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Program Committee Meeting  
May 19, 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, April 21, 2026  
(EXHIBIT P-1)
- IV. **CONSIDER AND RECOMMEND ACTION**
  - A. Director Appointment to 811 Board-R. Bryant  
(EXHIBIT P-2)
  - B. Director Appointment to 811 Board-C. Dade  
(EXHIBIT P-3)
- V. **REVIEW AND COMMENT**
  - A. Adult Mental Health Services Overview  
(EXHIBIT P-4 Lance Britt)
- 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, APRIL 21, 2026**  
**MINUTES**

Dr. M. Miller, Jr., Board Chair, called the meeting to order at 10:00 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. R. Gearing, Dr. Q. Moore

Committee Member in Absence: R. Thomas, Dr. K. Bacon

Other Board Members in Attendance: Dr. J. Lankford, BG (Ret.) E. Grantham-video conference

**1. CALL TO ORDER**

The meeting was called to order at 10:00 a.m.

**2. DESIGNATION OF BOARD MEMBERS AS VOTING COMMITTEE MEMBERS**

Dr. Miller, Jr. designated Dr. Lankford and BG (Ret.) E. Grantham as voting members.

**3. DECLARATION OF QUORUM**

Dr. Miller, Jr. 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, March 17, 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, March 17, 2026 under Exhibit P-1, are approved and recommended to the Full Board for acceptance.

**6 REVIEW AND COMMENT**

**A. Medical Services Updated-**Dr. Luming Li and Dr. Maheshkumar Patel presented the Medical Services Updated presentation to the Program Committee.

**B. Foundation Update**-Stephanie Cunningham presented the Foundation Update to the Program Committee.

**C. Spotlight on Community Ambassadors**-Jennifer Battle presented the Spotlight on Community Ambassadors 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 10:57 am.

**MOTION BY: LANKFORD      SECOND BY: MOORE**

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**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  
9401 Southwest Freeway  
Houston, TX 77074

INFORMATION FORM FOR INDIVIDUAL NOMINEES TO THE

**811 Housing Board**  
**of**  
**VILLAS AT BAYOU PARK, INC.,**  
**ACRES HOME GARDEN, INC.,**  
**PECAN VILLAGE, INC., and**  
**PEAR GROVE, INC.**  
**(Severally and together, the "Corporation")**

**Please Print:**

Name: Robert Earl "Bobby" Bryant

Mr.     Mrs.     Ms.     Dr.     Consumer     Family Member of Consumer\*

Mailing Address: [REDACTED]

City: Houston    State: Texas    Zip Code: 77004

Telephone: Home [REDACTED]    Work \_\_\_\_\_    Cell \_\_\_\_\_

Fax No.: \_\_\_\_\_    E-mail Address: [REDACTED]

Occupation: Real Estate/Technology

Employed by: Bobby Bryant Properties & homhub.ai

I am seeking appointment as a Board Member of VILLAS AT BAYOU PARK, INC., ACRES HOME GARDEN, INC., PECAN VILLAGE, INC., and PEAR GROVE, INC.

I am being nominated by: Myself - Bobby Bryant  
[Yourself or person who recommended you]

Why do you want to be a member of the Housing Board?

My educational background involves individuals with Mental Illness and Special Needs. And now, I'm successfully in the real estate industry. Appears to be a great fit: Passion & Purpose! Not to mention that The Harris Center is a reputable brand anybody in the space would want to be affiliated with as a "SERVICE PROVER" in the space.

What special interests, talents, or experience do you feel you bring to the Board?

I have an interest in the well-being of people. Hence my entire career track has been serving people. I've been in leadership roles my entire professional career. I guess that's what happens when you have a military father(Sargent). In addition to being a nerd, I was also a student athlete. Meaning, I understand the importance of teamwork. Talent? I'm a great communicator, problem fixer, and visionary. Lastly, I'm a systems guy. I have a talent for creating better ways to do things. #methods

INDIVIDUAL APPLICATION TO 811 Housing Board

The Housing Board will meet at least annually. Are you available to attend this annual meeting on a regular basis?

Yes  No If no, please explain: \_\_\_\_\_

Please list your memberships in other professional and civic organizations and associations:

I'm a Realtor Member. An active member of Kappa Alpha Psi. Fraternity Inc. A C-STEAM Advisor.

You will be provided a copy of The Harris Center Policy pertaining to Housing Board and advisory board membership and the Code of Ethics for review. To be considered as a nominee, you need to review and sign a non-conflict of interest statement regarding participation on the Council and that you will be guided by the Code of Ethics of the Board of Trustees of The Harris Center. Please include both of these signed statements when you return this completed form.

DocuSigned by:  
*Bobby Bryant*  
FD01CC79E6EE4A9...

4/12/2026

(SIGNATURE)

(DATE)

**Please email the completed application form to [maria.richardson@theharriscenter.org](mailto:maria.richardson@theharriscenter.org), Maria Richardson, Director of Project Management, The Harris Center, 9401 Southwest Freeway, Houston, Texas 77074.**

- Attachments:
- The Harris Center Board By-Laws Regarding Advisory Councils
  - Copy of The Harris Center Code of Ethics
  - Certification of Compliance with Code of Ethics
  - Conflict of Interest Declaration
  - Voluntary Disclosure Statement

**THE HARRIS CENTER INDIVIDUAL MEMBER OF  
811 HOUSING BOARD COMPLIANCE  
THE HARRIS CENTER'S CODE OF ETHICS**

I, Robert Earl "Bobby" Bryant hereby certify that I have read and will comply with the Code of Ethics as adopted by the Board of Trustees with the most recent revision having been adopted on November 1, 2006 by unanimous affirmative vote of the Board of Trustees FOR The Harris Center.

DocuSigned by:  
*Bobby Bryant*  
FD01CC79E6EE4A9...

\_\_\_\_\_  
(Signature)

4/12/2026

\_\_\_\_\_  
(Date)

**THE HARRIS CENTER CONFLICT OF INTEREST DECLARATION  
FOR INDIVIDUAL MEMBER OF THE COMPANY BOARD OF DIRECTORS**

DS  
BB

I own no interest in any business, company, or firm which contracts with or sells merchandise or services to VILLAS AT BAYOU PARK, INC., ACRES HOME GARDEN, INC., PECAN VILLAGE, INC., and PEAR GROVE, INC., nor does any member of my immediate family.\*

EXCEPTION:

\_\_\_\_\_  
\_\_\_\_\_

DS  
BB

I am not employed by a business, company, or firm which has a contract with VILLAS AT BAYOU PARK, INC., ACRES HOME GARDEN, INC., PECAN VILLAGE, INC., and PEAR GROVE, INC., or sells its merchandise or services nor is any member of my immediate family\*.

EXCEPTION:

\_\_\_\_\_  
\_\_\_\_\_

DS  
BB

I receive no income or payment of any kind from VILLAS AT BAYOU PARK, INC., ACRES HOME GARDEN, INC., PECAN VILLAGE, INC., and PEAR GROVE, INC., nor does any member of my immediate family\*.

EXCEPTION:

\_\_\_\_\_  
\_\_\_\_\_

DS  
BB

I am not employed by VILLAS AT BAYOU PARK, INC., ACRES HOME GARDEN, INC., PECAN VILLAGE, INC., and PEAR GROVE, INC., nor is any member of my immediate family\*.

EXCEPTION:

\_\_\_\_\_  
\_\_\_\_\_

DS  
BB

I have no other conflict of interest which would make it undesirable for me to serve on these Board, nor does any member of my immediate family\*.

EXCEPTION:

\_\_\_\_\_  
\_\_\_\_\_

**VILLAS AT BAYOU PARK, INC., ACRES HOME GARDEN, INC., PECAN VILLAGE, INC., and PEAR GROVE, INC., BOARD OF DIRECTORS**

Print Your Name: Robert Earl "Bobby" Bryant

Signature: DocuSigned by:  
Bobby Bryant  
FD01C079E8EE4A9...

Date: 4/12/2026

\* Member of immediate family means a relative in the first or second degree, which includes, but is not limited to mother, father, brother, sister, son, daughter, husband, wife, grandmother, grandfather, legally authorized representative.

# EXHIBIT P-3

**The Harris Center  
VILLAS AT BAYOU PARK, INC.,  
ACRES HOME GARDEN, INC.,  
PECAN VILLAGE, INC., and  
PEAR GROVE, INC.  
(Severally and together, the "Company")  
BOARD OF DIRECTORS**

**Voluntary Disclosure Statement**

Robert Earl "Bobby" Bryant

\_\_\_\_\_  
(Name)

Please check one:

- Consumer** (I consider myself to be a person who has or has had a mental illness or an intellectual disability having been diagnosed at some point in my life as having an intellectual disability.)
- Family Member** (I consider myself to be a family member, as I have a person who has been diagnosed with a mental illness or an intellectual disability in my immediate family – mother, father, brother, sister, son, daughter, husband, wife, grandmother, grandfather.)
- Legally Authorized Representative** (I consider myself to be a person who represents a person who has been diagnosed with a mental illness or an intellectual disability.)
- I an Employee of The Harris Center** and work to assist persons who have been diagnosed with a mental illness or an Intellectual disability.

I hereby give The Harris Center permission to utilize the above designation as needed to respond to inquiries as to the composition and/or representation of persons with mental illness or intellectual disabilities or their family members with regard to the planning, evaluation, and input processes of the Agency.

4/12/2026

\_\_\_\_\_  
(Date)

DocuSigned by:  
*Bobby Bryant*  
FD01CC79E6EE4A9...

\_\_\_\_\_  
(Signature)



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What special interests, talents, or experience do you feel you bring to the Board?

I bring a unique and rare combination of hands-on housing experience, financial discipline, and nonprofit leadership. As the founder and operator of a multi-property real estate portfolio, I have managed every dimension of housing operations and thus have direct experience from property management, rehabilitation, renovations and contractor oversight to maintaining financially sustainable housing operations and regulatory compliance across multiple jurisdictions. My background in corporate housing and real estate gives me specific insight into transitional and temporary housing and thus the logistical and human complexity that comes with it. Add to that my experience in communications, community partnerships, and volunteer background, and I believe I bring a well-rounded, deeply committed perspective that can genuinely strengthen the board's work.

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INDIVIDUAL APPLICATION TO 811 Housing Board

The Housing Board will meet at least annually. Are you available to attend this annual meeting on a regular basis?

Yes  No If no, please explain: Yes, absolutely and available more than annually if necessary.

Please list your memberships in other professional and civic organizations and associations:

Stanford Alumni Association- Stanford Admissions Ambassador

Stanford Black Alumni Association

Delta Sigma Theta Sorority Incorporated

Braven- Mock Career Interviewer

You will be provided a copy of The Harris Center Policy pertaining to Housing Board and advisory board membership and the Code of Ethics for review. To be considered as a nominee, you need to review and sign a non-conflict of interest statement regarding participation on the Council and that you will be guided by the Code of Ethics of the Board of Trustees of The Harris Center. Please include both of these signed statements when you return this completed form.

Channon R. Dade  
(SIGNATURE)


4-15-2026  
(DATE)

Please email the completed application form to [maria.richardson@theharriscenter.org](mailto:maria.richardson@theharriscenter.org), Maria Richardson, Director of Project Management, The Harris Center, 9401 Southwest Freeway, Houston, Texas 77074.

- Attachments:
- The Harris Center Board By-Laws Regarding Advisory Councils
  - Copy of The Harris Center Code of Ethics
  - Certification of Compliance with Code of Ethics
  - Conflict of Interest Declaration
  - Voluntary Disclosure Statement

**THE HARRIS CENTER INDIVIDUAL MEMBER OF  
811 HOUSING BOARD COMPLIANCE  
THE HARRIS CENTER'S CODE OF ETHICS**

I, Channon R. Dade hereby certify that I have read and will comply with the Code of Ethics as adopted by the Board of Trustees with the most recent revision having been adopted on November 1, 2006 by unanimous affirmative vote of the Board of Trustees FOR The Harris Center.

  
\_\_\_\_\_  
(Signature)  
4-15-2026  
\_\_\_\_\_  
(Date)

**THE HARRIS CENTER CONFLICT OF INTEREST DECLARATION  
FOR INDIVIDUAL MEMBER OF THE COMPANY BOARD OF DIRECTORS**

I own no interest in any business, company, or firm which contracts with or sells merchandise or services to VILLAS AT BAYOU PARK, INC., ACRES HOME GARDEN, INC., PECAN VILLAGE, INC., and PEAR GROVE, INC., nor does any member of my immediate family.\*

EXCEPTION:

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I am not employed by a business, company, or firm which has a contract with VILLAS AT BAYOU PARK, INC., ACRES HOME GARDEN, INC., PECAN VILLAGE, INC., and PEAR GROVE, INC., or sells its merchandise or services nor is any member of my immediate family\*.

EXCEPTION:

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I receive no income or payment of any kind from VILLAS AT BAYOU PARK, INC., ACRES HOME GARDEN, INC., PECAN VILLAGE, INC., and PEAR GROVE, INC., nor does any member of my immediate family\*.

EXCEPTION:

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I am not employed by VILLAS AT BAYOU PARK, INC., ACRES HOME GARDEN, INC., PECAN VILLAGE, INC., and PEAR GROVE, INC., nor is any member of my immediate family\*.

EXCEPTION:

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I have no other conflict of interest which would make it undesirable for me to serve on these Board, nor does any member of my immediate family\*.

EXCEPTION:

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**VILLAS AT BAYOU PARK, INC., ACRES HOME GARDEN, INC., PECAN VILLAGE, INC., and PEAR GROVE, INC., BOARD OF DIRECTORS**

Print Your Name: CHANNON R. DADE  
Signature: Channon R. Dade

Date: 4-15-2026

\* Member of immediate family means a relative in the first or second degree, which includes, but is not limited to mother, father, brother, sister, son, daughter, husband, wife, grandmother, grandfather, legally authorized representative.

**The Harris Center  
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ACRES HOME GARDEN, INC.,  
PECAN VILLAGE, INC., and  
PEAR GROVE, INC.  
(Severally and together, the "Company")  
BOARD OF DIRECTORS**

**Voluntary Disclosure Statement**

CHANNON R. DADE

(Name)

Please check one:

**Consumer** (I consider myself to be a person who has or has had a mental illness or an intellectual disability having been diagnosed at some point in my life as having an intellectual disability.)

**Family Member** (I consider myself to be a family member, as I have a person who has been diagnosed with a mental illness or an intellectual disability in my immediate family – mother, father, brother, sister, son, daughter, husband, wife, grandmother, grandfather.) *- My Cousin*

**Legally Authorized Representative** (I consider myself to be a person who represents a person who has been diagnosed with a mental illness or an intellectual disability.)

**I an Employee of The Harris Center** and work to assist persons who have been diagnosed with a mental illness or an Intellectual disability.

I hereby give The Harris Center permission to utilize the above designation as needed to respond to inquiries as to the composition and/or representation of persons with mental illness or intellectual disabilities or their family members with regard to the planning, evaluation, and input processes of the Agency.

4-15-2026

(Date)

Channon R. Dade

(Signature)

# **EXHIBIT P-4**

# Welcome to Adult Mental Health Services

Presented by:

Lance Britt, VP of Behavioral Health  
Jennifer Boswell, Director of AMH and Specialty Services

May 19, 2026



# FY 2025 Adult Mental Health Program Summary



**21,179**

Total Patients Served



**4**

Outpatient Clinics



**399**

Total Staff Members

# Clinic Profiles

**Northeast**

Patients Served  
**4,416**

Staff Members  
**76**

Patient-to-Staff Ratio  
**58:1**

**Northwest**

Patients Served  
**6,371**

Staff Members  
**129**

Patient-to-Staff Ratio  
**49:1**

**Southeast**

Patients Served  
**6,402**

Staff Members  
**105**

Patient-to-Staff Ratio  
**61:1**

**Southwest**

Patients Served  
**4,384**

Staff Members  
**89**

Patient-to-Staff Ratio  
**49:1**

# Services Offered

Comprehensive care across all four outpatient clinic locations



**Medication Maintenance and Monitoring**



**Care Coordination and Case Management**



**Skills Training and Psychosocial Rehab**



**Medication Training and Support**



**CBT and CPT**



**Integrated Care**



**Substance Use Recovery Services**



**Employment and Housing**



**Pharmacy**

# A Day in the Life of an AMH Clinic

Presented by:

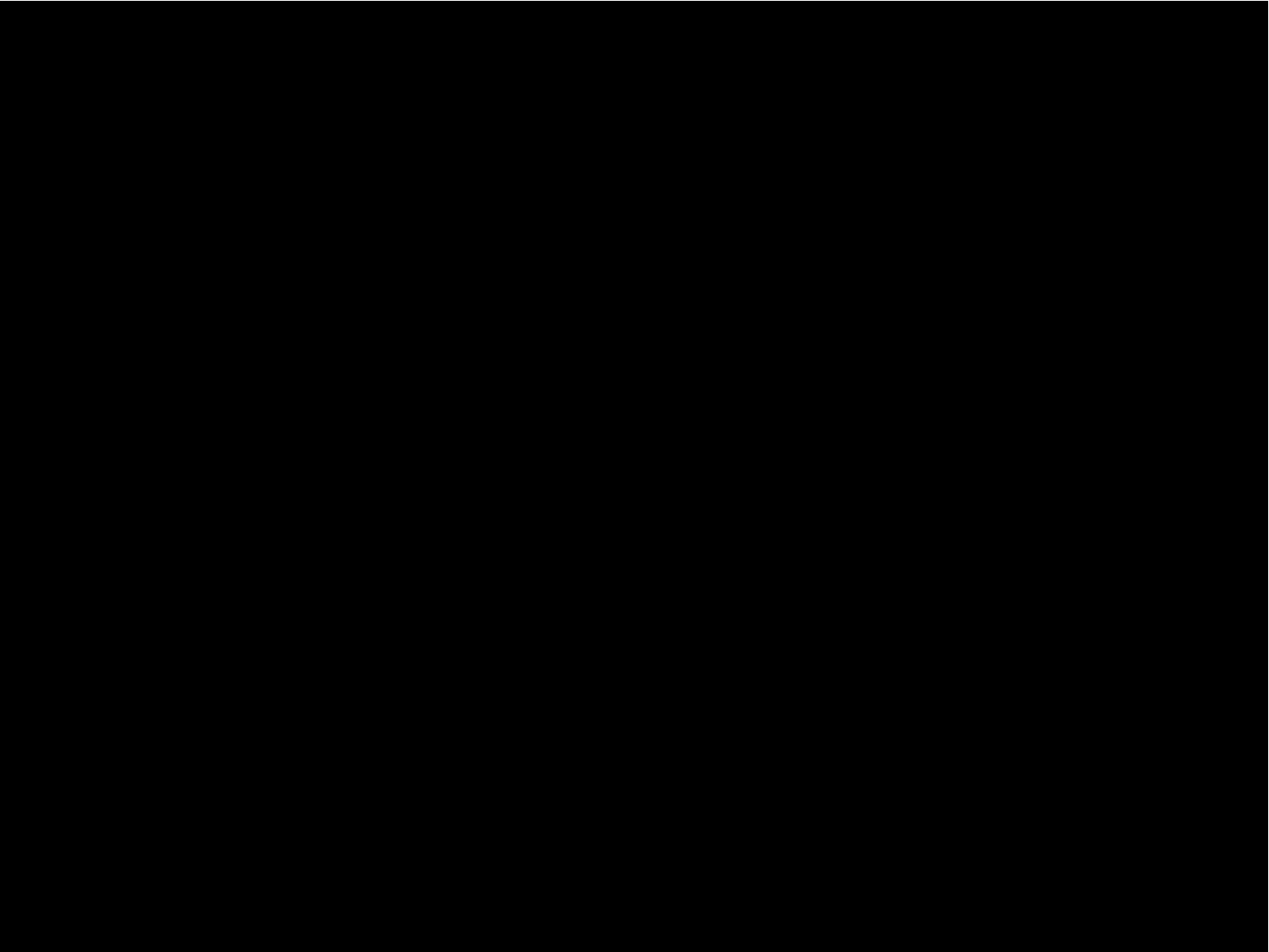
Dr. Dionne Hill, Southwest AMH PM

Jeff Lovell, Northeast PM

Stephanie Johnson, Northwest PM

Dr. Brent Lawless, Southeast PM





# Mental Health Services Intake Process

The intake process is designed to be simple, informative, and supportive for every individual seeking care.



## Access to Services

Appointments are offered on a first-come, first-served basis to ensure fairness and timely access.



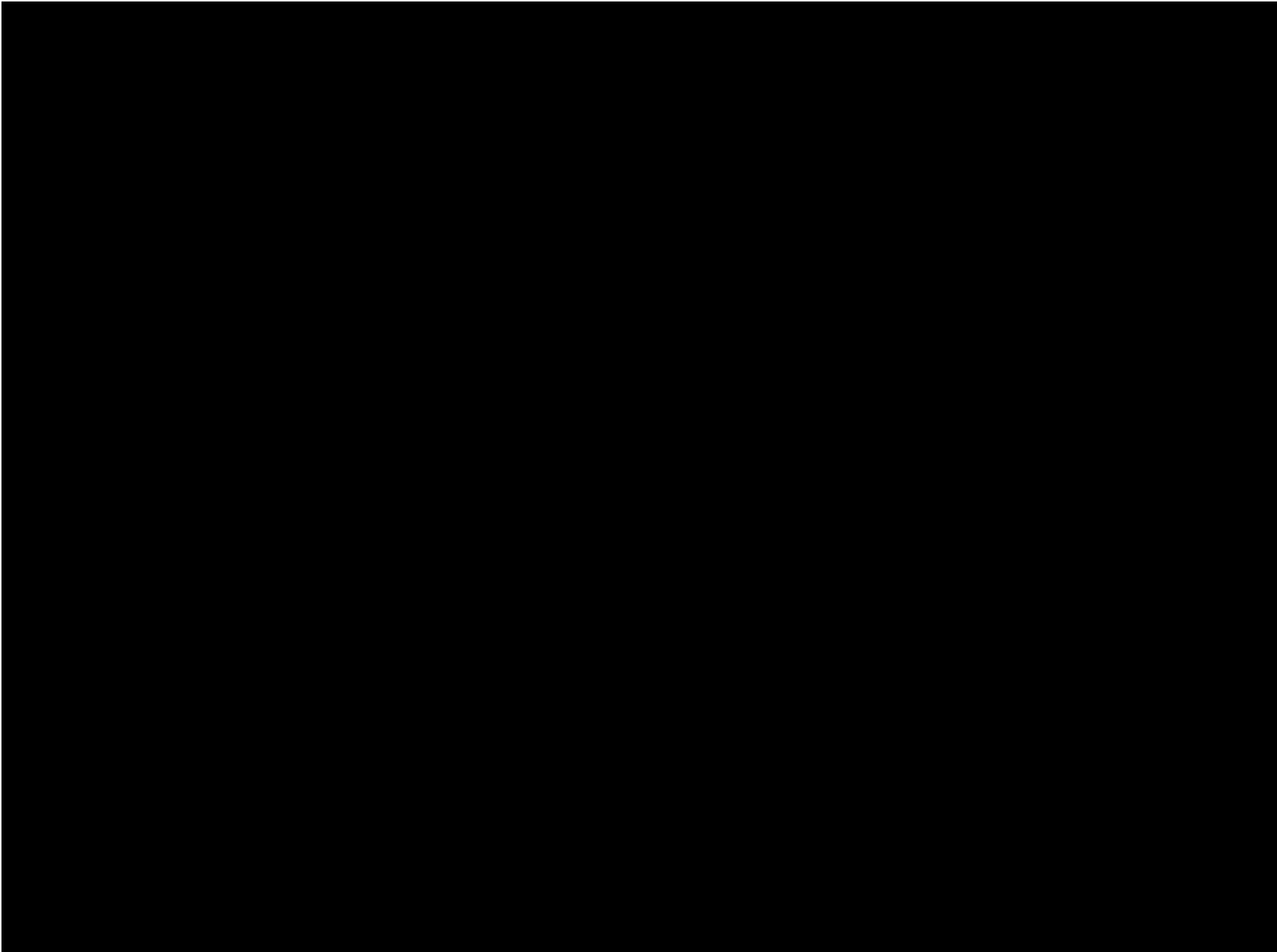
## Information Sharing

Patients are provided with important information about available services, introduction to the treatment team, and any required documentation to help them make informed decisions about their care.



## Follow-Up & Next Steps

After the initial intake, our team will guide patients through the next steps, including scheduling and referrals if needed.



# Medical Services

Our medical services encompass provider-led care, nursing support, and integrated health programs to deliver comprehensive, whole-person treatment.



## Providers

In-person and telehealth modalities available for psychiatric and medication services



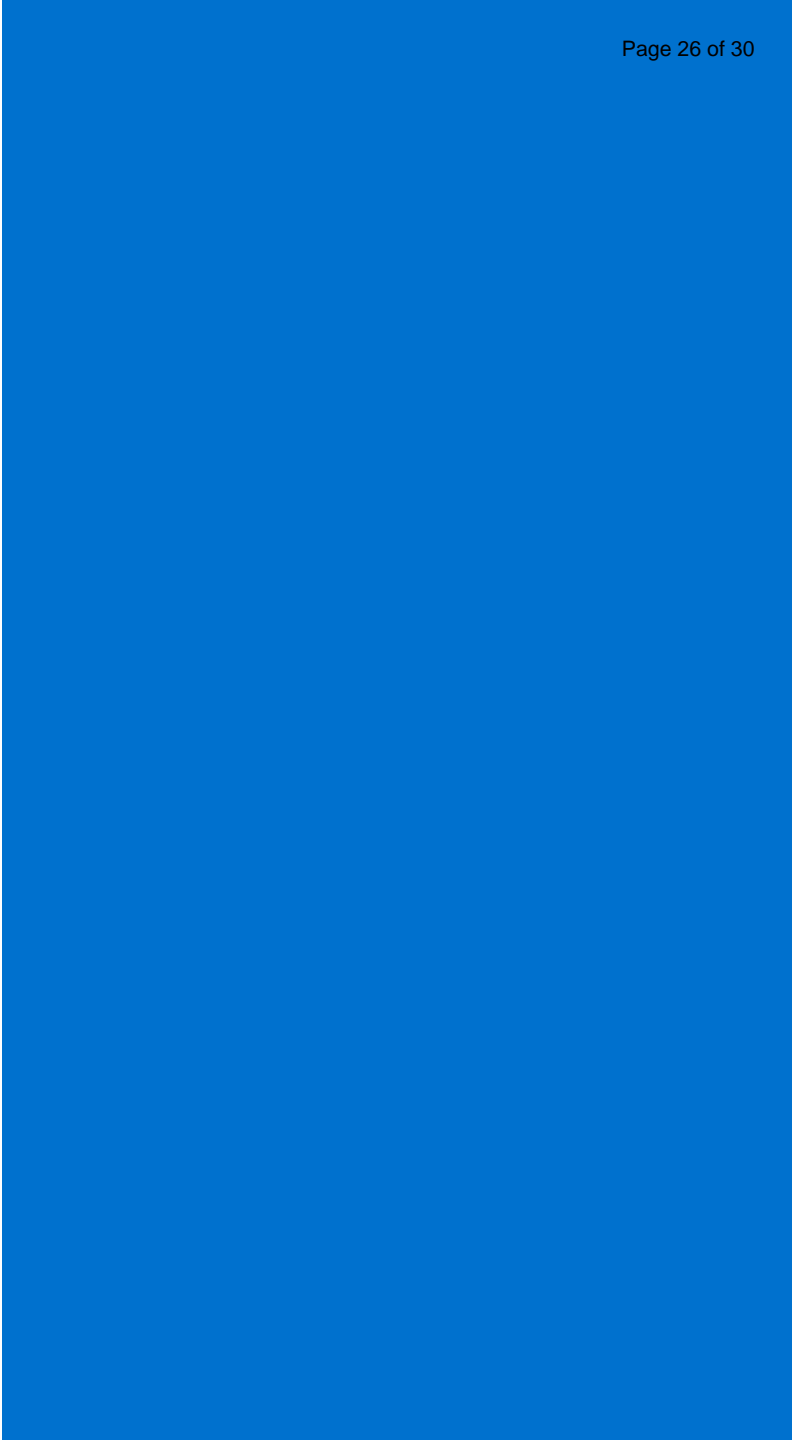
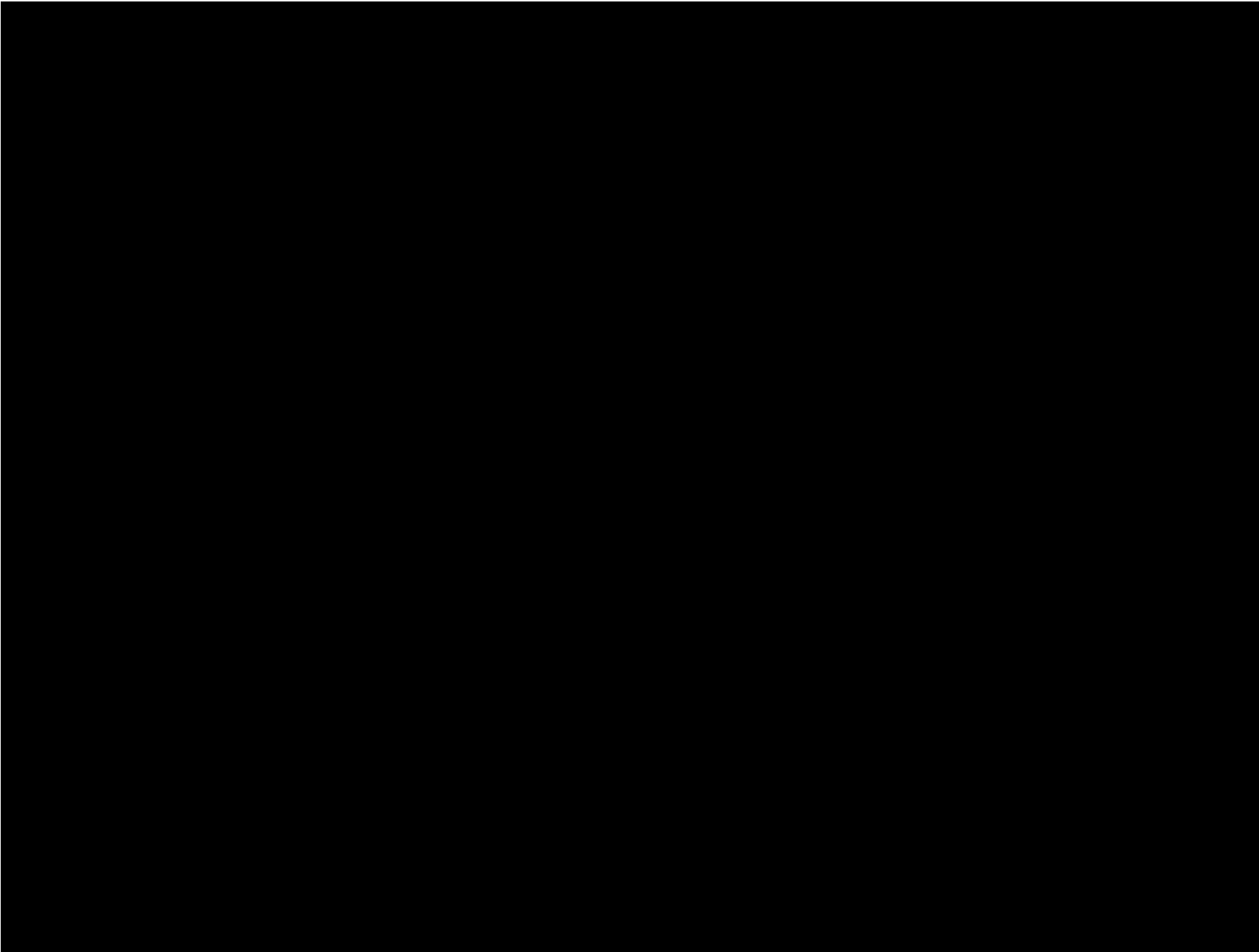
## Nursing

Certified Medical Assistant and nursing services available at all clinic locations



## Integrated Care

Primary care medical and nutritionist services offered onsite



# Case Management, Care Coordination, and Therapy Services

A unified, patient-centered approach spanning care delivery, specialty coordination, and community support



## Flexible Care Delivery

- In-clinic and field-based service delivery
- Face-to-face and virtual telehealth options
- Maximized patient engagement and access across settings



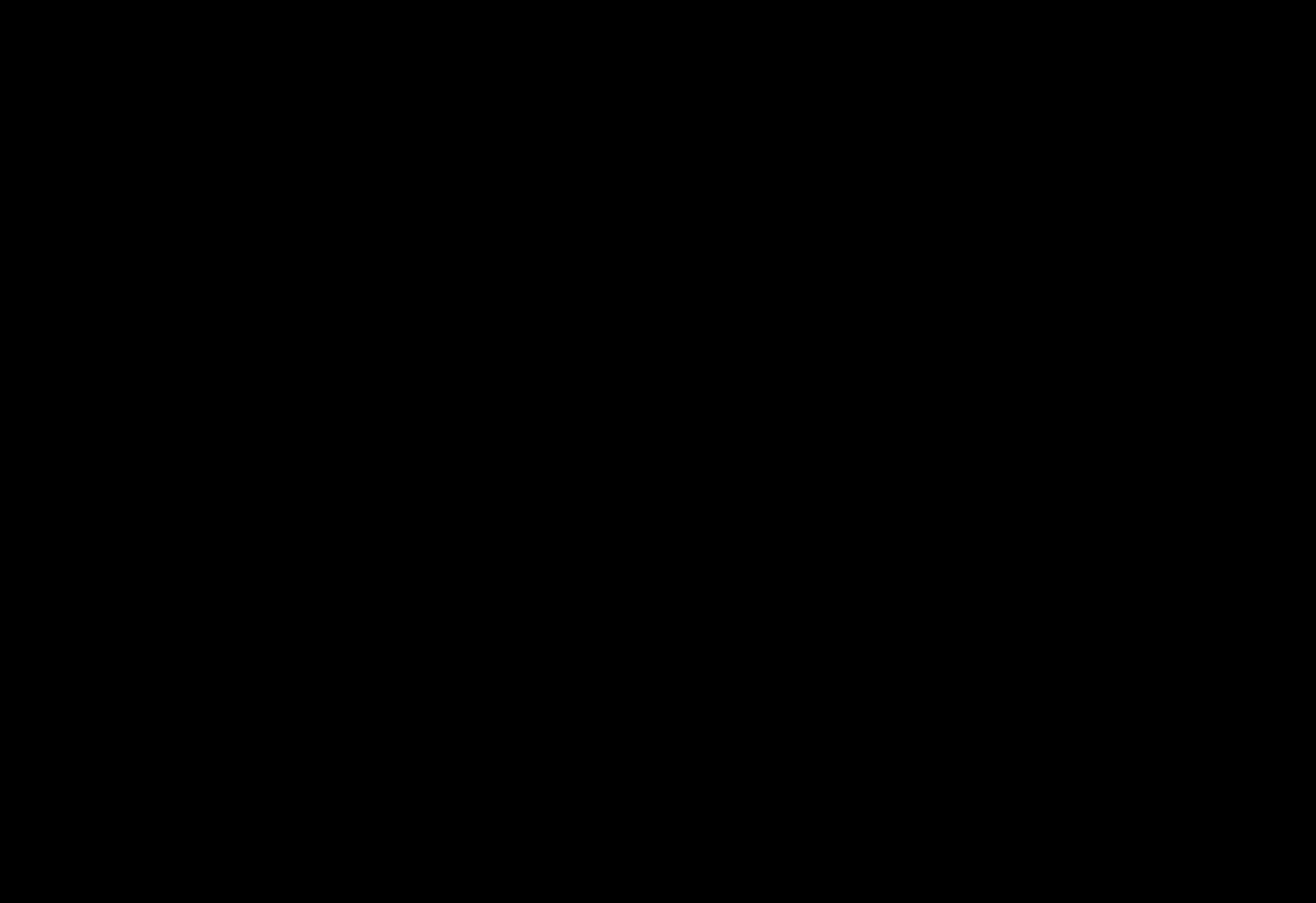
## Integrated Specialty Referrals

- Housing, employment, and substance use services
- Peer support and medical care coordination
- Single point of contact for seamless transitions



## Community Resources

- Clothing, furniture, and nutrition assistance
- Legal services and benefits advocacy
- Dedicated navigators to remove barriers and build connections



# Pharmacy & Check-out

Completing the care journey with medication dispensing and a structured discharge process to ensure patients leave with everything they need.



## Pharmacy

On-site pharmacy services ensure patients receive prescribed medications before leaving, with counseling on proper usage, side effects, and refill procedures.



## Check-out

A structured discharge process that includes visit summaries, follow-up scheduling, and resource packets so patients leave confident and informed.

Thank you.