Pecan Valley Centers
Board of Trustees

August 22, 2025
9:00 a.m. – 11:00 a.m.

MINUTES

Board Members

Edwin Seilheimer, Chair	Hood County	Present
Keith Scarbrough, Vice Chair	Johnson County	Absent
Carolyn Myres, Secretary	Johnson County	Present
Judge Brandon Huckabee	Erath County	Absent
Dr. Reginald Hall	Erath County	Present
Christy Massey	Hood County	Present
Lynn Waddy	Palo Pinto County	Present
Rita Wade	Palo Pinto County	Present
Elizabeth Lawrence	Parker County	Present
Jamie Bodiford	Parker County	Present
LaJean Heard	Somervell County	Absent

Ex-Officio Board Members

Sheriff Roger Deeds	Hood County	Present
Sheriff Alan West	Somervell County	Present

Pecan Valley Centers Staff

Ruben DeHoyos	Executive Director
Gabe Leatherwood	Chief Financial Officer
Kathy McVickers	Controller
Heather Herriage	Director of Human Resources
Jessica Thomas	Executive Assistant
Kristy Tucker	Regional Mental Health Director
Walker Rainwater	Director of Forensic Services
Mark Chavez	Director of IDD Authority Services
Debbie Kreitinger	Director of IDD Provider Services
David Risner	Director of Child & Adolescent Services
Christa Selby	Associate Director of Child & Adolescent Services
Josh Morrison	Director of Veteran and SUD Services
Ben Bowen	Director of IT

Visitors

Stephanie Pennington	Intervention Counselor, Weatherford High School
Sterling Hill	Cumming Group
Mason Alan	Cumming Group

OPENING:

Edwin Seilheimer, Board Chair, called the meeting to order at 9:00 a.m.

ITEM 1: ROLL CALL

A quorum was present as eight board members were in attendance. Two ex-officio members were also present.

ITEM 2: PUBLIC COMMENT

Lynn Waddy, Board Member, shared a message with the Board, regarding a friend or acquaintance. This friend shared that her experience with PVC, specifically the Mineral Wells clinic staff was pleasant toward her and that she was treated very well.

ITEM 3: APPROVE MINUTES OF JULY 25, 2025, MEETING

Minutes from July 25, 2025, meeting was reviewed before the meeting.

Elizabeth Lawrence made the following Motion:

RESOLVED, THAT the Pecan Valley Centers Board of Trustees does hereby approve the minutes of July 25, 2025, meeting, as written.

Second by Lynn Waddy

Approved unanimously

ITEM 4: PRESENTATION: COMMUNITY FEEDBACK REGARDING YOUTH CRISIS RESPITE UNIT

Stephanie Pennington, Intervention Counselor at Weatherford High School, presented the Board with brief review, and youth feedback, regarding the Youth Crisis Respite Unit, during this past Spring semester of the 2024-25 school year.

- First experience:
  After MCOT evaluation and necessary intervention, youth stayed at the YCRU for a few days. The interaction between the school and YCRU coordinator was seamless, to obtain schoolwork for the student to stay on track.
  Student's feedback was that she was pleased with the respite house. She'd like to go back to visit. They were nice to her and helped with her with homework.
- Second experience:
  Student with previous MCOT services, struggles at home, without necessary support, and lack of resources. Inpatient care wasn't needed at the time, but a break from home/life was necessary.

ITEM 5: QUARTERLY PNAC REPORT

The Quarterly PNAC Meeting was held August 7, 2025. There were no recommendations to bring to the Board.

ITEM 6: **PROGRAM REPORTS – BEHAVIORAL HEALTH & INTELLECTUAL DEVELOPMENTAL DISABILITIES**

Ruben DeHoyos, Deputy Executive Director, gave the IDD Report for July 2025.

- IDD Authority Served (met all measures):
  - Authority contract measures: 73
  - Home and Community Based Service (HCS) Coordination: 465
  - Texas Home Living (TxHmL) Service Coordination: 33
  - Community First Choice (CFC) Intake Services: 11
  - PASRR New Alerts: 50
  - Determination of Intellectual Disability: 21
  - State Facility Report-Individuals in any State Supported Living Center: 52
  - IDD Crisis Services: 3
  - The Texas Law Enforcement Telecommunications System: 2
  - HC/TxHmL Interest List regionwide: 1465

- IDD Provider Served (met all measures):
  - Home and Community Based (HCS): 55
  - HCS Group Homes: 8
  - HCS Host Homes: 18
  - HCS Own Home/Family Home: 29
  - Texas Home Living Waiver (TxHmL): 10
  - IDD PASRR Independent Living Skills: 55
  - Intermediate Care Facility (ICF) [six homes / 30 beds]: 34
  - LSC/ISS daily census: 54

Ruben DeHoyos, Deputy Executive Director, gave brief summary of the Performance Outcomes and Behavioral Health Programs for July 2025.

Performance Outcomes:

- Adult Mental Health Services target is 2,929. Pecan Valley Centers served 3174.
- Adult Service Provision for adults shows 70.6%.
- The Child & Youth Services target is 496. Pecan Valley served 477.
- Total Crisis Interventions were 132, with 13 admissions to Crisis Respite, 0 admissions to Youth Crisis Respite and 1 admission into a State MH facility.

Programs:

- TCOOMMI has a target of 20 with a maximum of 25.
  - Intensive Case Managements (ICM) opened: 2
  - Intensive Case Management were served: 23
  - Continuity of Care (COC) was opened: 3
  - Continuity of Care were served: 7

- Mental Health First Aid (MHFA) has a target goal of 300 School District Employees and School Resource Officers / Employees of Institutes of Higher Learning.
    - Total individuals trained to date: 166
    - Scheduled classes: 5
    - Focus is on training new school personnel
- Texas Juvenile Justice Department Grant (TJJD) target varies by county.
    - Juveniles served: 23
- Jailed Based Competency Restoration (JBCR)
    - Waitlist: 17
    - Ordered to JBRC: 2
    - Restored to Competency: 0
    - Discharged: 1
- Coordinated Specialty Care Early Onset (CSC-EO) has a target of 20 with a maximum of 30 and is for persons aged 15 to 30.
    - Individuals served: 18
    - Pending: 1
    - Discharged: 0

  CSC-EO Grant has been renewed for another 2-year contract
- Housing
    - Supported Housing Rental Assistance: 15
    - Tenant-Based Rental Assistance served: 27

Josh Morrison, Director of Veteran and SUD Services, gave the Veterans Services and Substance Use Disorder reports for July 2025.

- Peer Services (FY25 Q4)
    - Total served: 940
    - Peer Services data capturing has been corrected. Therefore VSO/Resource Referral data now shows on target/over target at serving 679.

- Veterans Mental Health (FY26) has a target of 105.
    - Served: 75

- Veterans General Assistance (FY26) has a target of 165.
    - Served: 16

- Outpatient Substance Use Disorder Program (SUD).
    - TRA – Adult w/o Children Admissions: 16
    - TRF – Adult Female w/ Child(ren): 3
    - TRY – Youth Admissions: 0
    - CMHG (Red River Beds): 1

SUD program hired counselor to cover Mineral Wells and Weatherford. New funding grant for SUD services begins September 1, 2025.

Heather Herriage, Director of Human Resources, gave the HR Report for July 2025.

- Consistent trend
  - Total hires: 9
  - Total terms: 13
- Numerous meetings throughout the month on budget, healthcare spending, and retirement

ITEM 7: APPROVE JULY 2025 FINANCIAL STATEMENTS

Gabe Leatherwood, CFO, gave the Financial Report for July 2025.

- The May financial was reviewed. On July 31, 2025, the Region has completed 92% of the fiscal year. Revenue percentages by fund sources range from 65% (Other State Agencies) to 100% (Medicaid Waiver and ICF-MR Earnings). Total revenues earned equals 83% of the annual budget. Based on proposed budgeted expenditures, 87% of the budget has been expensed. Adult Mental Health Services are at 88% of budget. Children's Mental Health Services are at 98% of budget. Mental Health Crisis Services are at 78% of budget. IDD Services are at 91% of budget. Both revenue and expenditures include cost avoidance amounts for PAP (Prescription Assistance Program) as required by HHSC. The budgeted amount is $5,327,107 and through May the recorded PAP amount is 5,112,403.

  Through July 31, 2025, of the current fiscal year, total funding strategy amounted to $32,991,193 for revenues and $33,509,248 for expenditures. Local funds were used to fund various programs in compliance with contract requirements for required "local match" funds.

  Based on activities through May, there are 113 days of operations available cash.

Jamie Bodiford made the following Motion:

RESOLVED, THAT the Pecan Valley Centers Board of Trustees does approve the Financial Statements for July 2025.

Second by Carolyn Myres

Approved unanimously

ITEM 8: APPROVE FY25 BUDGET AMENDMENT

Gabe Leatherwood, CFO, presented the FY25 Budget Amendment.

- Adjust FY25 budget for incentive payout, approved during previous Board meeting.

Christy Massey made the following Motion:

RESOLVED, THAT the Pecan Valley Centers Board of Trustees does approve FY25 Budget Amendment.

Second by Jamie Bodiford

Approved unanimously

ITEM 9: APPROVE FY26 BUDGET AND PERSONNEL SCHEDULE

Gabe Leatherwood, CFO, presented the proposed budget for FY26.

- The proposed budget for FY26 is $43,228,202

Christy Massey made the following Motion:

RESOLVED, THAT the Pecan Valley Centers Board of Trustees does approve the FY26 Budget and Personnel Schedule.

Second by Jamie Bodiford

Approved unanimously

ITEM 10: APPROVE MUCKELROY FALLS CONSTRUCTION PROPOSAL/QUOTE

Removed from the agenda

ITEM 11: APPROVE DESIGNATED CLOSURE DAYS FOR FY26

Ruben DeHoyos, Executive Director presented the designated holiday and closure schedule for FY26.

Elizabeth Lawrence made the following Motion:

RESOLVED, THAT the Pecan Valley Centers Board of Trustees does approve Designated Closure Days for FY26.

Second by Lynn Waddy

Approved unanimously

ITEM 12: Q3 EXTERNAL AUDIT REPORT

Ruben DeHoyos, Executive Director presented the Q3 External Audit Report

- Superior Health Plan performed 1 audit

- HHSC performed 1 audit
- TMHP performed 3 audits

ITEM 13: Q3 CORPORATE COMPLIANCE REPORT

Ruben DeHoyos, Executive Director presented the Q3 Corporate Compliance Report

- No changes to the Corporate Compliance Plans
- Corporate Compliance Officer met with two Case Managers to provide in-service and training on documenting notes.
- Compliance Self-assessment on Pecan Valley Centers was performed to help identify areas for improvement, and to help mitigate risks.
- Complaint Log will be presented to Board in Closed Session during September meeting.

ITEM 14: OVERVIEW OF GRANBURY CLINIC CONSTRUCTION PROJECT

Ruben DeHoyos, Executive Director introduced Sterling Hill, Project Manager from Cumming Group to give an overview of current stages of the Granbury Clinic Construction Project.

- Construction Plat approved 8/21/2025
- Public works inspection has been done for temporary permit. Official building permit will be issued after passing inspection scheduled 10/07/2025.
- Muckleroy & Falls estimate building completion to be August/September 2026

Announcement: Groundbreaking event scheduled 8/22/2025 from 11:30-12:00 on new site.

ITEM 15: CLOSED EXECUTIVE SESSION IN ACCORDANCE WITH THE OPEN MEETINGS ACT, TEXAS GOVERNMENT / CODE SECTION 551.074 PERSONNEL MATTER

In accordance with the open meetings act, Texas government code 551.074 Personnel Matters, the board entered into Closed Executive Session at 10:05 a.m. and reconvened in open session at 10:19 a.m.

No action was taken during Closed Executive Session.

ITEM 16: ACTIVITY SUMMARY

The Activity Summaries are provided to the Board to show the events that took place in the reported month(s). No action is required.

ITEM 17: PLANNING CALENDAR

The Annual Planning Calendar is provided to the Board to reference upcoming meetings and other noteworthy conferences for the calendar year. No action required.

ITEM 18: REAFFIRM DATE OF NEXT BOARD MEETING

- Next Board meeting will be held on September 26, 2025, at the Granbury Administration Office

Adjourned at 10:25 a.m.

Carolyn Myres – Secretary