

**BEXAR COUNTY BOARD OF TRUSTEES FOR
MENTAL HEALTH MENTAL RETARDATION SERVICES d/b/a
THE CENTER FOR HEALTH CARE SERVICES**

Regular Board Meeting

6800 Park Ten Blvd, Suite 200-S

San Antonio, Texas 78213

Tuesday, April 19, 2022

6:00 p.m.

- TRUSTEES PRESENT:** Daniel T. Barrett, Chairman
Mary Rose Brown, Vice Chairman
Donnie Windham Whited, Secretary
Graciela Cigarroa, Treasurer
Polly Jackson Spencer, Ret. Judge
Sandee Marion, Ret. Judge
Richard Usatine, M.D. (zoom)
- TRUSTEES ABSENT:** Roberta L. Krueger, M.D.
Margaret M. Vera
Sheriff Javier Salazar
- STAFF PRESENT:** Jelynn LeBlanc Jamison, President/Chief Executive Officer
Robert Guevara, Chief Financial Officer
Rene Olvera, M.D., Chief Medical Officer
James Chapman, Chief Compliance Officer
Lauro Garza, VP/Occupational Safety Risk Management
Frank Garza, General Counsel
Adam Velez, Director/Contracting & Procurement
Cynthia Hinton, Executive Assistant
- GUESTS PRESENT:** Ms. Kim Gonzalez, Garza/Gonzalez & Associates
Hunter Stanco, Morgan Stanley

The regular meeting of the Bexar County Board of Trustees for Mental Health Mental Retardation Services d/b/a The Center for Health Care Services was held on Tuesday, April 19, 2022 at the Administrative Offices located at 6800 Park Ten Blvd, Suite 200, San Antonio, Texas 78213.

**CALL MEETING TO ORDER
CERTIFICATION OF QUORUM**

Mr. Barrett called the meeting to order at 6:10 p.m., with the following trustees present: Meses. Brown, Cigarroa, Marion, Spencer, Whited, and Dr. Usatine (attended by zoom), thereby establishing a quorum.

PLEDGE OF ALLEGIANCE - Led by Chairman Daniel Barrett

CITIZENS TO BE HEARD – Mr. Barrett stated there was one citizen to be heard and reminded the

Board that the citizen has only 3 minutes to speak, and the Board cannot respond. Public comments were heard.

1. APPROVAL OF MINUTES

Mr. Barrett asked for a motion for approval of the Minutes of the Regular Board Meeting held on February 8, 2022, that were presented for review and approval. Ms. Whited moved for approval as presented; Ms. Cigarroa seconded the motion. Motion carried.

2. BOARD CHAIRMAN'S REPORT

- Mr. Barrett stated he had just come back from the 2022 National Council Conference and found it very informative. He also stated that he is proud that the Center is so many light years ahead of so many other centers in the United States.
- Mr. Barrett congratulated Ms. Whited on receiving her doctorate, Psy.D. He wanted to honor and thank her for her contributions to the Center as well as to the community. Ms. Whited thanked him and said that the degree is because she talks with Psychologists of children & youth mental health of which she is an advocate.
- Mr. Barrett stated that Ms. Brown has been a contributor in the business community for many years and congratulated her for recognition by the Business Hall of Fame. He wanted to honor and thank her for her service. Ms. Brown thanked everyone.

3. PRESIDENT/CHIEF EXECUTIVE OFFICER'S REPORT

Leadership Briefing

- Ms. Jamison stated on April 15, CHCS celebrated 126 employees for their years of service with the Center. It was very special to have Board Members attend the event and Judge Huff as the Keynote Speaker. She commended Adrienne Alcazar and her team from People & Culture, the Culture Committee, and the Marketing/Communications staff for doing a wonderful job to create a memorable event for the employees. She thanked everyone for attending and especially the employees for their combined service to the organization.
- Ms. Jamison stated that CHCS has been engaged in organizing a consortium of community organizations that primarily address pre-crisis services in the community. The group has agreed to create a governance model and establish guiding principles. They want to have a joint mission providing an array of services for the right treatment at the right time with the goal of reducing the need for crisis services in the community. We want to provide services for mental health, substance use disorder, and IDD populations. Their initial purpose is to seek funding from the City of San Antonio and the County of Bexar for a community campaign to reduce stigma, enhance access to care, and by that she means a full array of services to individuals, not just treatment, but housing, employment, and food insecurity issues. They are calling themselves the SAT Coalition. So far, the founding groups include the Center, the Ecumenical Center, Rise Recovery, Lifetime Recovery, Alpha Home, UHS, NAMI, Haven for Hope, Westcare, Alamo Area Community Network, and LISC. Other invited organizations that include Family Services, Communities in School, mobile mental awareness with Meadows, and housing collaborative SARAH. They are now

drafting their guiding principles, and will begin work in evaluating their collective proposals and how they want to propose funding from the City and County. This will be the first time that community in pre-crisis services are coordinating with each other, talking about each other's respective treatment capacity, and identifying individuals in trying to meet all their needs not just their treatment needs.

- Ms. Jamison mentioned that the City of San Antonio recently launched a pilot for a Crisis Response Team called SA Core that includes law enforcement, EMS, and clinicians from the Center. There was a soft launch on April 4 when the team was dispatched, and there has been some real success. The City has asked that the CHCS Center Advisory Committee (CAC) be the entity that receives the feedback for this pilot and then provide that feedback to the City Council Public Safety Committee. Details still need to be worked out with City staff. The point of contact is Maria Villagomez, the Deputy City Manager for the City. Since there are vacancies on our CAC, the City Council is discussing how they would be able to nominate individuals with the understanding that the CHCS Board appoints members to the CAC. Ms. Jamison and Ms. Villagomez are continuing to talk about the best way to meet the City's needs and still engage CAC. She has met twice with the City Council Public Safety Committee and they have embraced our recommendations to look at expanding community and pre-crisis services as they go through their budget process and allocate the \$26 million that they have designated for mental health from their ARPA money. We would like to work with the City and the County with these proposals.
- Ms. Jamison stated that the Center recently created a team of staff to look at a Work from Home Policy for the Center. Much work was done by staff to evaluate all of the Center's regulatory requirements to ensure that the Center would be in compliance with all of the regulatory entities. They also looked at all the roles that would be eligible for work from home. Employees will have to work with their direct supervisor to apply and it will have to be reviewed and approved by the respective Vice President of the business unit and the VP of People & Culture. Not every position at the Center is eligible due to some regulatory constraints, as some positions are still required to provide face-to-face services. She thinks this will help in the Center's recruitment efforts and meet some of the employee requests to work from home.
- Ms. Jamison mentioned the EHR system is well underway. It has been 18 months preparing for a new electronic health record and all of the Super users are currently going through the training. In May center-wide training will begin for all employees that will use the EHR system which is over 1000 employees. The date to go live is June 1, which means the Center will no longer use and document in Anasazi. They will officially document all medical records in the new EHR My Avatar. Issues are still being worked through. She wanted to thank the Board for their approval of this investment. It really means a transformation for the Center and will be a more responsive system for the employees.
- Ms. Jamison gave an update on targeted hiring. The Center had some successful targeted hiring fairs, and there will be another hiring fair on April 30. The Center now has about 1000 fulltime employees with 300 left to fill. A major Employee Experience project is

underway that is examining six major areas of employee experience that influence the Center. The 6 areas are 1) New Employee Orientation (NEO) process, 2) how employees are on boarded, 3) how we develop employees once they are on board & employed, 4) how employees are retained, 5) how employees are engaged, and 6) the Behavioral Principles that the Center ascribes to, to meet our Core Values. Since the beginning of this initiative, the review of NEO and on boarding have been completed. The recommendations received by the Executive Leadership Team are in the process of implementation. A team will begin soon on the 2nd phase, which includes development and retention. There will be a series of focus groups to get a feeling of what the employees are looking for in terms of retention and development opportunities at the Center. When this phase closes out, they will work around engagement and the Behavioral Principles. This is to be completed in time for the new fiscal year starting September 1. There is still lots of work to look at the culture of the organization, and what is to be done to meet the needs of the employee and enhance their experience at the Center.

Chief Medical Officer's Report – *Dr. Rene Olvera*

- Dr. Olvera stated that a Director of Nursing (DON) has been hired. The position had been vacant for 3 months, partially because an extensive search was done and there were about 30 applicants. Richard Clyde Hill was the chosen applicant. Mr. Hill retired from the military after more than 20 years of service, and at his last post he oversaw over 100 nurses both active military and contract nurses. Dr. Olvera wanted to thank the Board. During that interim, the Center relied on their Nurse Managers. This was a new structure that had been approved at last year's budget. In the absence of a DON, the Nurse Managers banded together, met daily, and supported each other. He was grateful for that extra layer of expertise at the Center and wanted to thank the board for their focus on realizing how medical the Center is.
- He said they are excited about the new EHR. Some glitches are being worked out for Super users so they can prepare the prescribers during their training in May. Schedules have been set, so June will be a leaner month but a stop in services is not anticipated. The system is user friendly but will be different, and the full functionality will not be recognized for a few months. They will be able to send records electronically to partners and there should be no more copying or faxing.

Contracts executed by the President/CEO over \$50,000 and under \$100,000 for the month of February 2022 & March 2022 – Ms. Jamison stated there were none to report.

4. CONSENT AGENDA

1. Acceptance of the 2021 Fourth Quarter Performance Report of the Centers 401(a) and 457(b) Accounts from Morgan Stanley – *Hunter Stanco*
2. Approval to the Board of Trustees for the President/CEO to Negotiate and Execute a Contract with Medina Valley Security, Inc. for Burglar & Fire Alarm Monitoring Services – *Adam Velez*
3. Approval to the Board of Trustees for the President/CEO to negotiate and execute a lease of space at 6655 First Park Ten – *Adam Velez*
4. Approval to the Board of Trustees for the President/CEO to Negotiate and Execute a Contract

- with AVTex Solutions, LLC for the Provision of a Call Center Phone System – *Adam Velez*
5. Approval from the Board of Trustees to direct staff to update the tagline for The Center for Health Care Services to read Mental Health & Substance Use Solutions – *Jelynn LeBlanc Jamison*

Mr. Barrett asked for a motion to approve the Consent Agenda items. Ms. Brown moved for approval, Ms. Whited seconded the motion. Motion carried.

5. INDIVIDUAL ITEMS FOR REPORT, DISCUSSION & APPROPRIATE ACTION

EXECUTIVE COMMITTEE (*Daniel Barrett, Chair*)

1. Approval to the Board of Trustees of the Center’s Financial Audit Report for Fiscal Year 2021 Independent Audit Report conducted by Garza/Gonzalez & Associates – *Robert Guevara*

Mr. Guevara introduced Ms. Gonzalez of Garza/Gonzalez & Associates. Ms. Gonzalez stated she would present the results of the audit for fiscal year ending August 31 2021 that covers the period September 1, 2020 – August 31, 2021. She stated that she and her two colleagues had come before the Executive Committee on April 6, 2022 to present the audit results in a lot of detail but does not plan to go into that detail here, but will be happy to answer any questions the Board may have as she presents. She explained that a large report is included in the Board packet. In addition is the report on the Conduct of the Audit, which is their communication to the Board on the process of the audit, any difficulties encountered in the internal control matters, and other information related to the audit. Even though they work closely with staff while they are performing the audit, they are independent and understand they report to the Board Members of what the purpose of this report is to them. In addition to those two reports they have also included an Audit Summary that summarizes the information that they feel is more important that they wanted to highlight as part of the presentation of the larger report and the small report. She gave recognition to the other members of the Engagement Team that were not in attendance. Ms. Gonzalez stated that in addition to that, Mr. Guevara and his staff take a lot of time during the audit and are the ones that prepare the Audit Summary. The auditors do not prepare the summary; they review documentation to ensure that the information to the Board is materially correct. Their responsibility as auditors is to provide an opinion related to the review related to the audit of that information that management prepares. She then proceeded to go over the items 1 – 7 of the Audit Summary. She stated that an unmodified opinion is the same type of opinion that they have rendered to the Center in previous years. It is the best type of opinion that any entity can receive in reference to the audited financial statements. Another positive thing to add to that list is the results of the audit which are positive, and an unmodified opinion represents that. She also stated that they have audited the Center for a few years now and the Center has made tremendous improvement since the first year that they audited the Center. Ms. Gonzalez concluded the presentation and asked if there were any questions. Mr. Barrett thanked Mr. Guevara and his team for their work. Mr. Guevara thanked Justin Marshall, Accounting Manager, and his team for their good work, and thanked Ms. Gonzalez and her team. He also thanked James Chapman, Chief Compliance Officer, for his work that he has instituted in the Compliance Department, which has really prepared them for these audits. Ms. Gonzalez and

Mr. Chapman answered Ms. Spencer's question regarding compliance.

Mr. Barrett asked for a motion of acceptance of the Audit Summary. Ms. Spencer made a motion, Ms. Brown seconded. Motion carried.

FINANCE COMMITTEE (*Mary Rose Brown, Chair*)

1. Acceptance of the Center's Financial Statements for the period ending December 31, 2021 and January 31, 2022– *Robert Guevara*

Mr. Guevara presented the Center's Financial Statements as follows:

a) December 2021 Financials

- Overall operating loss of (\$303,003) for the month. Including the Planned Reserve Expenditures YTD of \$2,863,291 and all funds recognized the Net YTD gain is \$2,560,288. This amount includes
- \$1.2 million of unrecognized Waiver/DPP
- Over \$2.5 million in DPP funding received. However, the funding is not being recognized, and the money is kept in a liability account, in case it has to be returned to the State.
- Fund Balance Composition: Cash - \$7,116,456, AIR - \$14,823,232
- YTD Revenue Budget - \$42,255,450, Actual YTD Revenue - \$34,035,415, Actual YTD Expense - \$35,546,141, Net Gain YTD - (\$1,510,726). Approximately \$7.8 million of the \$8.2 million variance have none or minimal financial impact to the bottom line due to no cost incurred.
- Strategic Plan Revenues - (\$954,123), the equivalent of 14.3%
- Strategic Plan Expenses - \$657,925. \$6.1 million was swept in unused salary and fringe in preparation for the mid-year amendment presented to the Board. The actual amount is \$6.1 million of controlled spending.
- YTD Service Revenue - (\$725,025) below target not including the \$2.5 million reduction in the approved budget that starts in February.
- Daily Billable Service Revenue - \$39,780. Same time last year was \$48,000.
- Fund Balance Composition: Cash - \$7,116,456, AIR - \$14,823,232
- Cash Flow - Beginning Balance - \$9,492,971, Ending Balance - \$7,667,177

b) January 2022 Financials:

- Overall operating gain of \$174,898 for the month. Overall YTD loss - (\$1,335,827). Including the Planned Reserve Expenditures YTD of \$3,734,838 and with all funds recognized the Net YTD gain is \$3,952,155
- Fund Balance Composition: Cash - \$6,370,271, AIR - \$15,523,723
- YTD Revenue Budget Net Gain - (\$1,335,827). The variance of \$9,620,951 of which approximately 95% have none or minimal financial impact due to no cost incurred.
- Strategic Plan Revenues - (\$1,064,088), the equivalent of 12.5%
- Strategic Plan Expenses - (\$805,314), Controlled Spending, the equivalent of 4.9%
- Daily Billable Service Revenue - Daily average target is \$52,642. Averaging \$43,621

through the month of January. Actual is \$46,187 representing about \$2,000 improvement from previous month.

Mr. Guevara noted that in February, the target was missed by \$170,000 and as of March 11, the target was short by \$111,000 in Service Revenue.

- Fund Balance - \$39,108,858,
- Investments in Tex Pool increased 100,203. Interest earned for the month - \$203. Profit margin of 8.8%. Days of Operation – 92.80

Mr. Guevara informed the Board that EHR training is scheduled over the next six weeks and will take staff offline in order to train. He is estimating that reduction in revenue will be about \$365,000 just for the training. After discussing with other member centers, they have experienced a 20 – 30% reduction in productivity. The reason he is stating this is because we are starting to see a downward trend in productivity with training and will also lose capacity due to training and implementation of services. As the system go-live date is June 1, he is going to propose a 25% reduction in productivity in the budget assumptions that are brought to the Finance Committee to approve and move forward in next year's budget process. The productivity change will be reassessed in February. Questions and answers ensued.

Mr. Barrett asked for a motion of acceptance of the Financial Statements. Ms. Whited moved for a motion, Ms. Spencer seconded. Motion carried.

BOARD POLICY COMMITTEE (*Sandee Marion, Chair*)

1. Acceptance of the Revisions to the Bylaws, Board Policy 5.1 Board Annual Self-Assessment and Conflict of Interest, and new Board Policy pertaining to Executive Leadership – *James Chapman*

Mr. Chapman stated the three items would have need approval individually when it comes time to approve. He said that he and General Counsel met with the committee on March 15 and March 31 to review certain Board Policies as part of its annual review process. He said that three of the policies reviewed required material revisions or additions to more clearly reflect regulatory contractual or accreditation standards. The Board Policy Committee had submitted their recommendations to the Executive Committee on April 6 where they were reviewed and approved for consideration by the Board.

Ms. Marion then proceeded to present the recommendations of the policies to the Board of Trustees.

- a. She went over the revisions made to the Bylaws stating it included updating terminology related to substance use disorders, added the Bexar County Sheriff to the Board of Trustees as an Ex-Officio nonvoting member, a requirement that a Trustee must attend orientation before assuming office, revised the reporting obligations to align with legal requirements, and updated indemnification coverage.

Mr. Barret said there is a motion and a second to approve the revised Board Bylaws. Motion carried.

- b. Ms. Marion stated that the required nepotism and nondiscrimination training in the Board's annual refresher training topics were added to Board Policy 5.1 "Board Annual Self-Assessment and Conflict of Interest".

Mr. Barrett asked for a motion to accept the amendment of this policy. Ms. Brown moved for a motion, Ms. Whited seconded.

- c. Ms. Marion stated there is a recommendation for a new Board Policy that pertains to Executive Leadership, which addresses Delegation of Authority, Performance Evaluation, Succession Planning, and Compensation of the President/CEO. It was created to comply with CARF because when CARF did their assessment last year they recommended the Center have this. This is one of the first CARF requirements that the committee has made. They will continue to meet to look at all of the policies.

Mr. Barrett asked for a motion to approve the new Board Policy "Executive Leadership". Ms. Marion moved for a motion, Ms. Whited seconded. Motion carried.

EXECUTIVE SESSION (DISCUSSION ONLY: CLOSE TO THE PUBLIC)

At 7:24 p.m., Mr. Barrett moved the Board into Executive Session per Texas Government Code, Sections:

551.071 (Consultation with General Counsel)

551.072 (Real Estate Matters) – Discuss the sale or lease of CHCS property

551.074 (Personnel Matters) – Discuss the process for CEO performance Evaluation

RECONVENE OPEN SESSION

The Board reconvened into Open Session at 7:40 p.m.
No action was taken in Executive Session.

REPORTS

TEXAS COUNCIL OF COMMUNITY MHMR CENTERS INC. BOARD – *Daniel T. Barrett*

- Mr. Barrett stated he plans to attend the Texas Council Board Meeting next week on April 29 – 30. He also stated that Dallas is looking for a new Executive Director and wanted to look at Ms. Jamison's contract. They also wanted to know what our Board considered for selecting her. The contract was sent.

TEXAS COUNCIL RISK MANAGEMENT FUND BOARD – *Robert Guevara*

- Next meeting is scheduled for May 5, 2022.

TEJAS HEALTH MANAGEMENT BOARD – *Robert Guevara*

- Next meeting is scheduled for June 2, 2022. Mr. Guevara mentioned that Tejas is changing and moving forward. Mr. Guevara believes that in the next two or 3 months Tejas will be

in a situation where we will be able to start talking about paying back our investment. The work that is being done with Superior Healthy at Home, 2700 individuals have been enrolled into that program and Tejas has already received over \$2 million in payment which has helped make Tejas financially stable going forward. At the previous Board Meeting, they adopted a Reserve Policy saying that Tejas will retain at least 90 days of reserves. Then they can start talking about paying back the founding members their contribution. They are helping the Center with a variety of products. One that is very important is DPP that is a part of the Waiver transition. They were able to help the Center decipher the explanation of payments for all MCOs other than Superior to date. In addition, they are looking at having a developer work for Tejas that provides to all the other member centers with the NetSmart product. As he mentioned before, we are going to have to start reporting of the Charity Care Pool in November of this year. Tejas is developing the infrastructures that all the centers can pool their information directly from Tejas to help build our reporting structure to CMS. Hollie Chenault, Interim CEO, was selected as the full-time CEO and is doing a great job.

ADJOURNMENT

There being no further business to discuss, Mr. Barrett called for a motion to adjourn the meeting. Ms. Brown moved for adjournment, Ms. Whited seconded. Meeting adjourned at 7:44 p.m.

Passed and approved this 14 day of June, 2022.



Daniel T. Barrett
Board Chairman



Mary Rose Brown
Board Vice Chair