with the child development specialist and two sessions with me, the speech language pathologist. Seeing this kind of growth in such a short time reminds me why I'm so passionate about what we do every day.

C.E. - Certified Family Partner

I am so proud to work with this great team. We have shown not only our commitment, but our growth through changes to our workflow. I believe our work is important because every baby should have the opportunity to develop at their own pace, as well as get the help they need early on, no matter what % the delay is. Our program is a great relief to most parents that experience barriers of all kinds, and we can guide them through many of these barriers. We empower them and restore confidence that hard things are possible.



R.G. - Child Development Specialist

As a Child Development Specialist, I find immense fulfillment in supporting families through their early intervention journeys. Each family's story is unique, and witnessing the growth of both the child and the caregiver brings deep joy and purpose to my work. Early childhood intervention allows me to partner with families during one of the most critical stages of development, helping them nurture their child's skills, confidence, and connection in everyday routines.

EXHIBIT P-4

Medical Services: Outpatient & Medical Education

Presented by:

Dr. Luming Li, Chief Medical Officer

Dr. Maheshkumar Patel, VP MH and Medical Education

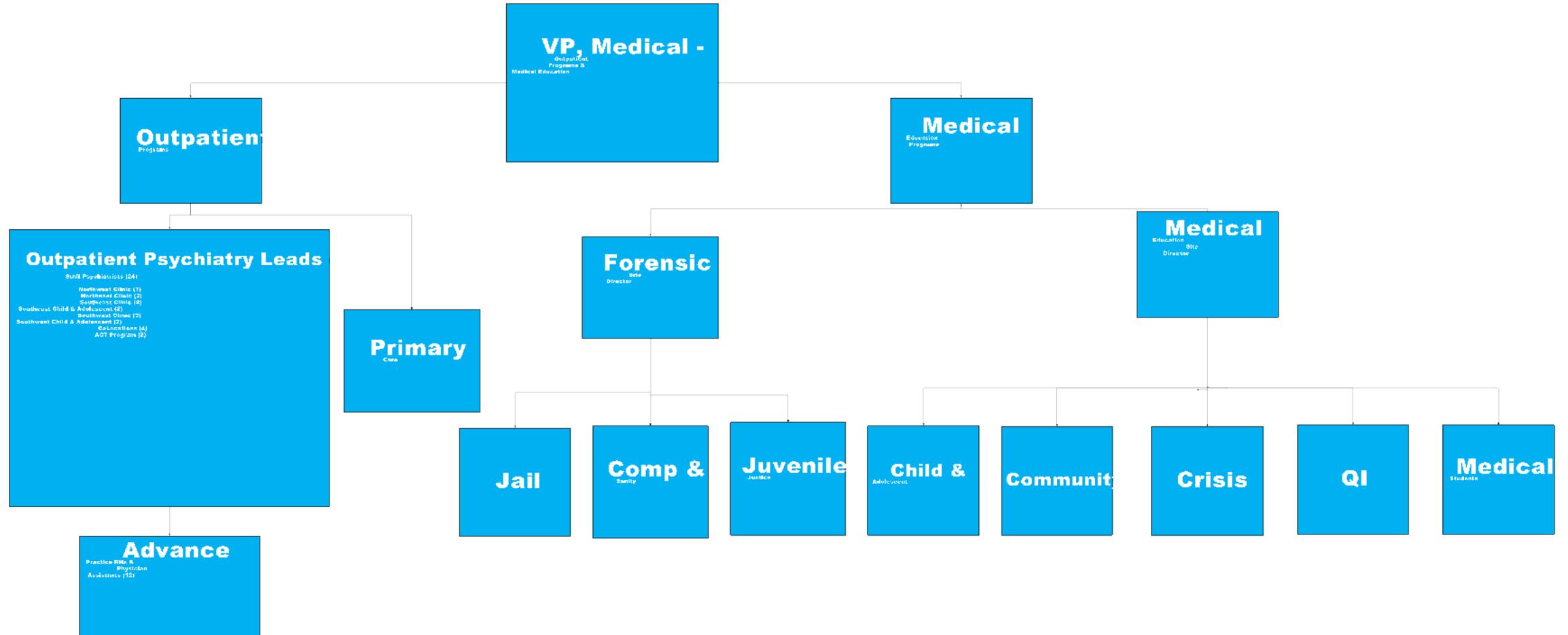
Date: March 17, 2026



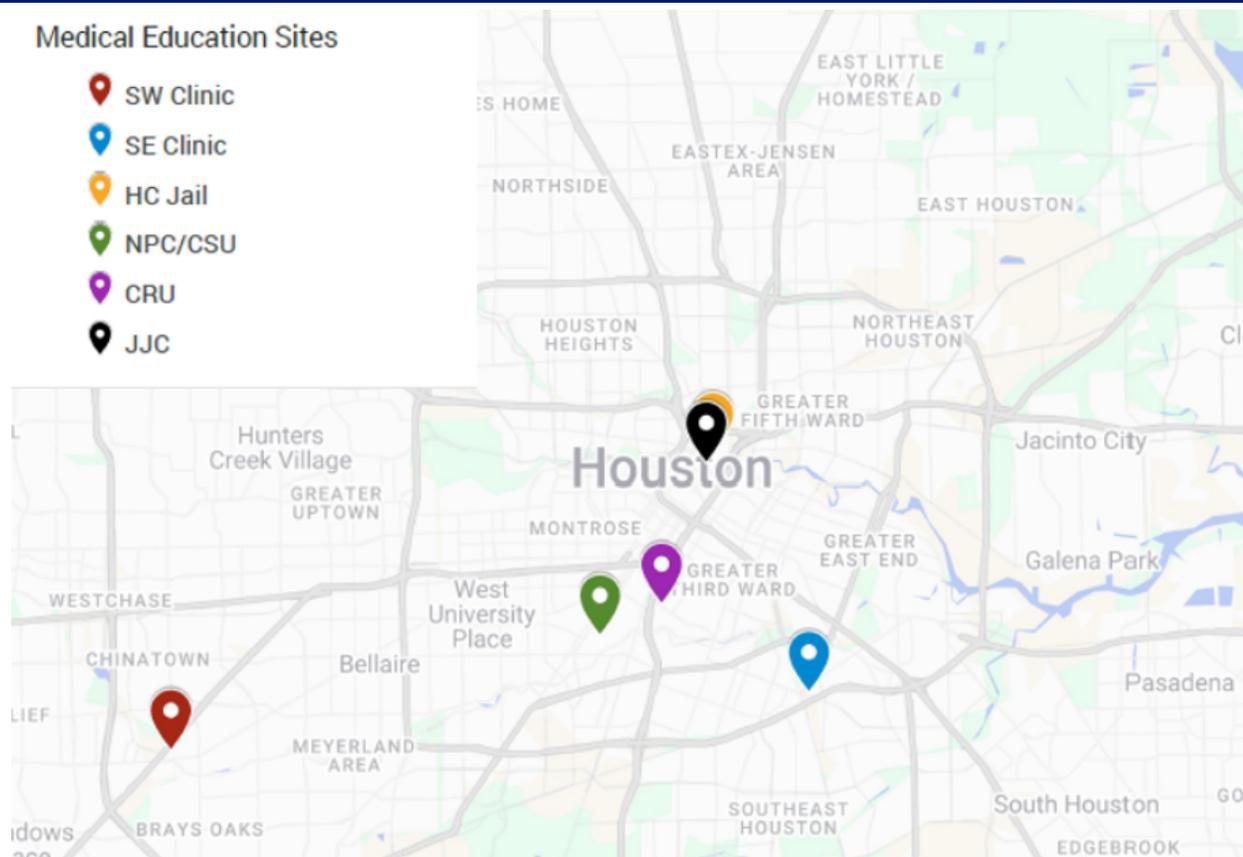
Presentation Outline

- Outpatient and Medical Education Organizational Structure
- Overview of Medical Educational Programs
 - Program Goals
 - Medical Education Footprint
- Community Psychiatry Rotation and Outcomes

Outpatient and Medical Education Organizational Structure



Medical Education Footprint



Educational Areas

- Forensic
- Crisis/Emergency Psychiatry
- Outpatient
- Child/Adolescent Psychiatry (CAP)
- Quality Improvement

External Funding Sources:

- PRSP-S: \$ 350,000
- CPRP: \$255,000
- CPWE: \$291,200
- Total: \$896,200

Academic Partners

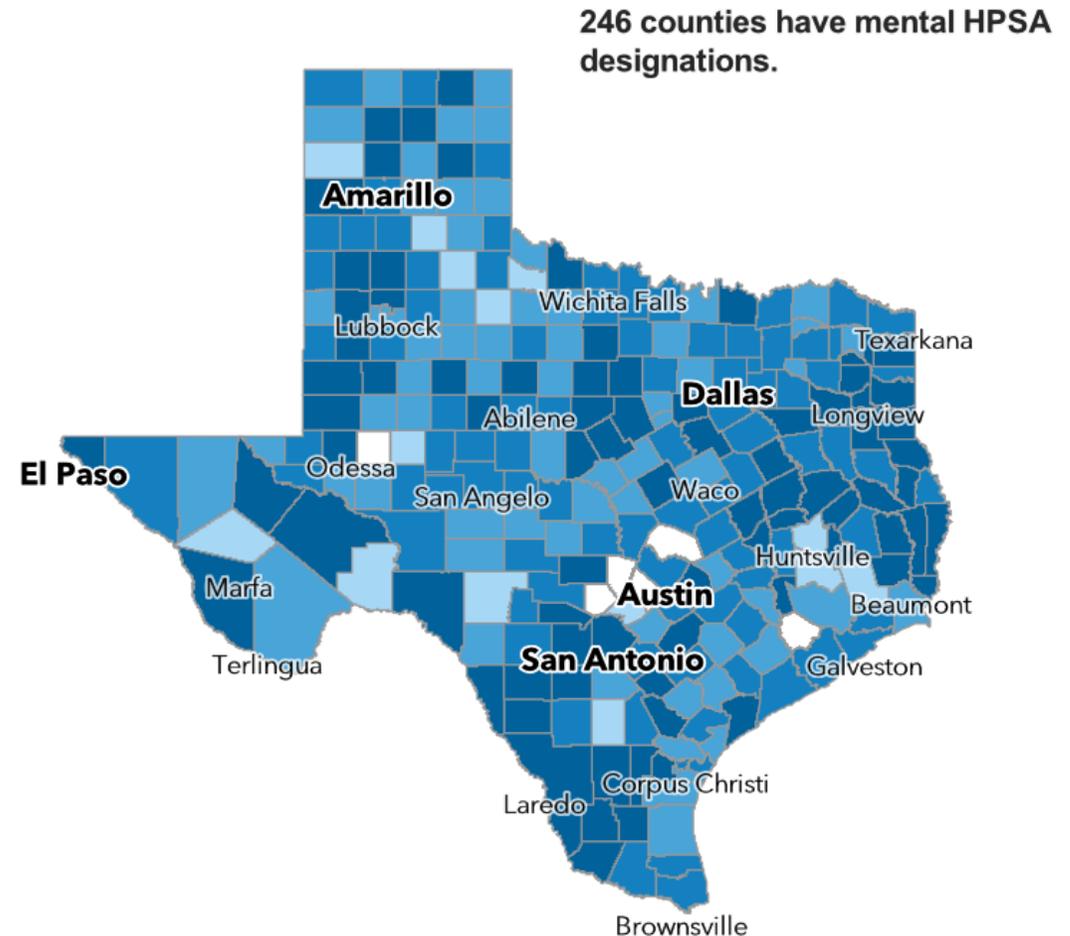
- UTHealth Houston (UT)
- Baylor College of Medicine (BCM)
- University of Texas Medical Branch (UTMB)
- University of Houston (UH)

1. **Southwest Community/CAP Clinic – 9401 SW Freeway**
 - a. Community Psychiatry Resident Rotation
 - b. CAP PGY3 Resident Rotation
 - c. BCM 2nd Yr Child Fellowship
 - d. BCM Quality Improvement Fellowship
2. **Southeast Clinic- 5901 Long Dr**
 - a. UT Child Fellowship
3. **Harris County Jail (Forensic Unit) - 1200 Baker St**
 - a. BCM and UT PGY2 Resident Rotation
 - b. BCM and UTMB Child Forensic Fellowship
4. **Neuropsychiatric Center (NPC)/Crisis Stabilization Unit (CSU) - 1502 Ben Taub Loop**
 - a. UH and UT Medical Student Elective
 - b. UT PGY4 Resident Rotation
 - c. BCM PGY4 Resident Rotation
5. **Crisis Residential Unit (CRU)- 2505 Southmoore**
 - a. BCM PGY4 Resident Rotation
6. **Juvenile Justice Center- 1200 Congress St**
 - a. BCM 1st Yr Child Fellowship
 - b. BCM Forensic Fellowship

Psychiatry Residence Stipend Program – State (PRSP-S)
Community Psychiatric Residency Grant (CPRP)
Community Psychiatry Workforce Expansion (CPWE)

Public Psychiatry Educational Needs

- **246 out of 254 Texas counties** are fully or partly designated as mental health professional shortage areas (MHPSAs)
- **170 of 254 Texas counties** do not have any licensed psychiatrists
- 13-16 million Texas in MHPSAs



<https://www.newsfromthestates.com/article/look-texas-mental-health-workforce-shortage>

<https://hoodline.com/2024/07/texas-confronts-severe-mental-health-professional-shortage-as-majority-of-counties-lack-adequate-care/>

<https://experience.arcgis.com/experience/323d93aa45fd43e88515cdf65365bf78>

Medical Education Program Goals

Educational Mission: Create & Implement a community psychiatry training track offered to Baylor and UTHealth residents

Goal: Focus on building future leaders in public psychiatry and provide exposure to public psychiatry settings

1

Experience delivery care across a continuum of psychiatric care services in the public sector

2

Provide services to a diverse clients with the ability to influence social determinants

3

Work with key clinical leaders to drive change through quality improvement and clinical redesign

4

Learn and engage in public sector psychiatric leadership: value-based care, financing, informatics, change management, complex needs, etc.

5

Deepen commitment and knowledge to serve the community and about advocacy work.

Community Psychiatry Rotation

Overview

- **Educational Partners:** UTHealth & Baylor
- **Postgraduate year (PGY)-3 longitudinal rotation**
 - **Pilot Year:** 3 residents (2022-2023)
 - **Ongoing Years:** 4 Residents (2023-2026)
- Attending supervision by 1-2 psychiatrists
- Psychotherapy elective supervision (PhD Psychologist)

Clinical	Elective	Education (with residency program)
<ul style="list-style-type: none"> • 3 full clinic days (6 blocks of clinic) • Full day Psychotherapy (UTHealth) • Child Elective (Baylor) 	Half Day Elective (once/month) <ul style="list-style-type: none"> - Assertive Community Treatment - Mobile Crisis Outreach Team - Intellectual & Developmental Disabilities - Psychiatric Emergency Services - Early Onset Psychosis - Respite, Rehabilitation and Re-Entry Center 	1 Full day

Educational Review: Program Impact

2 Year Evaluation

Program Evaluation

- Evaluated **7 residents across 2 cohorts** with **consistently high and improving satisfaction**.
- Residents valued **1:1 supervision, clinical breadth**, diverse diagnoses, and strong interdisciplinary collaboration.

Resident Experience

- Supervision rated highest**, with the second cohort achieving **perfect scores (5/5)**.
- Meaningful continuity of care throughout the rotation.

Workforce & Recruitment Outcomes

- Rotation **fills every year**, with **growing demand** exceeding capacity.
- Majority reported an **increased interest in public/community psychiatry careers**.

Community Psychiatry Rotation Outcomes

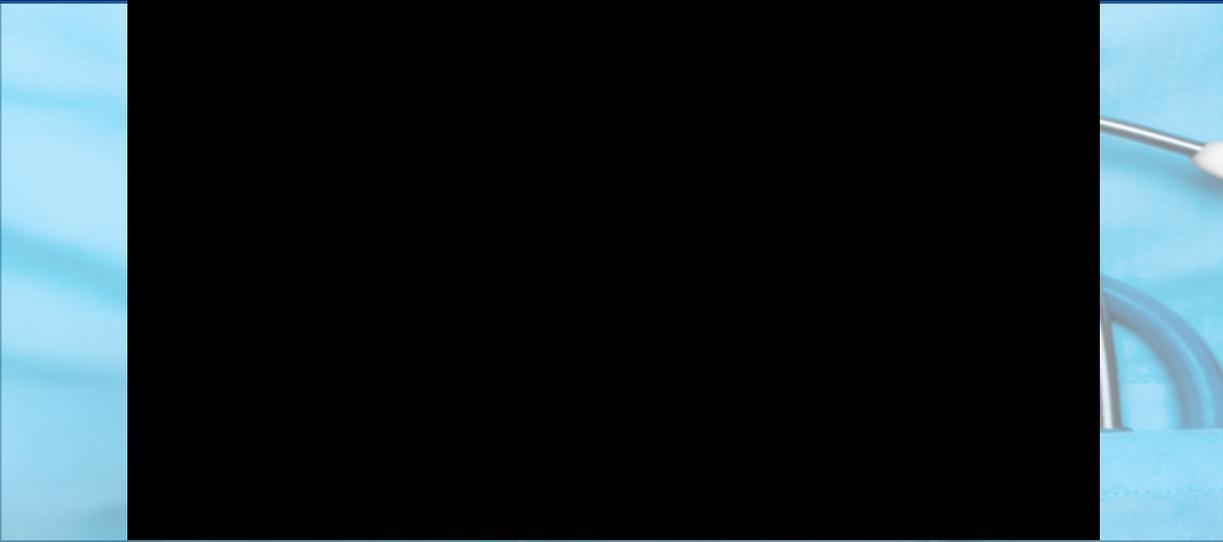
- Consistent Rotation fill and interest by both academic institutions
 - 4 current residents, 11 residents completed rotation

Career Decisions	
Local Retention	2 of 11 recruited/practicing at The Harris Center 1 of 11 in Houston Area
Public Psychiatry Retention	5 of 11 in Public Sector Practice
Fellowship Training	4 of 11 in Specialty Practice

Academic Work Products

Type	Date	Organization	Title
National Presentation	February 2024	American Association of Directors of Psychiatric Residency Training Annual Meeting	"Going Far Together; Creating a Collaborative Community Psychiatry Track across Institutions"
National Publication	November 2025	Academic Psychiatry (Journal)	Implementation of a Multi-Institution, Collaborative Community Psychiatry Rotation: A Novel Pipeline Strategy for Enhancing the Public Psychiatry Workforce Community Rotation
National Presentation (Accepted)	May 2026	American Psychiatric Association Annual Meeting	Empowering Psychiatric Residents in Quality Improvement and Patient Safety Education and Practice
National Poster Presentation (Accepted)	May 2026	American Psychiatric Association Annual Meeting	Empowering Psychiatric Residents in Quality Improvement and Patient Safety Education and Practice

Video & Future Directions



Thank you.