

Board of Trustees Meeting

Wednesday, February 8, 2023 6:30 p.m.

Via Zoom Technology

Packet #1

NLACRC Board of Trustees Calendar Fiscal Year 2022-23

~ February 2023 ~ ■ January March ▶						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1 3:00 pm Consumer Advisory Committee Meeting	9:30 am Vendor Advisory Committee Meeting (break-out groups)	3	4
5	6 6:00 pm Strategic Planning Committee Meeting	7	8 5:30 pm Board Packet Review (Zoom) 6:30 pm Board Meeting (Zoom)	9	10	11
12	13	14 Valentine's Day	15 6:00 pm Consumer Services Committee Meeting	16	17	18
19		21 6:00 pm Board Training- Vendorization, Quality Assurance & Resources Development	22 6:00 pm Administrative Affairs Committee Meeting 7:30 pm Executive Committee Meeting	23	24	25
26	27 5:30 pm Nominating Committee Meeting	28				

NLACRC Board of Trustees Calendar Fiscal Year 2022-23

~ March 2023 ~						
▼ February Sun	Mon	Tue	Wed	Thu	Fri	April I
			1 Ash Wednesday 3:00pm Consumer Advisory Committee Meeting 5:30 pm Nominating Committee meeting	2 9:30 am Vendor Advisory Committee	3	4
5	6 Purim (begins at sundown)	7 Purim (no work)	8 5:30 pm Board Packet Review (Zoom) 6:30 pm Board Meeting (Zoom)	9	10	11
12	13	14	15 6:00 pm Government/Community Relations Committee Meeting	16	17 Saint Patrick's Day	18
19	20	21	22	23	24	25
26	27	28	29 6:00 pm Administrative Affairs Committee Meeting 7:30 pm Executive Committee Meeting	30	31	

North Los Angeles County Regional Center Board of Trustees Meeting - Via Zoom Wednesday, February 8, 2023 6:30 p.m.

~ AGENDA ~

- 1. Call to Order & Welcome Ana Quiles, Board President
- 2. Housekeeping
 - A. Spanish Interpretation Available
 - B. Public Attendance (please note name in Chat)
 - C. Board Support Updates
- 3. Board Member Attendance Lizeth Chavez, Executive Administrative Assistant
- 4. Introductions
 - A. Nicholas Abrahms, Board of Trustees Member
 - B. Silvia Renteria-Haro, Consumer Services Manager
- **5. Public Input & Comments** (3 minutes)
- 6. Consent Items
 - A. Approval of Agenda (Page 4)
 - B. Approval of January 11, 2023 Board Meeting Minutes
- 7. Self Determination Program & Local Volunteer Advisory Committee Presentation Silvia Renteria-Haro (Page 8)
- 8. Committee Action Items
 - A. Administrative Affairs Committee– David Coe
 - 1. Approval of Contracts
 - a. **24Hr Homecare PL2137-102** (Page 26)
 - b. Liberman-Bert, Lucia PL0496-625 (Page 30)
 - c. Ultra Jiu Jitsu PL2144-008 (Page 34)
 - d. Keolis Transit Services, LLC HL0810-875 & PL1667-882 (Page 38)
 - 2. Approval of Revised Critical Calendar (Page 52)

- B. Executive Committee Ana Quiles
 - 1. Approval of SDP Liaison Responsibilities Board of Trustees Policy Statement (Page 54)
 - 2. Approval of Revised NLACRC 2023-2024 Performance Contract (Page 55)
 - 3. Approval of Revised Code of Conduct Board Policy (Page 83)
 - 4. Approval of Commencing Board and Committee Hybrid Meetings
 - 5. ARCA *draft* Strategic Plan Review for feedback due by March Board Meeting (Page 86)
 - 6. Executive Director Evaluation Form Clarence Foster (Page 96)
- C. Government & Community Relations Committee Jordan Feinstock
 - 1. Approval of Annual Spring Legislative Events Critical Calendar (Page 105)
- 9. Executive Director's Report Ruth Janka (Page 107)
- 10. Self-Determination Program (SDP) Report Gabriela Eshrati (Page 133)
 - A. SDLVAC Liaison Report (Page 139)
- 11. Administrative Affairs Committee David Coe
 - A. Minutes of the January 25, 2023 Meeting
 - B. FY2022-2023 Financial Report (Attachment 1)
 - C. Monthly Human Resources Reports (Attachment 2)
 - D. Change in In-Home Respite Worker Rates and Mileage Reimbursement Rates effective January 1, 2023 (Page 140)
- 12. Association of Regional Center Agencies Lety Garcia
 - A. ARCA Liaison Report (Page 144)
- **13. Consumer Advisory Committee** Jennifer Koster
 - A. Minutes of the February 1, 2023 Meeting (Page 145)
- 14. Consumer Services Committee Andrew Ramirez
 - A. Next Meeting Scheduled on February 15, 2023 at 6:00pm
- **15. Executive Committee** Ana Quiles
 - A. Minutes of the January 25, 2023 Meeting
 - B. FY2022-23 Board vs Expenditures (Page 148)
 - C. National Core Indicators (NCI) Evelyn McOmie

- 1. 2019-2020 NCI Family Guardian Survey (Page 149)
- 2. 2019-2020 NCI Adult Family Survey (Page 173)

16. Government & Community Relations Committee – Jordan Feinstock

- A. Minutes of the January 18, 2023 Meeting
- B. Next Meeting on March 15, 2023 at 6:00pm

17. Nominating Committee – Lillian Martinez

- A. Status of Board and VAC Recruitment
- B. Interest and Recommendations in Serving as a Board Officer, ARCA Delegate, ARCA Alternate, CAC Chair or CAC Vice-Chair in FY2023-24

18. Post-Retirement Medical Trust Committee – Ana Quiles

- A. Minutes of the January 25, 2023 Meeting
- B. Statement of Current PRMT Trust Value (Page 197)
- C. Statement of Current CalPERS UAL Trust Value (Page 201)

19. Strategic Planning Committee – Lety Garcia

- A. Minutes of the February 6, 2023 Meeting defer
- B. Next Meeting Scheduled on May 1, 2023 at 6:00pm

20. Vendor Advisory Committee – Suad Bisogno

- C. Minutes of the January 5, 2023 Meeting (Page 202)
- D. Minutes of the February 2, 2023 Meeting defer

21. Old Business/New Business

- A. Board and Committee Meeting Attendance Sheets (Page 213)
- B. Board and Committee Meetings Time Report (Page 223)
- C. Updated Acronyms Listing (Page 226)
- D. Meeting Evaluation Form fillable (Page 232)

22. Announcements/Information/Public Input

- A. Next Meeting: Wednesday, March 8, 2023 at 6:30pm
- B. Public Meeting Attendance (Page 233)
- C. Virtual Cafecito Entre Nos, February 9th at 11;00 am
- D. Virtual Alianza de Hombres, February 14th at 7:00 pm
- E. FFRC Advanced IEP Workshop, February 14th & 15th at 11:00 am
- F. Virtual Aprendiendo Entre Nos, February 16th at 10:00 am
- G. Different Thinkers, Different Learners, February 28th at 10:00 am

	Please refer to NLACRC's website for the Calendar of Events, which includes a link for the Family Focus Resource Center, for information regarding more support groups, training opportunities, dates, times, and links – www.nlacrc.org
23.	Adjournment

Training on the Role of the NLACRC Self-Determination Advisory Committee

BY DISABILITY VOICES UNITED AUGUST 1, 2022





What is the Self-Determination Local Volunteer Advisory Committee?

The Self-Determination Law provides for community oversight by establishing local and statewide advisory committees for the Self-Determination Program

➤ Sometimes called LVAC or SDAC





The Local Self-Determination Advisory Committees

- ➤ Each regional center shall establish a local volunteer advisory committee to provide <u>oversight</u> of the Self-Determination Program and identify a regional center liaison to the committee.
- The regional center and the State Council on Developmental Disabilities shall each appoint one-half of the membership of the committee.
- Members are volunteers and are not paid to serve on the committee.
 DISA



The Local Self-Determination Advisory Committees

- ➤ The committee shall consist of the clients' rights advocate (DRC), consumers, family members, and other advocates, and community leaders, including a representative from a family resource center.
- ➤ A majority of the committee shall be consumers and their family members.
- The committee shall reflect the multicultural diversity and geographic profile of the catchment area.





The Local Self-Determination Advisory Committees

- ➤ The Self-Determination Law does not discuss:
 - How many years a committee member serves or whether there are term limits
 - ➤ Whether a committee elects a chair or what the process is for the selection; there just needs to be a chair
 - > If there should be a vice-chair, secretary, or any other committee officers
 - ➤ How elections should work for any officers
 - ➤ Whether you use Robert's Rules of Order or by-laws
 - Whether committee members can remain on the committee if they don't show up to meetings



The Role of Local Self-Determination Advisory Committees

The committee shall review the development and ongoing progress of the Self-Determination Program including:

- 1. Whether the program advances the principles of self determination
- 2. Is operating consistent with the requirements in the law
- 3. May make ongoing recommendations for improvement to the regional center and the department





- 1. Whether the program advances the principles of self determination
 - Freedom
 - Authority
 - Support
 - Responsibility
 - Confirmation





- (A) Freedom, which includes the ability of adults with developmental disabilities to exercise the same rights as all citizens; to establish, with freely chosen supporters, family and friends, where they want to live, with whom they want to live, how their time will be occupied, and who supports them; and, for families, to have the freedom to receive unbiased assistance of their own choosing when developing a plan and to select all personnel and supports to further the life goals of a minor child.
- (B) Authority, which includes the ability of a person with a disability, or family, to control a certain sum of dollars in order to purchase services and supports of their choosing.
- (C) Support, which includes the ability to arrange resources and personnel, both formal and informal, that will assist a person with a disability to live a life in his or her community that is rich in community participation and contributions.
- (D) Responsibility, which includes the ability of participants to take responsibility for decisions in their own lives and to be accountable for the use of public dollars, and to accept a valued role in their community through, for example, competitive employment, organizational affiliations, spiritual development, and general caring of others in their community.
- (E) Confirmation, which includes confirmation of the critical role of participants and their families in making decisions in their own lives and designing and operating the

system that they rely on.

2. Is operating consistent with the requirements in the law

- > Must understand the SD law
- ➤ Stay on top of DDS Directives
- > DDS FAQs
- ➤ DDS website
- ➤ Get on DDS's SDP mailing list





- 3. Make ongoing recommendations for improvement to the regional center and the department
 - ➤ Gather information Public comment at monthly meetings
 - ➤ Gather information Support groups, grantees, IFs, FMSs
 - Ensure the voice of self-advocates
 - Committee-centered plan
 - > Regular meetings with RC staff
 - Meetings with Ombudsperson, DDS SD staff
 - > Advisory only; no micro-managing





What are the current Bagley-Keene requirements?

- SB 189 and DDS Directive July 22, 2022
- ➤ Teleconference meetings permitted, quorum requirements suspended through July 1, 2023, but still required to:
 - ➤ Give at least 10 days notice on RC website and sent to committee members and public with agenda items, with brief description, and time and date of meeting.
 - Offer instructions on opportunities for public comment.
 - How to obtain a disability-related accommodation and/or interpreter or facilitator.





**If the Department decides to end teleconference meetings, meetings will need to resume in-person and address of meeting location needs to be posted.

How to Make Public Comment Work Well

- Public comment required at all meetings
- Committees are not required to have a specific public comment period
- Can designate 30 minutes of meeting to hear from participants, families, stakeholders
- ➤ Don't need to time people but ask them to keep it brief.
- Learn to gently interrupt a person, validate their concerns, offer to follow up if appropriate, and move on

How to Run a Good Committee Meeting

- Make sure to have a modest agenda to keep to the end time of the meeting
- Chair needs to be familiar with agenda and move through items efficiently
- Use the Committee-Centered Plan as a guide for your agenda priorities
- Ask grantees to provide a brief written report before each meeting and then ask questions at meeting



Distribution of Funds to Support Implementation of SDP

- Required collaboration between LVAC and RC
- Priorities: Meet needs of participants, increase service access & equity, reduce disparities, and implement the program including:
 - > Recruiting and training of IFs with focus on bilingual and bicultural
 - > Joint training for participants, families, RC staff, LVAC members with a focus on underrepresented communities
 - Support/coaching for transition
 - Assistance with spending plan development
 - Collaborative groups/workshops to foster ongoing shared learning and problem-solving opportunities



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Additional identified needs

2/11/22 DDS Guidance: https://www.dds.ca.gov/wp-content/uploads/2022/02/DDS_Guidance_SDP_RCParticipantSupports_02112022.pd

Distribution of Funds to Support Implementation of SDP

Recruiting and training of IFs

Includes recruitment, development and provision of training, translation

Joint training

> Development and provision of training, translation

Assistance with spending plan development

Consultation with coach or FMS

Support/coaching for transition

> Assistance with selecting FMS, suggestions for recruiting staff, etc

Collaborative groups/workshops

Presenters' travel, translation, materials, meeting space expenses



Statewide Self-Determination Advisory Committee

- ➤ The State Council on Developmental Disabilities forms and convenes
- Comprised of the chairs of the 21 local advisory committees or their designees.
- > The committee meets twice a year or more frequently





The Role of Statewide Self-Determination Advisory Committee

- > The council shall synthesize information received from the following:
 - Statewide Self-Determination Advisory Committee
 - Local advisory committees
 - Other sources
- ➤ Share the information with consumers, families, regional centers, and the Department of Developmental Services (DDS)
- ➤ Make recommendations, as appropriate, to increase the program's effectiveness in furthering the principles of self-determination.







NLACRC - VENDOR CONTRACT REQUEST - EXECUTIVE SUMMARY

24 Hr Homecare

Vendor #: PL2137 Svc Code: 102, Individual and Family Training Date: 1/20/23

Other Vendorizations with Vendor's Tax Identification Number (TIN):

Vendor #	Service Code	Description
PL1212	062	Personal Assistance
PL1447	455	Participant-Directed Day Care
PL1445	465	Participant-Directed Respite
PL1146	470	Participant-Directed Transportation
PL1213	490	Financial Management Service
PL1214	491	Financial Management Service
HL0629	862	In-Home Respite Services

Service Address: 16501 Ventura Blvd. Suite 400 Encino, CA 91436

Service Description: This program is an 'en vivo' model with training, coaching, and facilitation of inclusive social and recreational activities being 100% home and community based. Activities must be person-centered and chosen by the person served based on their individual interests and preferences. The goal is to improve social and recreational skills and accessibility while having fun and feeling fully supported.

Actual activities will be driven by the person-served and must align with the number of hours of service authorized by NLACRC. Staff will assist persons served to access activities including, but not limited to, the following:

- Community parks, recreation classes, or senior centers (if age appropriate)
- Gym or fitness activities
- Community clubs (Rotary club, Toastmasters, etc.)
- Art or creative classes, Virtual classes and activities
- Social meetups with friend (mall, shopping, group activities, etc.)
- Niche interests (photography, bird watching, community garden, etc.)
- Attending community events (movie nights, parades, festivals, etc.)
- Community volunteer opportunities

Service Area: San Fernando Valley

Staffing: 24Hr Homecare offers 1:1 one staff to 1 consumer. In some circumstances, a higher ratio may be requested for siblings served by NLACRC that would like to participate together.

Employment Component: n/a

Exceptional Conditions: n/a



North Los Angeles County Regional Center

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Contract Summary and Board Resolution

No.	Description	Contract Summary
1.	Contract Overview: (New or Amendment) (POS or OPS)	New Nonresidential Negotiated Rate Agreement, Purchase of Services (POS)
2.	The Name of Vendor or Service Provider	24Hr HomeCare, LLC Vendor Number: PL2137; Service Code: 102
		The service provider will provide Individual or Family Training services pursuant to Title 17, Section 54356 and the DDS published guidelines regarding Miscellaneous Services revised 05/10/2010.
3.	The Purpose of the Contract	A regional center shall classify a vendor as a Individual or Family Training provider if the vendor provides, or obtains, training services to consumers and/or their family members as necessary to implement an objective in the individual's IPP and for which an existing Title 17 service code is unavailable.
		The service provider is primarily engaged in providing social recreation activity services through this service code 102 vendorization.
4.	The Contract Term	Two (2) year contract effective February 1, 2023 through January 31, 2025.
		Projected annual cost is \$310,536.00 per year, or \$621,072.00 over the entire two (2) year term of the contract based on a cost statement.
5.	The Total Amount of the Contract	The projected annual cost is based on the \$27.24 hourly rate and the projected 25 hours per month per consumer for a projected 38 consumers per month.
6.	The Total Proposed Number of Consumers Served	Projected 38 consumers per month.

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7.	The Rate of Payment or Payment Amount	Payment will be reimbursed to service provider based on 1) the actual services authorized; 2) the actual services provided; and 3) the authorized \$27.24 hourly rate.
8.	Method or Process Utilized to Award the Contract.	Based on vendorization requirements under statute and regulation for Individual or Family Training services.
9.	Method or Process Utilized to Establish the Rate or the Payment Amount	Negotiated hourly rate of \$27.24 is based on a cost statement. The rate negotiated complies with WIC, Section 4691.9 (b) which states that effective July 1, 2008 "no Regional Center may negotiate a rate with a new service provider, for services where rates are determined through a negotiation between the Regional Center and the provider, that is higher than the Regional Center's median rate for the same service code and unit of service, or the statewide median rate for the same service code and unit of service, whichever is lower." The provider's requested cost is higher than the NLACRC median rate of \$27.24. Provider will accept the maximum allowable rate and adjust DSP pay rate and other costs for program sustainability.
10.	Exceptional Conditions or Terms: Yes/No If Yes, provide explanation	None

The North Los Angeles County Regional Center's ("NLACRC") Administrative Affairs Committee reviewed and discussed the above Nonresidential Negotiated Rate Agreement ("Contract") and is recommending an action of the Board of Trustees to <u>Approve</u> the Contract.

	January 25, 2023
David Coe, Board Treasurer	Date

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Contract Summary and Board Resolution

The North Los Angeles County Regional Center's ("NLACRC") Board of Trustees reviewed and discussed the Nonresidential Negotiated Rate Agreement ("Agreement", or "Contract") for 24Hr HomeCare, LLC and passed the following resolution:

RESOLVED THAT in compliance with NLACRC's Board of Trustees Contract Policy, the Agreement between NLACRC and 24Hr HomeCare, LLC was reviewed and approved by NLACRC's Board of Trustees on **February 8, 2023.**

NLACRC's Board of Trustees hereby authorizes and designates any officer of NLACRC to finalize, execute and deliver the Contract on behalf of NLACRC, in such form as NLACRC's legal counsel may advise, and on such further terms and conditions as such Officer may approve. The final terms of the Contract shall be conclusively evidenced by the execution of the Contract by such Officer. For purposes of this authorization, an "Officer" means NLACRC's Executive Director, Chief Consumer and Community Services Officer, Chief Financial Officer, Chief Human Resources Officer, or Chief Information Officer, and no one else.

<u>Certification by Secretary</u>: I certify that: (1) I am the Secretary of the NLACRC; (2) the foregoing Resolution is a complete and accurate copy of the Resolution duly adopted by NLACRC's Board of Trustees; (3) the Resolution is in full force and has not been revoked or changed in any way.

	February 8, 2023
Lillian Martinez, Board Secretary	Date

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NLACRC - VENDOR CONTRACT REQUEST - EXECUTIVE SUMMARY

Lucia Liberman-Bert, MS, MFT

Vendor #: PL0496 Svc Code: 625, Counseling Date: 1/20/23

Other Vendorizations with Vendor's Tax Identification Number (TIN):

Vendor #	Service Code	Description
n/a		

Service Address: 13302 Hatteras St. Van Nuys, CA 91401

Service Description: Ms. Liberman-Bert provides counseling to individuals related to familial relationships and consumer's developmental disability. She provides talk therapy and assistance within the context of marriage and family systems related to helping with communication, acceptance and coping mechanisms related to anxiety, depression, grief, relationship concerns, and anger. She provides services in English and Spanish at her office or at the consumer's home depending on preference.

Service Area: San Fernando Valley

U&C Rate Comparison: License #, cost, location

- LMFT 97781, \$90/hour, Chatsworth, CA telehealth only
- LMFT 111264, \$125/hour, Chatsworth, CA telehealth only
- LMFT 26018, \$150/hour, Chatsworth, CA
- LMFT 122850, \$175-200/hour, Chatsworth, CA

Median Rate: Service code 625 has a median rate of \$50.99/hour effective January 1, 2023. None of the current NLACRC service providers have a rate based on this median rate.

Current rates for four (4) other NLACRC service code 625 providers:

Res#.	Hourly Rate	Qualification	Service Type	Rate Established	Rate Source
PL0789	\$40.42	LMFT	Behavior Management	08/01/2007	Usual & Customary rate
PL1775	\$150	LMFT	Individual/family counseling	06/01/2019	Usual & Customary rate
PL0168	\$86.79	LMFT	Individual/family counseling	07/01/2006	Negotiated rate established prior to 2008 median rate implementation
PL1089	\$52.01	LMFT	Healthy Relationships/Sexual Boundaries group	11/01/2010	Negotiated rate established prior to 2008 median rate implementation

Staffing: n/a, Employment Component: n/a

Exceptional Conditions: Vendor originally vendored effective August 14, 2004 with NLACRC upon move to catchment area from FDLRC. NLACRC maintained \$70.00 per session rate as vendored with FDLRC. Rate increased from \$70 to \$80 effective July 1, 2007. Provider has requested rate increase to match rate charged to general public, which has increased to \$150 effective January 1, 2023.



North Los Angeles County Regional Center

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Contract Summary and Board Resolution

No.	Description	Contract Summary
1.	Contract Overview: (New or Amendment) (POS or OPS)	New, Professional Services Agreement Purchase of Services (POS)
2.	The Name of Vendor or Service Provider	Lucia Liberman-Bert, MS, MFT PL0496-625
3.	The Purpose of the Contract	The service provider will provide Counseling services pursuant to Title 17, Section 54342. The service provider will provide Counseling services, and is primarily engaged in providing in-home individual Counseling.
4.	The Contract Term	Five (5) year contract effective February 1, 2023 through January 31, 2028.
5.	The Total Amount of the Contract	Projected annual cost is \$72,000 per year, or \$360,000 over the entire five (5) year term of the contract based on projected 8 consumers with 5 hours per month with a rate of \$150.00 per hour.
6.	The Total Proposed Number of Consumers Served	Projected 8 consumers per month.
7.	The Rate of Payment or Payment Amount	Payment will be reimbursed to service provider based on 1) the actual services authorized; 2) the actual services provided; and 3) the authorized Usual & Customary (U&C) rate.
8.	Method or Process Utilized to Award the Contract.	Based on vendorization requirements under statute and regulation for Counseling services.
9.	Method or Process Utilized to Establish the Rate or the Payment Amount	The maximum rate of reimbursement shall be in accordance with the Usual & Customary rate, 17 CCR, Section 57332(a)(9). The NLACRC median rate for service code 625 is \$50.99 per hour. However, provider qualifies for usual & customary rate per 17 CCR, Section 57332(a)(9) and 17 CCR, Section 57210(a)(19).

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10.	Exceptional Conditions or Terms: Yes/No If Yes, provide explanation	Vendor was originally vendored by NLACRC effective date of August 14, 2004 at the rate established by FDLRC of \$70.00 per session followed by a rate increase to \$80.00 on 07/01/2007. U&C rate that provider charges to general public has since increased to \$150.00 leaving the provider no longer able to continue to provide services for NLACRC consumers at \$80.00 rate.
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The North Los Angeles County Regional Center's ("NLACRC") Administrative Affairs Committee reviewed and discussed the above Professional Services Agreement ("Contract") and is recommending an action of the Board of Trustees to <u>Approve</u> the Contract.

	January 25, 2023
David Coe, Board Treasurer	Date

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Contract Summary and Board Resolution

The North Los Angeles County Regional Center's ("NLACRC") Board of Trustees reviewed and discussed the Professional Services Agreement ("Agreement", or "Contract") for Lucia Liberman-Bert, MS, MFT and passed the following resolution:

RESOLVED THAT in compliance with NLACRC's Board of Trustees Contract Policy, the Agreement between NLACRC and Lucia Liberman-Bert, MS, MFT was reviewed and approved by NLACRC's Board of Trustees on **February 8, 2023**.

NLACRC's Board of Trustees hereby authorizes and designates any officer of NLACRC to finalize, execute and deliver the Contract on behalf of NLACRC, in such form as NLACRC's legal counsel may advise, and on such further terms and conditions as such Officer may approve. The final terms of the Contract shall be conclusively evidenced by the execution of the Contract by such Officer. For purposes of this authorization, an "Officer" means NLACRC's Executive Director, Chief Consumer and Community Services Officer, Chief Financial Officer, Chief Human Resources Officer, or Chief Information Officer, and no one else.

<u>Certification by Secretary</u>: I certify that: (1) I am the Secretary of the NLACRC; (2) the foregoing Resolution is a complete and accurate copy of the Resolution duly adopted by NLACRC's Board of Trustees; (3) the Resolution is in full force and has not been revoked or changed in any way.

	February 8, 2023
Lillian Martinez, Board Secretary	Date

PL0496-625 Page 3 of 3

NLACRC – VENDOR CONTRACT REQUEST – EXECUTIVE SUMMARY

Ultra Jiu Jitsu Academy

Vendor #: PL2144 Svc Code: 008, Sports Club Date: 1/19/23

Other Vendorizations with Vendor's Tax Identification Number (TIN):

Vendor #	Service Code	Description
n/a		

Service Address: 26069 Bouquet Canyon Road, Santa Clarita, CA 91350

Service Description: UJJA teaches Jiu Jitsu (a martial art) and self-defense.

Jiu Jitsu is a highly skillful martial art that involves the use of leverage, angles, pressure, and timing to get an opponent to the ground and control him/her, then forcing him/her to submit by applying chokes or joint locks—there is no striking (e.g., punches, kicks). Jiu Jitsu has two main forms, GI (wearing a kimono) and No-Gi (wearing a rashguard/T-shirt and shorts); No-Gi Jiu Jitsu is commonly called grappling. Originating in Japan, Jiu Jitsu was created to enable a smaller, weaker person to defend against, or even defeat, a larger and stronger opponent. Jiu Jitsu techniques can be learned and practiced by kids, adults, and seniors regardless of size, strength, or physical limitation—Jiu Jitsu can be enjoyed by everyone!

Jiu Jitsu is both a mental and physical workout that optimizes strength, endurance, balance, coordination, flexibility, self-control, and the ability to strategize and remain calm whilst under pressure—Jiu Jitsu is often referred to as chess for the body.

In addition to our live (in-person) classes, members also have access to our proprietary online curriculum (technique videos, pictures, and written descriptions).

Service Area: Santa Clarita Valley

U&C Rate Comparison:

- The Edge Martial Arts, \$149/M for children and adults
- Gracie Jiu-Jitsu Santa Clarita, \$150/M for children and adults
- Check Mat Valencia, \$199/M adults, \$169/M children; \$99/M equipment fee

Median Rate: Service code 008 does not have a median rate.

Staffing: n/a

Employment Component: n/a

Exceptional Conditions: n/a



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Contract Summary and Board Resolution

No.	Description	Contract Summary	
1.	Contract Overview: (New or Amendment) (POS or OPS)	New Professional Services Agreement, Purchase of Services (POS)	
2.	The Name of Vendor or Service Provider	Ultra Jiu Jitsu Inc. Vendor Number: PL2144 Service Code: 008	
3.	The Purpose of the Contract	The service provider will provide Sports Club services pursuant to Title 17, Section 54356 and the DDS published guidelines regarding Miscellaneous Services revised 05/10/2010. The service provider will provide Sports Club services for individuals with developmental and other disabilities who seek to improve or maintain physical, cognitive, and social wellbeing through the provision of a structured, supervised learning experience in a healthy, supportive, and culturally sensitive environment. The service provider is primarily engaged in providing jiu jitsu martial arts classes. Classes for children are provided at a maximum 1 coach to 6-8 student ratio and adult classes are provided at 1 coach to 10-20 student ratio. Monthly membership requires a minimum of one class per week attendance.	
4.	The Contract Term	Five (5) year contract effective 02/01/2023 through 01/31/2028.	
5.	The Total Amount of the Contract	Projected annual cost is \$40,350.00 per year, or \$201,750.00 over the entire five (5) year term of the contract based on provider's Usual & Customary rates. 21 consumers x \$160/month = \$3,360/M	

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6.	The Total Proposed Number of Consumers Served	Projected 21 consumers per month.
7.	The Rate of Payment or Payment Amount	Payment will be reimbursed to service provider based on 1) the actual services authorized; 2) the actual services provided; and 3) the authorized Usual & Customary rates.
8.	Method or Process Utilized to Award the Contract.	Based on vendorization requirements under statute and regulation for Sports Club services.
9.	Method or Process Utilized to Establish the Rate or the Payment Amount	Pursuant to 17 CCR, Section 57210(a)(19), the phrase "usual and customary rate" ("U&C Rate") means the rate which is regularly charged to the general public by a vendor for a service that is used by both regional center consumers and/or their families and where at least 30% of the recipients of the given service are not regional center consumers or their families. There is not a median rate for service code 008.
10.	Exceptional Conditions or Terms: Yes/No If Yes, provide explanation	None

The North Los Angeles County Regional Center's ("NLACRC") Administrative Affairs Committee reviewed and discussed the above Professional Services Agreement ("Contract") and is recommending an action of the Board of Trustees to <u>Approve</u> the Contract.

	January 25, 2023
David Coe, Board Treasurer	Date

PL2144-008 Page 2 of 3



North Los Angeles County Regional Center

Main 818-778-1900 • Fax 818-756-6140 | 9200 Oakdale Avenue #100, Chatsworth, CA 91311 www.nlacrc.org

Contract Summary and Board Resolution

The North Los Angeles County Regional Center's ("NLACRC") Board of Trustees reviewed and discussed the Professional Services Agreement ("Agreement", or "Contract") for Ultra Jiu Jitsu Inc. and passed the following resolution:

RESOLVED THAT in compliance with NLACRC's Board of Trustees Contract Policy, the Agreement between NLACRC and Ultra Jiu Jitsu Inc. was reviewed and approved by NLACRC's Board of Trustees on **February 8, 2023.**

NLACRC's Board of Trustees hereby authorizes and designates any officer of NLACRC to finalize, execute and deliver the Contract on behalf of NLACRC, in such form as NLACRC's legal counsel may advise, and on such further terms and conditions as such Officer may approve. The final terms of the Contract shall be conclusively evidenced by the execution of the Contract by such Officer. For purposes of this authorization, an "Officer" means NLACRC's Executive Director, Chief Consumer and Community Services Officer, Chief Financial Officer, Chief Human Resources Officer, or Chief Information Officer, and no one else.

<u>Certification by Secretary</u>: I certify that: (1) I am the Secretary of the NLACRC; (2) the foregoing Resolution is a complete and accurate copy of the Resolution duly adopted by NLACRC's Board of Trustees; (3) the Resolution is in full force and has not been revoked or changed in any way.

	February 8, 2023
Lillian Martinez, Board Secretary	Date

PL2144-008 Page 3 of 3

NLACRC - VENDOR CONTRACT REQUEST - EXECUTIVE SUMMARY

Keolis Transit Services, LLC

Vendor #: HL0810-875, transportation services; PL1667-882, attendant services Date: 2/3/23

Other Vendorizations with Vendor's Tax Identification Number (TIN):

Vendor #	Service Code	Description
n/a		

Service Address: 14633 Keswick Street, Van Nuys, CA 91405

Service Description: Keolis Transit Services, LLC provides specialized transportation services (HL0810-875) for both the San Fernando and Santa Clarita Valleys. Keolis provides all aspects of operations to ensure service is safe, timely and comfortable. Service is provided with 20-passenger ADA accessible wheelchair vehicles. Attendant services (PL1667-882) are also provided to ensure safety of the passengers, per IPP needs and request of NLACRC.

Service Area: San Fernando Valley and Santa Clarita Valley

U&C Rate Comparison:

- HL0733-875 rate is \$474.81 per vehicle service day, 4 hours minimum (\$118.70/hour)
- PL1509-882 rate is \$215.55 per attendant service day, 4 hours minimum (\$53.89/hour)

Provider has similar local contracts with municipal transit authorities, but reimbursement is not comparable as the vendoring entity (regional civic/government agency) provides vehicles, fuel, and physical plant, such as offices and fleet yards. Service provider has contracts with local municipalities, such as Foothill Valley Transit and Victor Valley Transit authority.

Median Rate: There is not a per vehicle service hour median rate (service code 875) or attendant service hour median rate (service code 882).

Staffing: All bus operators, regardless of their experience, will undertake a driving course before commencing duties. Experienced bus operators will be assessed on their driving skills, including the way they drive in relation to safety, and their knowledge of road traffic regulations. If they do not meet Keolis' stringent requirements, they will be sent for corrective training. New bus operators will be systematically trained to meet Keolis' driver requirements. Each bus operator will also be taught where potentially dangerous locations are when they learn a route, and how to drive safely in these locations.

Attendants are assigned to specific routes for the purpose of assisting and monitoring consumers receiving Keolis' transportation services.

Keolis' basic Operator Education Program (OEP) includes 120 hours core curriculum, with specific training which fits the needs of each location.

NLACRC - VENDOR CONTRACT REQUEST - EXECUTIVE SUMMARY

Keolis Transit Services, LLC

Vendor #: HL0810-875, transportation services; PL1667-882, attendant services Date: 2/3/23

Employment Component: n/a

Exceptional Conditions: Vendor originally vendored effective September 10, 2007. Current negotiated rate services for contract ending February 28, 2023 are \$73.15 per vehicle service hour* for San Fernando Valley services, \$102.67 per vehicle service hour for Santa Clarita Valley services, and \$26.76 per vehicle service hour for attendant services.

^{*}Note: The SFV HL0810-875 rate of \$73.15 per vehicle service hour, effective since January 1, 2020, does not include any increase from the 2019 rate study implementation.

Contract Summary and Board Resolution

No.	Description	Contract Summary
	Contract Overview:	Renewal Agreement for Transportation Services,
1.	(New or Amendment) (POS or OPS)	Purchase of Services (POS)
	The Name of Vendor or Service	Keolis Transit Services, LLC HL0810-875, transportation services
2.	Provider Provider	PL1667-882, transportation assistant
3.	The Purpose of the Contract	The service provider will provide Transportation and Transportation Attendant services pursuant to Title 17, Sections 58500 - 58570. Service provider provides transportation services in both the San Fernando and Santa Clarity Valleys, and provides transportation attendant services for specific routes or consumers depending on identified needs per request of NLACRC.
4.	The Contract Term	Two (2) year contract effective March 1, 2023 through February 28, 2025.
5.	The Total Amount of the Contract	Projected annual cost is based on February 2020 service month of 13,282.00 vehicle service hours, 8,644.50 attendant service hours, and 199,653.63 route miles for fuel provisions for San Fernando Valley services and 649 vehicle service hours and 14,108.16 route miles for fuel provisions for Santa Clarita Valley services. The rate structure increases the rates by 5% CPI per year. Therefore, the cost per year increases from \$23,179,791.11 to \$24,289,981.86 per year over the course of the two (2) years. The total term fiscal impact is \$47,469,772.96.
6.	The Total Proposed Number of Consumers Served	Currently provides services to 1,121 consumers per month in San Fernando Valley and 72 consumers per month in Santa Clarita Valley, based on ridership served as of February 2020.
7.	The Rate of Payment or Payment Amount	Payment will be reimbursed to service provider based on 1) the actual services authorized; 2) the actual services provided; and 3) the authorized Usual & Customary rate. (see attached rate schedule)
8.	Method or Process Utilized to Award the Contract.	Based on vendorization requirements under statute and regulation for Transportation Services and Transportation Assistant Services.

HL0810-875 / PL1667-882 — $Term\ 03/01/2023$ — 02/28/2025

9.	Method or Process Utilized to Establish the Rate or the Payment Amount	The maximum rate of reimbursement shall be in accordance with the Usual & Customary rate, 17 CCR, Section 57300(b), (e) and (f).
		Keolis Transit Services, LLC has been vendored by NLACRC since September 10, 2007 originally as Diversified Transportation, LLC (HL0468-875/PL1242-882). Effective March 1, 2019 there was a tax ID change which also resulted in a change to the business entity name. The current five-year contract term ends February 28, 2023.
10.	Exceptional Conditions or Terms: Yes/No If Yes, provide explanation	Previous rate was established as a negotiated rate source. However, service provider qualifies for a usual and customary rate per Title 17, Section 57210(19) which requires that at least 30% of the recipients of the service be non-regional center consumers or their families. Service provider is an international business providing services in 14 countries including millions of passengers in the U.S. and Canada.

Contract Summary and Board Resolution

The North Los Angeles County Regional Center's ("NLACRC") Board of Trustees reviewed and discussed the Agreement for Transportation Services ("Agreement", or "Contract") for Keolis Transit Services, LLC and passed the following resolution:

RESOLVED THAT in compliance with NLACRC's Board of Trustees Contract Policy, the Contract between NLACRC and Keolis Transit Services, LLC was reviewed and approved by NLACRC's Board of Trustees on **February 8, 2023.**

NLACRC's Board of Trustees hereby authorizes and designates any officer of NLACRC to finalize, execute and deliver the Contract on behalf of NLACRC, in such form as NLACRC's legal counsel may advise, and on such further terms and conditions as such Officer may approve. The final terms of the Contract shall be conclusively evidenced by the execution of the Contract by such Officer. For purposes of this authorization, an "Officer" means NLACRC's Executive Director, Deputy Director, Chief Financial Officer, Chief Human Resources Officer, or Chief Information Officer, and no one else.

<u>Certification by Secretary</u>: I certify that: (1) I am the Secretary of the NLACRC; (2) the foregoing Resolution is a complete and accurate copy of the Resolution duly adopted by NLACRC's Board of Trustees; (3) the Resolution is in full force and has not been revoked or changed in any way.

	February 8, 2023
Lillian Martinez, Board Secretary	Date

Keolis Transit Services, LLC

Usual & Customary rate schedule

HL0810-875, transportation services

San Fernando Valley

- 1. Effective March 1, 2023: \$118.24 per Vehicle Service Hour
- 2. Effective March 1, 2024: \$124.15 per Vehicle Service Hour

Santa Clarita Valley

- 1. Effective March 1, 2023: \$101.69 per Vehicle Service Hour
- 2. Effective March 1, 2024: \$106.77 per Vehicle Service Hour

PL1667-882, attendant services

- 1. Effective March 1, 2024: \$34.93 per Attendant Service Hour
- 2. Effective March 1, 2024: \$36.68 per Attendant Service Hour

Contract Summary and Board Resolution

No.	Description	Contract Summary
1.	Contract Overview:	Renewal Agreement for Transportation Services, Purchase of Services (POS)
-	(New or Amendment) (POS or OPS)	, , ,
2.	The Name of Vendor or Service Provider	Keolis Transit Services, LLC HL0810-875, transportation services PL1667-882, transportation assistant
3.	The Purpose of the Contract	The service provider will provide Transportation and Transportation Attendant services pursuant to Title 17, Sections 58500 - 58570. Service provider provides transportation services in both the San Fernando and Santa Clarity Valleys, and provides transportation attendant services for specific routes or consumers depending on identified needs per request of NLACRC.
4.	The Contract Term	Three (3) year contract effective March 1, 2023 through February 28, 2026.
5.	The Total Amount of the Contract	Projected annual cost is based on February 2020 service month of 13,282.00 vehicle service hours, 8,644.50 attendant service hours, and 199,653.63 route miles for fuel provisions for San Fernando Valley services and 649 vehicle service hours and 14,108.16 route miles for fuel provisions for Santa Clarita Valley services. The rate structure increases the rates by 5% CPI per year. Therefore, the cost per year increases from \$23,179,791.11 to \$25,455,668.73 per year over the course of the five (5) years. The total term fiscal impact is \$72,925,441.69.
6.	The Total Proposed Number of Consumers Served	Currently provides services to 1,121 consumers per month in San Fernando Valley and 72 consumers per month in Santa Clarita Valley, based on ridership served as of February 2020.
7.	The Rate of Payment or Payment Amount	Payment will be reimbursed to service provider based on 1) the actual services authorized; 2) the actual services provided; and 3) the authorized Usual & Customary rate. (see attached rate schedule)
8.	Method or Process Utilized to Award the Contract.	Based on vendorization requirements under statute and regulation for Transportation Services and Transportation Assistant Services.

 $HL0810-875 / PL1667-882 - Term \ 03/01/2023 - 02/28/2026$

9.	Method or Process Utilized to Establish the Rate or the Payment Amount	The maximum rate of reimbursement shall be in accordance with the Usual & Customary rate, 17 CCR, Section 57300(b), (e) and (f).
		Keolis Transit Services, LLC has been vendored by NLACRC since September 10, 2007 originally as Diversified Transportation, LLC (HL0468-875/PL1242-882). Effective March 1, 2019 there was a tax ID change which also resulted in a change to the business entity name. The current five-year contract term ends February 28, 2023.
10.	Exceptional Conditions or Terms: Yes/No If Yes, provide explanation	Previous rate was established as a negotiated rate source. However, service provider qualifies for a usual and customary rate per Title 17, Section 57210(19) which requires that at least 30% of the recipients of the service be non-regional center consumers or their families. Service provider is an international business providing services in 14 countries including millions of passengers in the U.S. and Canada.

Contract Summary and Board Resolution

The North Los Angeles County Regional Center's ("NLACRC") Board of Trustees reviewed and discussed the Agreement for Transportation Services ("Agreement", or "Contract") for Keolis Transit Services, LLC and passed the following resolution:

RESOLVED THAT in compliance with NLACRC's Board of Trustees Contract Policy, the Contract between NLACRC and Keolis Transit Services, LLC was reviewed and approved by NLACRC's Board of Trustees on **February 8, 2023.**

NLACRC's Board of Trustees hereby authorizes and designates any officer of NLACRC to finalize, execute and deliver the Contract on behalf of NLACRC, in such form as NLACRC's legal counsel may advise, and on such further terms and conditions as such Officer may approve. The final terms of the Contract shall be conclusively evidenced by the execution of the Contract by such Officer. For purposes of this authorization, an "Officer" means NLACRC's Executive Director, Deputy Director, Chief Financial Officer, Chief Human Resources Officer, or Chief Information Officer, and no one else.

<u>Certification by Secretary</u>: I certify that: (1) I am the Secretary of the NLACRC; (2) the foregoing Resolution is a complete and accurate copy of the Resolution duly adopted by NLACRC's Board of Trustees; (3) the Resolution is in full force and has not been revoked or changed in any way.

	February 8, 2023
Lillian Martinez, Board Secretary	Date

Keolis Transit Services, LLC

Usual & Customary rate schedule

HL0810-875, transportation services

San Fernando Valley

- 1. Effective March 1, 2023: \$118.24 per Vehicle Service Hour
- 2. Effective March 1, 2024: \$124.15 per Vehicle Service Hour
- 3. Effective March 1, 2025: \$130.36 per Vehicle Service Hour

Santa Clarita Valley

- 1. Effective March 1, 2023: \$101.69 per Vehicle Service Hour
- 2. Effective March 1, 2024: \$106.77 per Vehicle Service Hour
- 3. Effective March 1, 2025: \$112.11 per Vehicle Service Hour

PL1667-882, attendant services

- 1. Effective March 1, 2024: \$34.93 per Attendant Service Hour
- 2. Effective March 1, 2024: \$36.68 per Attendant Service Hour
- 3. Effective March 1, 2025: \$38.51 per Attendant Service Hour

Contract Summary and Board Resolution

No.	Description	Contract Summary
1.	Contract Overview:	Renewal Agreement for Transportation Services, Purchase of Services (POS)
	(New or Amendment) (POS or OPS)	Keolis Transit Services, LLC
2.	The Name of Vendor or Service Provider	HL0810-875, transportation services PL1667-882, transportation assistant
3.	The Purpose of the Contract	The service provider will provide Transportation and Transportation Attendant services pursuant to Title 17, Sections 58500 - 58570. Service provider provides transportation services in both the San Fernando and Santa Clarity Valleys, and provides transportation attendant services for specific routes or consumers depending on identified needs per request of NLACRC.
4.	The Contract Term	Five (5) year contract effective March 1, 2023 through February 29, 2028.
5.	The Total Amount of the Contract	Projected annual cost is based on February 2020 service month of 13,282.00 vehicle service hours, 8,644.50 attendant service hours, and 199,653.63 route miles for fuel provisions for San Fernando Valley services and 649 vehicle service hours and 14,108.16 route miles for fuel provisions for Santa Clarita Valley services. The rate structure increases the rates by 5% CPI per year. Therefore, the cost per year increases from \$23,179,791.11 to \$27,965,641.60 per year over the course of the five (5) years. The total term fiscal impact is \$127,571,511.13.
6.	The Total Proposed Number of Consumers Served	Currently provides services to 1,121 consumers per month in San Fernando Valley and 72 consumers per month in Santa Clarita Valley, based on ridership served as of February 2020.
7.	The Rate of Payment or Payment Amount	Payment will be reimbursed to service provider based on 1) the actual services authorized; 2) the actual services provided; and 3) the authorized Usual & Customary rate. (see attached rate schedule)
8.	Method or Process Utilized to Award the Contract.	Based on vendorization requirements under statute and regulation for Transportation Services and Transportation Assistant Services.

 $HL0810-875 / PL1667-882 - Term\ 03/01/2023 - 02/28/2028$

9.	Method or Process Utilized to Establish the Rate or the Payment Amount	The maximum rate of reimbursement shall be in accordance with the Usual & Customary rate, 17 CCR, Section 57300(b), (e) and (f).
		Keolis Transit Services, LLC has been vendored by NLACRC since September 10, 2007 originally as Diversified Transportation, LLC (HL0468-875/PL1242-882). Effective March 1, 2019 there was a tax ID change which also resulted in a change to the business entity name. The current five-year contract term ends February 28, 2023.
10.	Exceptional Conditions or Terms: Yes/No If Yes, provide explanation	Previous rate was established as a negotiated rate source. However, service provider qualifies for a usual and customary rate per Title 17, Section 57210(19) which requires that at least 30% of the recipients of the service be non-regional center consumers or their families. Service provider is an international business providing services in 14 countries including millions of passengers in the U.S. and Canada.

Contract Summary and Board Resolution

The North Los Angeles County Regional Center's ("NLACRC") Board of Trustees reviewed and discussed the Agreement for Transportation Services ("Agreement", or "Contract") for Keolis Transit Services, LLC and passed the following resolution:

RESOLVED THAT in compliance with NLACRC's Board of Trustees Contract Policy, the Contract between NLACRC and Keolis Transit Services, LLC was reviewed and approved by NLACRC's Board of Trustees on **February 8, 2023.**

NLACRC's Board of Trustees hereby authorizes and designates any officer of NLACRC to finalize, execute and deliver the Contract on behalf of NLACRC, in such form as NLACRC's legal counsel may advise, and on such further terms and conditions as such Officer may approve. The final terms of the Contract shall be conclusively evidenced by the execution of the Contract by such Officer. For purposes of this authorization, an "Officer" means NLACRC's Executive Director, Deputy Director, Chief Financial Officer, Chief Human Resources Officer, or Chief Information Officer, and no one else.

<u>Certification by Secretary</u>: I certify that: (1) I am the Secretary of the NLACRC; (2) the foregoing Resolution is a complete and accurate copy of the Resolution duly adopted by NLACRC's Board of Trustees; (3) the Resolution is in full force and has not been revoked or changed in any way.

	February 8, 2023
Lillian Martinez, Board Secretary	Date

Keolis Transit Services, LLC

Usual & Customary rate schedule

HL0810-875, transportation services

San Fernando Valley

- 1. Effective March 1, 2023: \$118.24 per Vehicle Service Hour
- 2. Effective March 1, 2024: \$124.15 per Vehicle Service Hour
- 3. Effective March 1, 2025: \$130.36 per Vehicle Service Hour
- 4. Effective March 1, 2026: \$136.88 per Vehicle Service Hour
- 5. Effective March 1, 2027: \$143.72 per Vehicle Service Hour

Santa Clarita Valley

- 1. Effective March 1, 2023: \$101.69 per Vehicle Service Hour
- 2. Effective March 1, 2024: \$106.77 per Vehicle Service Hour
- 3. Effective March 1, 2025: \$112.11 per Vehicle Service Hour
- 4. Effective March 1, 2026: \$117.72 per Vehicle Service Hour
- 5. Effective March 1, 2027: \$123.61 per Vehicle Service Hour

PL1667-882, attendant services

- 1. Effective March 1, 2024: \$34.93 per Attendant Service Hour
- 2. Effective March 1, 2024: \$36.68 per Attendant Service Hour
- 3. Effective March 1, 2025: \$38.51 per Attendant Service Hour
- 4. Effective March 1, 2026: \$40.44 per Attendant Service Hour
- 5. Effective March 1, 2027: \$42.46 per Attendant Service Hour

NLACRC

Administrative Affairs Committee CRITICAL CALENDAR FY 2022-23

Month	Activity
July	AA Orientation for new committee.
	AA Review policies & procedures, board audit section, action log for
	previous fiscal year, and meeting schedule.
	C Review center's contract with DDS. C Are there any changes to the center's contract that require committee
	attention_or change in Board Policy?
	C Has the center's contract been signed?
	F Review approved critical calendar for new fiscal year.
	F Status report on new credit line and cash flow.
	HR Review 4 th quarter human resources report.
	HR Review any Board Member Conflict of Interest
	L Quarterly legal update (Executive session).
August	I Review Center's insurance coverage for the new fiscal year.
	PRMT Review 4 th quarter fees report on U.S. Bank transactions.
	UAL Review 4 th quarter fees report on U.S. Bank & Highmark Capital
	transactions.
	HR Ensure personnel policies in compliance with DDS contract.
September	HR Review 1 st quarter human resources report.
October	AA Contract Process Training (Operations & Purchase of Services)
	C Status report on lease agreements.
	L Quarterly legal update (Executive session).
	AA Renewal of Workers Compensation Insurance Coverage for upcoming
	Calendar Year
	Salaridar Tour
November	PRMT Review 1st quarter fees report on U.S. Bank transactions.
	UAL Review 1st_quarter fees report on U.S. Bank & Highmark Capital
	transactions.
December	(The committee does not meet in December.)
January	F Review Purchase of Services ("POS") projection of surplus/deficit.
	HR Review 2 nd quarter human resources report.
	L Quarterly legal update (Executive session).
February	F Review annual CPA audited financial statement.
	F Review management letter, if any.

NLACRC

Administrative Affairs Committee CRITICAL CALENDAR FY 2022-23

1 1 2022-23							
Month		Activity					
	F	Review management response to letter, as needed.					
	F	Review auditor's response to management response letter, as needed.					
	PRMT	Review 2 nd quarter fees report on U.S. Bank transactions.					
	UAL Review 2nd quarter fees report on U.S. Bank & Highmark Cap						
		transactions.					
March	L	CPA presentation on IRS Form 990 tax return.					
	HR	Review 3 rd quarter human resources report.					
April	AA	Review and approve draft critical calendar for upcoming fiscal year					
F Establish credit line for upcoming fiscal year - yes/no?							
	L Quarterly legal update (Executive session)						
	F	Review and make recommendation to Board regarding ARCA dues for					
	upcoming fiscal year						
May	PRMT	Review 3 rd quarter fees report on U.S. Bank transactions					
	UAL	Review 3rd quarter fees report on U.S. Bank & Highmark Capital transactions.					
	Ι	Recommend to the Board to authorize an officer to secure insurance in					
		June for next fiscal year.					
	F	Status report on current credit line and cash flow					
	F	Establish credit line for the budget year for upcoming fiscal year					
June		(The committee does not meet in June.)					
Monthly or as	F	Review budget allocation from DDS					
needed	F	Review budget amendments					
	AA	Committee trainings					
	F	Review statewide regional center POS Report					
	F	Review contracts					
	F	Review Audit Report(s) conducted by various entities of the Center					
	L	Update on pending litigation					
	HR	Report on union-related issues					
	LEGEND						

LEGEND

AA: Administrative Affairs HR: Human Resources L: Legal C: Contract I: Insurance F: Fiscal

PRMT: Post-Retirement Medical Trust <u>UAL:</u> CalPERS Unfunded Accrued Liability Trust

North Los Angeles County Regional Center **Board of Trustees Policy Statement**

Self Determination Program (SDP) Local Volunteer Advisory Committee Liaison

Section 4685.8 of the Welfare and Institutions Code establishes a local volunteer advisory committee to provide oversight of the Self-Determination Program. The regional center participates in the appointing of one half of the committee membership, while State Council appoints the other, and statute requires the participation of the Center's Clients' Rights Advocate. The Board of Trustees appoints a trustee to participate on the committee; this trustee also is a liaison between the committee and the board. The term of the liaison shall be 1 year with no limitations on the number of terms.

The duties of the SDP LVAC Liaison include:

- 1. Attending and participating in monthly committee meetings
- 2. Facilitating communication between the committee and the Board of Trustees on a monthly basis
- 3. Completing a monthly SDP LVAC Liaison Report for the board, including issues that impact the implementation of the Self-Determination Program

[policy.stmt.sdpliaison] Adopted //



Period: January 1, 2023 - June 30, 2024

	Goal	Measure	Statewide Average June 2021	NLACRC June 202	Statewide Average June 2022	NLACRC June 2022
1.		Number and percent of Regional Center consumers in institutional settings, such as state hospitals, DevelopmentalCenters, etc.	0.07% 255	0.05% 14	0.06% 233	0.04% 13

ACTIVITIES SUMMARY

NLACRC Resource Development Plan to Address Goal 1:

Development #1

Name of Provider: Brilliant Corners

Type: Enhanced Behavioral Support Home (EBSH)

Number of Consumers: 4

This home is open

Development #2

Name of Provider: W&W

Type: Specialized Residential Facility (SRF)

Number of Consumers: 4

Status Update: Development in progress.

Projected Date to Open Home: Fall 2022

Development #3

Name of Provider: Elwyn

Type: Specialized Residential Facility (SRF)
Number of Consumers to Be Placed: 4

Status Update: Vendor is currently engaging in property searches

Projected Date to Open Home: TBD

Development #4

Name of Provider: G&C

Type: Specialized Residential Facility (SRF)
Number of Consumers to Be Placed: 4

Status Update: Vendor acquired property; development in progress.

Projected Date to Open Home: Summer 2023

Development #5

Name of Provider: W&W

Type: Specialized Residential Facility (SRF)
Number of Consumers to be Placed: 4
Projected Date to Open Home: Spring 2024

Development #6

Name of Provider: G&C

Type: Specialized Residential Facility (SRF)
Number of Consumers to be Placed: 4
Projected Date to Open Home: Spring 2024

*5*5



Period: January 1, 2023 - June 30, 2024

Public Policy Performance Measures (Required)

	Goal	Measure	Statewide Average June 2021	NLACRC June 2021	Statewide Average June 2022	NLACRC June 2022
2.	Maintain the percentage of	Number and percent of	99.53%	99.65%	99.60%	99.71%
	children who reside with families in their homes	minors residingwith families	182,139	15,310	196,913	16,668
		own home - parent/ guardian	96.70% 176,969	94.96% 14,590	96.94% 191,657	95.35% 15,939
		foster family	2.83% 5,170	4.69% 720	2.66% 5,256	4.36% 729

ACTIVITIES SUMMARY NLACRC Plan to Address Goal 2:

New Staff Orientation/Training

Name of Training: Service Standards
Frequency: Every other month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 2

Frequency: Every month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Lanterman Act Training

Frequency: Every other month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: CDER/Person Centered Planning 1

Frequency: Every month

Metric: Number of training hours for new staff trained within first six months of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 3

Frequency: Every month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Self Determination Program

Frequency: Every month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training



Period: January 1, 2023 - June 30, 2024

Dissemination of Information

Type of Event: Town Hall or Informational Session – Family Support Services

Frequency: Annual

Metric: Increase Number of Attendees

Data Source to Evaluate: Public Information

Type of Activity: Printed Information Provided toCommunity

Frequency: Monthly

Metric: Number of materials provided to communitypartners

Data Source to Evaluate: Public Information & Diversity, Equity, and Inclusion

Type of Activity: Electronic Information Provided to Community

Frequency: Monthly

Metric: Number and types of materials provided to community through electronic

means including newsletters and social media

Data Source to Evaluate: Public Information & Diversity, Equity, and Inclusion

Type of Activity Grassroots Outreach & CommunityEngagement Contacts

Frequency: Monthly

Metric: Number of community contacts monthly by geographic location

Data Source to Evaluate: Diversity, Equity, and Inclusion

Type of Activity: Printed Information Provided to Community

Frequency: Annual

Metric: Number of events for which printed postcards or flyers are mailed to

the community

Data Source to Evaluate: Public Information

Type of Activity: Information shared with the community through News You

Can Use

Frequency: Monthly

Metric: Number of electronic newsletters distributed

Public Policy Performance Measures (Required)

	Goal	Measure	Statewide Average June 2021	NLACRC June 2021	Statewide Average June 2022	NLACRC June 2022
3.	Increase the numberof adults who residein home settings	Number and percent of adultsresiding in home settings:	82.20% 148,277	84.90% 10,332	82.75% 154,119	85.28% 10,817
		 Independent Living Services(ILS) 	9.76% 17,608	9.31% 1,133	9.48% 17,651	8.91% 1,130
		SupportedLiving Services (SLS)	5.18% 9,348	3.43% 418	5.02% 9,350	3.29% 417
		Adult Family Home Agencyhome	0.89% 1,609	0.42% 51	0.82% 1,529	0.40% 51
		Home of Parent or guardian	66.36% 119,712	71.73% 8,730	67.43% 125,589	72.68% 9,219



Period: January 1, 2023 - June 30, 2024

ACTIVITIES SUMMARY NLACRC Plan to Address Goal 3:

Resource Availability

Type of Service: Independent Living Skills (ILS)

Metric: Current Number of ILS Providers

Data Source: SANDIS

Type of Service: Family Home Agencies (FHA)

Metric: Current Number of FHA Providers

Data Source: SANDIS

Type of Service: Personal Assistance/Family SupportServices

Metric: Current Number of Personal Assistant Providers

Data Source: SANDIS

Type of Service: Self Determination Program

Metric: Number of participants

Data Source to Evaluate: SDP Unit

New Staff Orientation/Training

Name of Training: Service Standards

Frequency: Every month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 2

Frequency: Every month

Metric: Number of training hours for new staff trained within first six months of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Lanterman Act Training

Frequency: Every other month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Type of Service: Supported Living Services (SLS)

Metric: Current Number of SLS Providers

Data Source: SANDIS

Type of Service: Respite/Family Support Services **Metric:** Current Number of Respite Providers

Data Source: SANDIS

Type of Service: Participant-Directed Services: Day Care (455), Respite (465),

Nursing (460), Transportation

(470), Community-Based Training Service (475), Personal Assistance (093), supported living (073)

Metric: Current Number of Participant Directed Services Vendors

Data Source: SANDIS

Name of Training: CDER/Person Centered Planning 1

Frequency: Every month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 3

Frequency: Every month

Metric: Number of training hours for new staff trained within first six months of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Independent Living/Supported Living

Frequency: Every month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

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Period: January 1, 2023 - June 30, 2024

Name of Training: Residential Living Options

Frequency: Every month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Community Training/Orientation

Name of Training: Supported Living Services (SLS)Orientation

Frequency: Monthly

Metric: Number of Orientations Held Annually; Number of Consumers Attending

Orientation

Data Source to Evaluate: Case Management

Dissemination of Information

Type of Event: Town Hall or Informational Session – In Home SupportiveServices

Frequency: Annual

Metric: Increase Number of Attendees

Data Source to Evaluate: Public Information

Type of Event: Consumer and Family In-Home Supportive Services Training

w/Client Rights Advocate Frequency: Annual

Metric: Increase Number of Attendees

Data Source to Evaluate: Public Information

Public Policy Performance Measures (Required)

	Goal	Measure	Statewide Average June 2021	NLACRC June 2021	Statewide Average June 2022	NLACRC June 2022
4.	Decrease the percentage of childrenliving in larger facilities	Number and percent of minorsliving in facilities serving greater than 6	0.03% 59	0.01% 2	0.03% 54	0.01% 1
		IntermediateCare Facilities (ICF)	0.02% 30	0.00% 0	0.02% 34	0.00% 0
		 Skilled Nursing Facilities(SNF) 	0.00% 7	0.01% 1	0.00% 7	0.00% 0
		Community Care Facilities(CCF)	0.01% 22	0.01% 1	0.01% 13	0.01% 1



Period: <u>January 1, 2023 – June 30, 2024</u>

ACTIVITIES SUMMARY NLACRC Plan to Address Goal 4:

New Staff Orientation/Training

Name of Training: Residential Living Options

Frequency: Every month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Resource Development

Type of Service: Client/Parent Support BehaviorIntervention Training (048)

or Parent Coordinated

Behavioral Intervention Program (077)

Metric: Current Number of vendors

Data Source: SANDIS

Name of Training: Service Standards

Frequency: Every other month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Public Policy Performance Measures (Required)

	Goal	Measure	Statewide Average June 2021	NLACRC June 2021	Statewide Average June 2022	NLACRC June 2022
5.	Decrease the percentage of adults living in larger facilities	Number and percent of adults living in facilitiesserving greater than 6	1.84% 3,323	2.23% 271	1.71% 3,188	2.13% 270
		IntermediateCare Facilities (ICF)	.45% 812	1.00% 122	0.41% 755	0.88% 111
		 Skilled Nursing Facilities (SNF) 	.55% 985	.53% 65	0.52% 967	0.61% 78
		CommunityCare Facilities (CCF)	.85% 1,526	.69% 84	0.79% 1,466	0.64% 81

ACTIVITIES SUMMARY
NLACRC Plan to Address Goal 5:

Starts on next page



Period: January 1, 2023 - June 30, 2024

New Staff Orientation/Training

Name of Training: Residential Living Options

Frequency: Every month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Service Standards Frequency: Every other month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Resource Development

Type of Service: 4, 5, and 6 bed facilities

Metric: Number of vendors

Data Source: SANDIS

Public Policy Performance Measures (Required)

Goal

6. Increase the percentage of adult consumers that are employed in Integrated settings with competitive wages.

Separate measures for this goal are included belowas numbers 6a. through 6d. See below for data on each separate measure.

and the second s			
Jan. through	Jan. through	Jan. through	Jan. through
Dec. 2019 CA	Dec. 2019	Dec. 2020 CA	Dec. 2020
	NLACRC		NLACRC
25,710	1,529	22,772	1,552
17.17%	15.04%	18.86%	17.73%
\$8,772	\$10,121	\$9,733	\$11,067
	25,710 17.17%	Dec. 2019 CA Dec. 2019 NLACRC 25,710 1,529 17.17% 15.04%	Dec. 2019 CA Dec. 2019 NLACRC Dec. 2020 CA 25,710 1,529 22,772 17.17% 15.04% 18.86%



Period: <u>January 1, 2023 – June 30, 2024</u>

Measure 6b	2	019	20	020
medadi e ob	_	010	2020	
(From American Community Survey, five-year estimate) Annual earnings of consumers ages 16-64 compared to people with all disabilities in California.	\$25,990		\$26,794	
Measure 6c	July 2017 – June 2018 Statewide	July 2017 – June 2018 NLACRC	July 2020 – June 2021 Statewide	July 2020 – June 2021 NLACRC
(From National Core Indicator (NCI) Adult Consumer Survey) Percentage of adults who reported having integrated employment as their goal in their IPP.	29%	26%	35%	27%
(Note: NCI Surveys are conducted every three years.)				
Measure 6d	2019-20 CA Avg.	2019-20 NLACRC Avg.	2020-21 CA Avg.	2020-21 NLACRC Avg.
(From data collected manually from service providers by regional centers) Number of adults who were placed in competitive integrated employment following participation in a Paid Internship Program.	8	5	6	0
Percentage of adults who were placed in competitive, integrated employment following participation in a Paid Internship Program.	9%	11%	14%	0%
Average hourly or salaried wages and for adults who participated in a Paid Internship Program.	\$13.31	\$13.78	\$14.25	\$14.36
Average hours worked per week for adults who participated in a Paid Internship Program.	16	15	17	16
Average wages for adults engaged in competitive, integrated employment, on behalf of whom incentive payments have been made.	\$13.52	\$14.08	\$14.81	\$15.41



Period: January 1, 2023 - June 30, 2024

(From data collected manually from service providers by regional centers) (cont'd)) Average hours worked for adults engaged in competitive, integrated employment, on behalf of whom incentive paymentshave been made.	21	20	23	20
Total # of incentive payments made for the fiscal year for the following amounts.				
Incentive amount: \$1,500	22	27	17	11
\$1,250	28	33	19	11
\$1,000	34	36	33	16

ACTIVITIES SUMMARY NLACRC Plan to Address Goal 6:

Resource Availability & Development

Competitive Integrative Employment (CIE)

Metric: Total Number of Vendors who offer CIE as of 12/31/2023 **Progress Measurement:** Total Number of Vendors who offer CIE as of

12/31/2023

Data Source: Community Services Employment Specialist

Supported Employment Program (SEP)

Metric: Total Number of Vendors who offer SEP as of 12/31/2023

Progress Measurement: Total Number of Vendors who offer PIP as of

12/31/2023

Data Source: Community Services Employment Specialist

Paid Internship Program (PIP)

Metric: Total Number of Vendors who offer PIP as of 12/31/2023

Progress Measurement: Total Number of Vendors who offer PIP as of

12/31/2023

Data Source: Community Services Employment Specialist



Period: January 1, 2023 - June 30, 2024

Increased Employment Opportunities for Consumers

Competitive Integrative Employment (CIE)

Metric: Total Number of Consumers in CIE as of 12/31/2023

Progress Measurement: Total Number of Consumers in CIE as of 12/31/2023

Data Source: Community Services & Case Management

Supported Employment Program (SEP)

Metric: Total Number of Consumers in SEP as of 12/31/2023

Progress Measurement: Total Number of Consumers in SEP as of 12/31/2023

Data Source: Community Services & Case Management

Paid Internship Program (PIP)

Metric: Total Number of Consumers in PIP as of 12/31/2023

Progress Measurement: Total Number of Consumers in PIP as of 12/31/2023

Data Source: Community Services & Case Management

Service Access & Equity Grant

Type of Grant: Workforce and Employment Specialist to do active outreach and help build relationships with small business owners in underserved areas. This position will implement specific strategies for small business owners in underserved communities and promote employment incentive programs. Specific projects include working toward all individuals who are eligible and want to work will have an IPP goal and objective in their Plan; increasing employment opportunities for consumers in Competitive Integrative Employment (CIE); increasing consumers participating in the Paid Internship Program (PIP); implementing employment roundtables; implementing NLACRC's Workforce & Employment hotline and email; outreach efforts in NLACRC's catchment area; and community training & collaboration with service providers.

Metric: Total Number of Consumers in CIE as of 12/31/2023; Total Number of Consumers in PIP as of 12/31/2023; Total Number of Consumers in WAP as of 12/31/2023

Data Source: Diversity, Equity, and Inclusion Department

Outreach & Engagement to Increase Employment for Consumers

Type of activity: Engage with colleges and career centers to identify job opportunities for consumers

Frequency: Monthly

Metric: Total Number of colleges contacted

Data Source: Workforce & Employment Specialist

Type of Activity: Support individuals to sustain employment, once achieved, including helping individuals understand the benefit of employment support/service to help

individuals succeed. **Frequency:** Quarterly

Metric: Number of trainings and workshops to community on benefits of employment

Data Source to Evaluate: Workforce & Employment Specialist

Type of Activity: Gather information about employment opportunities in our catchment and collaborate with community partners to educate local businesses regarding

the availability of a pool of prospective employees in our system.

Frequency: Quarterly

Metric: Number of partnerships or contacts made; Number of publications provide

Data Source to Evaluate: Employment Specialist



Period: January 1, 2023 - June 30, 2024

Type of Activity: Utilize the 1-year workforce grant to help connect NLACRC with employers in our local communities and educate them on the benefits of hiring individuals with developmental disabilities, support development of relationships between providers, and increase utilization of incentives to promote employment and vocational outcomes.

Frequency: Quarterly

Metric: Number of partnerships or contacts made **Data Source to Evaluate:** Employment Specialist

Type of Activity: Explore utilization of the 1-year workforce employment grant staff to develop and implement an employment "hotline".

Tentative Timeline: December 31, 2024 (listed in Strategic Plan)

Metric: Number of calls to hotline

Data Source to Evaluate: Employment Specialist

Type of Activity: Connect people served/families with Small Business Administration (SBA), Los Angeles County (or other vendors) workshops on starting your own

business.

Frequency: Monthly

Metric: Number of contacts with SBAs; Number of workshops on starting businesses

Data Source to Evaluate: Employment Specialist

Type of Activity: Collaborate with service providers and partners to increase independent employment by supporting, where possible, providers to explore grant

opportunities for Micro Enterprises.

Frequency: Monthly

Metric: Number of trainings or connections with providers; Number of grant opportunities for Microenterprises

Data Source to Evaluate: Employment Specialist

Type of Activity: Promote consumer employment opportunities on website, newsletters, and social media

Frequency: Monthly

Metric: Number of instances that consumer job opportunities are promoted to the community through website, newsletters, and social media

Data Source to Evaluate: Public Information

Individualized Program Plans

Strategy: All individuals who are eligible and want to work will have an IPP goal and objective in each plan.

Frequency: Monthly

Metric: Increase number of IPPs with employment goals/outcomes

Data Source: IPP random sampling

Trainings

Type of Training: Support individuals to sustain employment once achieved, including helping individuals understand the benefit of employment support/service to help

individuals succeed **Frequency**: Annual

Metric: Number of staff trainings

Data Source to Evaluate: Training and Development



Period: January 1, 2023 - June 30, 2024

Dissemination of Information

Type of Event: Town Hall – Department of Rehabilitation

Frequency: Annual

Metric: Increase Number of Attendees

Data Source to Evaluate: Public Information

Type of Event: Training for consumers and their families on understanding the benefit of employment and how SSI benefits are calculated

Frequency: Annual

Metric: Number of Attendees

Data Source to Evaluate: Public Information

Type of Activity: Ensure individuals and families know what their employment and meaningful day opportunities are. Support individuals and families to think creatively

about what employment might mean to them.

Frequency: Monthly

Metric: Number of resources provided on employment and day services to the community through newsletters, social media, and other publications; Number of

employment reports in Consumer Services Committee **Data Source to Evaluate:** Employment Specialist

Type of Activity: Host an annual (or semi—annual) "Meeting of the Minds" employment resources –potential partner agencies, providers, and other potential

employment partners to share resources, brainstorm job creation and development.

Frequency: Annual

Metric: Event(s) held; Number of participants; resources shared

Data Source to Evaluate: Employment Specialist



Period: <u>January 1, 2023 – June 30, 2024</u>

	Goal		Measure Measure			
7	Ensure that consumers and families have access to services and supports regardless of age, diagnosis, ethnicity, or language **Residence** Trans.	Paragraph of the paragr	nicity nat is separated by residen	I authorized services and expenditures byindividual's ce type is included below as numbers 7a.through 7f.		
	Туре					
7a	Home	American Indian or Alaska Native 0.40	Native Hawaiian or Other Pacific Islander 0.70	American Indian or Alaska Native 0.50	Native Hawaiian or Other Pacific Islander 0.76	
		Asian 0.65	White 0.67	Asian 0.60	White 0.64 	
		 Black/ African American 0.72	Other Ethnicity or Race 0.67	Black/ African American 0.67	Other Ethnicity or Race 0.62	
		Hispanic 0.70		 Hispanic 0.69		
7b	ILS/SLS	American Indian or Alaska Native 0.95	Native Hawaiian or Other Pacific Islander N/A	American Indian or Alaska Native 0.87	Native Hawaiian or Other Pacific Islander N/A	
		Asian 0.80	White 0.84	Asian 0.81	White 0.78	
		Black/ African American 0.81	Other Ethnicity or Race 0.77	Black/ African American 0.80	Other Ethnicity or Race 0.78	
		Hispanic 0.82		Hispanic 0.82		



Period: <u>January 1, 2023 – June 30, 2024</u>

7c	Institutions (Institutions include	American Indian or Alaska Native N/A	Native Hawaiian or Other Pacific Islander N/A	American Indian or Alaska Native N/A	Native Hawaiian or Other Pacific Islander N/A
	developmental centers, state hospitals, and correctional facilities.)	Asian N/A	White 0.05	Asian N/A	White 0.81
	correctional radinates.	Black/ African American 0.58	Other Ethnicity or Race 0.00	Black/ African American 0.51	Other Ethnicity or Race N/A
		Hispanic 0.23		Hispanic 0.41	
7d	Residential (Residential includes care	American Indian or Alaska Native N/A	Native Hawaiian or Other Pacific Islander 0.94	American Indian or Alaska Native N/A	Native Hawaiian or Other Pacific Islander 0.88
	facilities intermediate care facilities, and continuous nursing facilities.)	Asian 0.87	White 0.83	Asian 0.79	White 0.74
	Transing radinates.	Black/ African American 0.88	Other Ethnicity or Race 0.87	Black/ African American 0.78	Other Ethnicity or Race 0.76
		Hispanic 0.89		Hispanic 0.81	
7e	Med/Rehab/ Psych	American Indian or Alaska Native N/A	Native Hawaiian or Other Pacific Islander N/A	American Indian or Alaska Native N/A	Native Hawaiian or Other Pacific Islander N/A
	(Med/Rehab/Psych include skilled nursing facilities, psychiatric treatment and	Asian 0.18	White 0.75	Asian 0.20	 White 0.57
	rehabilitation centers, acute general hospitals, sub-acute care services, and	Black/ African American 1.13	Other Ethnicity or Race 0.99	Black/ African American 0.95	Other Ethnicity or Race 0.84
	community treatment facilities.)	Hispanic 0.50		Hispanic 0.53	
					68



Period: January 1, 2023 - June 30, 2024

	Other (Other includes consumers who are out-of-state, in hospice, transient/homeless, or not listed elsewhere.)	American Indian or Alaska Native 0.00 Asian 0.34 Black/ African American 0.96 Hispanic 0.64	Native Hawaiian or Other Pacific Islander N/A White 0.81 Other Ethnicity or Race 0.00	American Indian or Alaska Native N/A Asian 0.90 Black/ African American 0.94 Hispanic 0.66	Native Hawaiian or Other Pacific Islander N/A White 0.68 Other Ethnicity or Race N/A
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ACTIVITIES SUMMARY NLACRC Plan to Address Goal 7:

Diversity, Equity, and Inclusion Initiative

Type of Activity: All NLACRC staff trained in identified areas of culture competency

Tentative Timeline: December 31, 2023

Metric: Number of NLACRC staff trained in cultural competency **Data Source to Evaluate:** Training & Diversity, Equity, and Inclusion

Type of Activity: Review existing and upcoming policies and guidelines to ensure they are reflective of the DEIB values and are culturally inclusive, as well as develop - where needed – new policies and guidelines that support the goal of creating a true culture of diversity, equity inclusion, and belonging at the Regional Center and for all of those who interact with the Regional Center.

Tentative Timeline: December 31, 2024 (listed in Strategic Plan)

Metric: Number of policies and guidelines reviewed

Data Source to Evaluate: Diversity, Equity and Inclusion & Human Resources

Type of Activity: Review policies and practices for inclusion with regards to the composition of the Board of Trustees and Board Committees to ensure all views are represented and help serve to inform decision making in policies.

Tentative Timeline: December 31, 2024 (listed in Strategic Plan) Metric: Number of policies and practices reviewed

Data Source to Evaluate: Human Resources

Type of Activity: Establish focus groups to reflect on what is working, what is needed, and future actions in regard to DEIB, as well as work to better understand the POS expenditure variance and unmet needs; analyzing data to understand and work towards a data-driven solution with clear objectives, metrics and timelines.

Tentative Timeline: Quarterly

Metric: Number and type of focus groups

Data Source to Evaluate: Diversity, Equity and Inclusion



Period: January 1, 2023 - June 30, 2024

Type of Activity: Advocate at the state level for updated approaches to services and service delivery, system level equity, diversity, culturally competent planning, and

Purchase of Service Variance.

Frequency: Monthly

Metric: Number of events attended

Data Source to Evaluate: Diversity, Equity and Inclusion

Staff Positions

Enhanced Service Coordination

Tentative Timeline: Continue recruitment for six newly established positions who will serve 1:40.through December 2023

Metric: Number of Specialists hired & number of consumers / families served

Data Source to Evaluate: Human Resources

Deaf & Hard of Hearing Specialist

Tentative Timeline: Continue recruitment for newly established positions through December 2023

Metric: Position Filled

Data Source to Evaluate: Human Resources

Participant Choice Specialists

Tentative Timeline: Continue recruitment for newly established positions through December 2023

Metric: Position Filled

Data Source to Evaluate: Human Resources

Language Access Specialist

Tentative Timeline: December 31, 2023

Metric: Position filled.

Data Source to Evaluate: Human Resources

Outreach Language Specialist

Tentative Timeline: December 31, 2023

Metric: Position filled.

Data Source to Evaluate: Human Resources

Housing Specialist

Tentative Timeline: Recruit for newly established position through December 2023

Metric: Position filled

Data Source to Evaluate: Human Resources

Mental Health Specialist

Tentative Timeline: Explore feasibility of creating a Mental Health Specialist staff position; recruit for newly established position through December 2023 if position is

created

Metric: Position filled

Data Source to Evaluate: Human Resources



Period: January 1, 2023 - June 30, 2024

Administrative Analyst

Tentative Timeline: Explore feasibility of creating an Administrative Analyst position; recruit for newly established position through December 2023 if position is created

Metric: Position filled

Data Source to Evaluate: Human Resources

NLACRC Recruitment of Service Coordinators

Tentative Timeline: Active recruitment for open positions

Frequency: Recruiting goal to hire a minimum of 10 CSCs per month

Metric: Reduction in the number of CSC vacancies

Data Source to Evaluate: Human Resources

Community Engagement & Relationships

Type of Event: Cafecito Entre Nos ("Coffee Amongst Us")

Frequency: Monthly

Metric: Increase Number of Attendees

Data Source to Evaluate: Diversity, Equity, and Inclusion

Type of Event: Alianza De Hombres ("Men's Group")

Frequency: Monthly

Metric: Increase Number of Attendees

Data Source to Evaluate: Diversity, Equity, and Inclusion

New Staff Orientation/Training

Name of Training: Service Standards

Frequency: Every other month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 2

Frequency: Every month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Lanterman Act Training

Frequency: Every other month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: CDER/Person Centered Planning

Frequency: Every month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 3

Frequency: Every month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Diversity, Equity, Inclusion & Belonging (DEIB) training

Frequency: Every other month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources, Training, & Diversity, Equity, and

Inclusion



Period: <u>January 1, 2023 – June 30, 2024</u>

Type of Training: Create training modules for consumers, families, and vendors, on a range of topics to enhance "Parent Education Academy" and increase access to

supports and services.

Frequency: Annual

Metric: Number and type of training topics; number of attendees

Data Source to Evaluate: Diversity, Equity, and Inclusion & Outreach Specialists

Type of Training: Expand training for people served/families that support their education, their rights, and determining their role and relationship with the Regional

Center through Apriendiendo Entre Nos meetings.

Frequency: Every other month Metric: Number of trainings provided

Data Source to Evaluate: Diversity, Equity and Inclusion

Type of Training: Train/provide new orientation training for adults/consumers when an individual transitions to managing their own services/supports, including major

milestones, including reaching 18 years of age, transitioning from high school, and reaching retirement.

Frequency: Quarterly

Metric: Number of trainings provided

Data Source to Evaluate: Case Management & Training and Development

Type of Training: Create an understandable Personal Plan tailored to each client that they can keep and review regularly and which documents their progress as a

metric. Train CSCs to use Personal Plans with each person served. **Tentative Timeline:** December 31, 2024 (listed in Strategic Plan)

Metric: Number of Person Centered Plans created; number of staff trained

Data Source to Evaluate: Case Management

Dissemination of Information

Type of Event: Aprendiendo Entre Nos ("Learning Amongst Us")

Frequency: 6 times per year

Metric: Increase Number of Attendees

Data Source to Evaluate: Diversity, Equity, and Inclusion

Type of Event: Purchase of Service Public Meetings

Frequency: Annual

Metric: Increase Number of Attendees

Data Source to Evaluate: Public Information

Type of Activity Grassroots Outreach & Community Engagement Contacts

Frequency: Monthly

Metric: Increase Number of community contacts monthly by geographic area

Data Source to Evaluate: Diversity, Equity, and Inclusion Unit

Type of Event: Festival Educacional

Frequency: Annual

Metric: Increase Number of Attendees

Data Source to Evaluate: Public Information

Type of Event: Informational Town Hall Meetings or other Informational Sessions

Frequency: Monthly

Metric: Increase Number of Attendees

Data Source to Evaluate: Public Information

Type of Activity: Printed Information Provided to Community

Frequency: Monthly

Metric: Number of contacts with community partners for materials by geographic

area

Data Source to Evaluate: Public Information & Diversity, Equity, and

Inclusion Unit



Period: January 1, 2023 - June 30, 2024

Type of Activity: Electronic Information Provided to Community

Frequency: Monthly

Metric: Number of emails sent with materials provided to community by geographic area; number of social media posts by social media platform

Data Source to Evaluate: Public Information & Diversity, Equity, and Inclusion

Type of Activity: Increase NLACRC staff accessibility and visibility of materials in order to share with consumers and families, such as adding materials and document

holders in easily accessible areas of mailrooms.

Tentative Timeline: Monthly

Metric: Number of instances that materials are refilled; locations of refills and/or additional material placements

Data Source to Evaluate: Diversity, Equity, and Inclusion & Public Information

Type of Activity: Provide communication and information in various languages to consumers and families on lobby monitors

Tentative Timeline: Monthly

Metric: Number and types of languages for which communication and information is provided on lobby monitors

Data Source to Evaluate: Diversity, Equity, and Inclusion & Public Information

Type of Activity: Disseminate materials to schools and early child education centers (ECEs)

Frequency: Monthly

Metric: Number of contacts with schools and ECEs; types of materials distributed

Data Source to Evaluate: Diversity, Equity, and Inclusion

Type of Activity: Increase promotion of Spanish speaking events, including Cafecito Entre Nos, Aprendiendo Entre Nos, and Alianza De Hombres, using non-electronic

methods.

Frequency: Quarterly

Metric: Instances and methods of promoting events through non-electronic methods

Data Source to Evaluate: Public Information

Type of Activity: Increase promotion of Participant Directed Services

Frequency: Monthly

Metric: Number of instances that Participant Directed Services is promoted; methods of promotion

Data Source to Evaluate: Public Information

Type of Activity: Increase accessibility and readability of NLACRC website.

Tentative Timeline: Quarterly

Metric: Number of satisfied users through feedback surveys

Data Source to Evaluate: Public Information

Type of Activity: Regularly update information on NLACRC's website to ensure that the website is accurate.

Tentative Timeline: Monthly

Metric: Number of instances that information on NLACRC's website is updated for accuracy

Data Source to Evaluate: Public Information



Period: January 1, 2023 - June 30, 2024

Language Access

Type of Activity: Interpretation services for NLACRC community trainings, Board and committee meetings, and other public meetings

Frequency: Monthly

Metric: Number of community trainings, Board and committee meetings, and other public meetings with interpretation provided; Languages for which interpretation is

provided at community trainings, Board and committee meetings, and other public meetings

Data Source to Evaluate: Public Information

Type of Activity: Translation of NLACRC materials into additional languages, including the Consumer and Family Guide, flyers, and brochures

Tentative Timeline: December 31, 2023

Metric: Number of translated materials; Languages in which materials are translated

Data Source to Evaluate: Public Information

Type of Activity: Translation of Individual Program Planning (IPP) documents in the individual/family's preferred language upon request

Frequency: Monthly

Metric: Number of IPP documents translated **Data Source to Evaluate:** Case Management

Type of Activity: Conduct assessment of language access and cultural competency according to NLACRC's Language Access & Cultural Competency Plan in order to

develop further strategies

Tentative Timeline: Annual

Metric: Areas of success in language access and cultural competency and areas needing improvement in areas of language access and cultural competency

Data Source to Evaluate: Diversity, Equity, and Inclusion

Type of Activity: Provide access via a mobile device (such as a tablet or laptop) to complete the regional center application.

Tentative Timeline: Monthly

Metric: Number of individuals assisted via mobile devices; types of outreach events where assistance through mobile devices is provided

Data Source to Evaluate: Diversity, Equity, and Inclusion

Type of Activity: Create pager system in NLACRC lobbies to alert blind and visually impaired, and deaf and hard of hearing consumers and families

Tentative Timeline: Monthly

Metric: N/A – This is an added protocol to be used for all guests in an effort to improve accessibility and inclusivity. There is not currently an identified metric to track.

Data Source to Evaluate: Diversity, Equity, and Inclusion

Type of Activity: Develop the following outreach materials and efforts:

Early Start Outreach Postcards; Early Start educational and testimonial video; Explore creation of a Parents Speaker Bureau to act as community liaison- Target genetic

council centers and services

Tentative Timeline: December 31, 2024 (listed in Strategic Plan) **Metric:** Number of materials distributed by geographic location

Data Source to Evaluate: Public Information & Diversity, Equity, and Inclusion



Period: January 1, 2023 - June 30, 2024

Type of Activity: Define a Multi-cultural Communication Plan that embraces target audience.

Tentative Timeline: December 31, 2023

Metric: Number of materials available by language **Data Source to Evaluate:** Diversity, Equity, and Inclusion

Type of Activity: Ensure all staff have access to Multi-Cultural Plan that embraces target audiences training and supports, including bilingual supports to ensure all

communications use the most appropriate language and culturally aligned terms and definitions.

Tentative Timeline: December 31, 2023

Metric: Number of trainings, handouts, guidelines available for staff

Data Source to Evaluate: Diversity, Equity, and Inclusion

Type of Activity: Create focus groups to review and evaluate major communication efforts for individuals and families to ensure materials are meeting the Multi-cultural

Communication Plan.

Tentative Timeline: December 31, 2024 (listed in Strategic Plan)

Metric: Number of materials used by focus groups

Data Source to Evaluate: Diversity, Equity, and Inclusion & Public Information

Other

Type of Activity: Conduct quality assurance for a sampling Individual Program Plans for training opportunities on areas such as plain language, language inclusivity, etc.

Frequency: Annual

Metric: Number of IPPs sampled

Data Source to Evaluate: Case Management

Public Policy Performance Measures – Related to Reducing Disparities and Improving Equity in Purchase of Services (Two Required)

	Goal	Measure	Ethnicity	2019-20	2020-21
8.	Ensure that consumers and families have access	Number and percent of individuals receiving only case	American Indian or Alaska Native	Birth to 2: 0 (0%) 3 to 21: 5 (31%) 22+: 2 (40%)	Birth to 2: 0 (0%) 3 to 21: 7 (37%) 22+: 1 (25%)
	to services and supports regardless of age, diagnosis, ethnicity, or language management services by ethnicity and age Birth to age two, inclusive Age three to 21, inclusive Twenty-two and	management services by ethnicity and age • Birth to age two,	Asian	Birth to 2: 1 (0%) 3 to 21: 333 (32%) 22+: 91 (16%)	Birth to 2: 27 (9%) 3 to 21: 404 (39%) 22+: 111 (19%)
		Black/African American	Birth to 2: 1 (0%) 3 to 21: 469 (31%) 22+: 216 (19%)	Birth to 2: 25 (8%) 3 to 21: 510 (34%) 22+: 259 (21%)	
		older	Hispanic	Birth to 2: 9 (0%)	Birth to 2: 179 (6%)



Period: <u>January 1, 2023 – June 30, 2024</u>

		//TIEO OLIMANA DV	
	Total	Birth to 2: 26 (0%) 3 to 21: 5,029 (31%) 22+: 1,642 (17%)	Birth to 2: 437 (7%) 3 to 21: 5,709 (35%) 22+: 1,939 (20%)
	Other Ethnicity or Race	Birth to 2: 8 (1%) 3 to 21: 393 (29%) 22+: 71 (20%)	Birth to 2: 104 (8%) 3 to 21: 473 (34%) 22+: 85 (23%)
	White	Birth to 2: 7 (1%) 3 to 21: 1,140 (30%) 22+: 533 (13%)	Birth to 2: 102 (9%) 3 to 21: 1,303 (34%) 22+: 624 (15%)
data provided by DDS is 2020-21)	Native Hawaiian or Other Pacific Islander	Birth to 2: 0 (0%) 3 to 21: 4 (57%) 22+: 0 (0%)	Birth to 2: 0 (0%) 3 to 21: 4 (57%) 22+: 0 (0%)
(Note: The most recent		3 to 21: 2,685 (31%) 22+: 729 (22%)	3 to 21: 3,008 (35%) 22+: 859 (24%)

ACTIVITIES SUMMARY
NLACRC Plan to Address Goal 8:
Same activities as Goal 7



Period: <u>January 1, 2023 – June 30, 2024</u>

Public Policy Performance Measures – Related to Reducing Disparities and Improving Equity in Purchase of Services(Two Required)

Serv	Services(Two Required)				
	Goal	Measure	Ethnicity	2019-20	2020-21
9.	Ensure that consumers and families have access to services and supports regardless of	Percent of total annual purchase of service expendituresby individual's ethnicity and age Birth to age two, inclusive.	American Indian or Alaska Native	Birth to 2, Consumers – 0% Birth to 2, Expenditures – 0% 3 to 21, Consumers – 0% 3 to 21, Expenditures – 0% 22+, Expenditures – 0% 22+, Consumers – 0%	Birth to 2, Consumers – 0% Birth to 2, Expenditures – 0% 3 to 21, Consumers – 0% 3 to 21, Expenditures – 0% 22+, Expenditures – 0% 22+, Consumers – 0%
	age, diagnosis, ethnicity, or language	 Age three to 21, inclusive. Twenty-two and older 	Asian	Birth to 2, Consumers – 5% Birth to 2, Expenditures – 5% 3 to 21, Consumers – 6% 3 to 21, Expenditures – 7% 22+, Expenditures – 6% 22+, Consumers – 6%	Birth to 2, Consumers – 5% Birth to 2, Expenditures – 5% 3 to 21, Consumers – 6% 3 to 21, Expenditures – 6% 22+, Expenditures – 6% 22+, Consumers – 6%
			Black/African American	Birth to 2, Consumers – 5% Birth to 2, Expenditures – 5% 3 to 21, Consumers – 9% 3 to 21, Expenditures – 11% 22+, Consumers – 12% 22+, Expenditures – 10%	Birth to 2, Consumers – 5% Birth to 2, Expenditures – 5% 3 to 21, Consumers – 9% 3 to 21, Expenditures – 11% 22+, Consumers – 12% 22+, Expenditures – 10%
			Hispanic	Birth to 2, Consumers – 55% Birth to 2, Expenditures – 55% 3 to 21, Consumers – 53% 3 to 21, Expenditures – 43% 22+, Consumers – 35% 22+, Expenditures – 25%	Birth to 2, Consumers – 49% Birth to 2, Expenditures – 52% 3 to 21, Consumers – 53% 3 to 21, Expenditures – 46% 22+, Consumers – 36% 22+, Expenditures – 26%



Period: <u>January 1, 2023 – June 30, 2024</u>

	Native Haw Other Pacific	aiian or Islander Birth to 2, Consumers – 0% Birth to 2, Expenditures – 0% 3 to 21, Consumers – 0% 3 to 21, Expenditures – 0% 22+, Consumers – 0% 22+, Expenditures – 0%	Birth to 2, Consumers – 0% Birth to 2, Expenditures – 0% 3 to 21, Consumers – 0% 3 to 21, Expenditures – 0% 22+, Consumers – 0% 22+, Expenditures – 0%
	White	Birth to 2, Consumers – 19% Birth to 2, Expenditures – 21% 3 to 21, Consumers – 23% 3 to 21, Expenditures – 31% 22+, Consumers – 43% 22+, Expenditures – 55%	Birth to 2, Consumers –19% Birth to 2, Expenditures 20% 3 to 21, Consumers –23% 3 to 21, Expenditures –30% 22+, Consumers –42% 22+, Expenditures –54%
	Other Ethnicit Race	Birth to 2, Consumers – 17% Birth to 2, Expenditures – 14% 3 to 21, Consumers – 8% 3 to 21, Expenditures – 7% 22+, Consumers – 4% 22+, Expenditures – 4%	Birth to 2, Consumers – 22% Birth to 2, Expenditures-18% 3 to 21, Consumers – 8% 3 to 21, Expenditures –7% 22+, Consumers –4% 22+, Expenditures –4%
	A OTIVITU	ES STIMMADA	

ACTIVITIES SUMMARY
NLACRC Plan to Address Goal 9:

Same activities as Goal 7



Period: January 1, 2023 - June 30, 2024

Compliance Measure (Required)

	Goal	Measure	Statewide Average June 2021	NLACRC June 2021	Statewide Average June 2022	NLACRC June 2022
10.	Increase the percentage of individuals with current CDERs	Number and percent of individuals (Status 1 or 2) Current Client Development Evaluation Report(CDER) or Early Start Report (ESR)	98.39% 310,715	99.13% 23,778	98.21% 323,657	98.84% 25,089

ACTIVITIES SUMMARY NLACRC Plan to Address Goal 10:

New Staff Orientation/Training

Name of Training: CDER/Person Centered Planning Training

Frequency: Every month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 3

Frequency: Every month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 2

Frequency: Every month

Metric: Number of training hours for new staff trained within first sixmonths of

employment.

Data Source to Evaluate: Human Resources & Training



Period: January 1, 2023 - June 30, 2024

Compliance Measures (Required). Activities Optional					
Measures	Audit Compliance in all Regional Centers as of December 2021		Audit Compliance in all Regional Centers as of December 2022		
1. Passes independent audit	95.23%	YES	90%	YES	
2. Passes DDS audit	95.23%	YES	100%	YES	
3. Audits vendors as required (FY2018-19 vs. FY2019-2020)	100%	*	86%	MET	
4. Didn't overspend operations budget	100%	YES	100%	YES	
5. Participates in federal waiver	100%	YES	100%	YES	
6. CDER/ESR Currency	98%	98.92%	98%	98.92%	
7. Intake/assessment and IFSP timelines (ages 0-2).	**	88%	**	82%	
8. Intake/assessment timelines for consumers ages 3 and above.	95%	100%	94%	100%	
9. IPP Development (WIC requirements)	99%	97.90%	99%	N/A	
10. Individualized Family Service Plan (IFSP) Requirements Met	87%.	86.2%	87%	86.1%	

^{*} DDS Department Directive 01-041520 waived the requirements of Article III, Section 9, paragraph (c) of the Department's regional center contract.

^{**} DDS Department performance measures for all regional centers is not available on the DDS report and website for this measure. Data source for statewide averages: https://www.dds.ca.gov/rc/dashboard/performance-contracts/.



Period: January 1, 2023 - June 30, 2024

"Outside of the box" performance measures:

- 1. Increase recruitment in San Fernando Valley, Antelope Valley, and Santa Clarita Valley.
 - a. Measurable goal: Expand recruitment platforms to include Social Media (Facebook, Instagram, etc.), Print media (Antelope Valley Press), Online Recruitment Resources (LinkedIn, NLACRC Website, Indeed, ZipRecruiter, Foundationlist.org, DiversityJobs, etc.), Partnering with local entities (AJCC, CSUN, etc.), Utilizing Temporary Agencies (Royal Staffing, HRCS, Robert Half, etc.), Employee Referrals, and Participating in Job Fairs
- 2. Increase service provider access to trainings to increase quality of services
 - a. Measurable goal: Conduct or provide information on available external trainings for service providers with reputable subject matter experts to provide growth opportunities
- 3. Increase educational opportunities for Community Services staff development
 - a. Measurable goal: Employment Specialist to attend trainings to be kept informed and up to date of best practices
- 4. Increase promotion of Requests for Vendors (RFVs) to increase the number of service providers for respite, Supported Living Services (SLS), and Personal Assistance (PA), with a focus on geographic areas not currently served.
 - a. Measurable goal: Number of respite, SLS, and PA providers by geographic location
- 5. Create resources and best practices for service providers to assist consumers with employment preparedness
 - Measurable goal: Employment Specialist collaborate with service providers to create resources and best practices to educate about providing employment assistance, including talking to consumers about job options, helping consumers prepare for job placement, and providing job coaching when employed
- 6. Gather and assess data to develop responsive strategies
 - a. Measurable goal: Gather Purchase of Service data based on service code
 - b. Measurable goal: Obtain information from the community (surveys, comments, and Q&A during public meetings
 - c. Measurable goal: Log category of needs from walk-ins, and calls to receptionist and Parent & Family Support Specialists
 - d. Measurable goal: Review fair hearings and 4731 complaints to assess areas of need, improvement, and/or clarification
 - e. Measurable goal: Create breakout rooms during Cafecito Entre Nos meetings to directly discuss complaints and other matters
 - f. Measurable goal: Change format of Aprendiendo to promote conversation/discussion rather than a presentation
 - g. Measurable goal: Assess the need for staff training on the client experience (similar to "customer service")
 - h. Measurable goal: Assess through Disparity Committee, Executive Committee, and/or Consumer Services Committee



Period: <u>January 1, 2023 – June 30, 2024</u>

- 7. To increase intake applications for children aged 2 to 7 years old
 - a. Activities include: Outreach to various agencies to reach children who were not recruited from 2020-2022, due to COVID-19.
 - Mainstream preschools
 - Special education preschools
 - Kindergartens
 - School councils
 - English Language Advisory Committees (ELAC)
 - Daycares
 - Child Resource Centers
 - First 5 LA/AV
 - AVPH Wellness Center
 - Keppel Union Wellness Center
 - LA United School District Wellness Center
- 8. To increase the number of families securing appropriate resources to meet their individualized needs through service coordination
 - a. Activities include:
 - Increase partnerships with Community-Based Organizations (CBOs) regarding generic resources
 - Track advocacy assistance for families
 - Explore a Generic Resource Specialist position
 - Generic Resource Application Boot Camp
 - Increase virtual generic resource materials for staff

North Los Angeles County Regional Center

Board of Trustees Policy DRAFT

Code of Conduct

Scope

This policy applies to NLACRC Board of Trustees.

Purpose

To establish a policy to support, facilitate, and enhance the participation of $\frac{b}{B}$ oard members in $\frac{b}{B}$ oard meetings, $\frac{b}{B}$ oard committee meetings, $\frac{b}{B}$ oard $\frac{c}{B}$ oard any other $\frac{b}{B}$ oard—sanctioned activities, through the establishment of guidelines for $\frac{b}{B}$ oard member conduct.

Rationale

- Governance of the <u>*Regional eCenter</u> is predicated upon <u>the establishment and maintenance of</u> a viable volunteer governing Board, composed of individuals with demonstrated interest in, or knowledge of, developmental disabilities.
- Effective governance requires <u>bB</u>oard members to dedicate their time, skills, knowledge, and perspectives to ensure that all actions taken by the <u>bB</u>oard support NLACRC's mission, vision, values, and strategic goals, and are in the best interests of the Center.
- Adherence to a Code of Conduct will ensure that the <u>bB</u>oard is able to govern the Center effectively, and will limit actions or conduct that interferes with the <u>bB</u>oard's ability to perform their important role here at the Center.

Policy

All board members are expected to adhere to the following Code of Conduct in the performance of their roles and duties as a member of the Board of Trustees of the NLACRC:

- To support NLACRC's mission, goals and policies, and act in NLACRC's best interests.
- To attend and actively participate in Board meetings.
 - o To be on time.
 - To be prepared, including having read the agenda and materials prior to meeting.
- To join and actively participate in at least one committee each year.
 - o To attend committee meetings and take on tasks as needed or requested.

• To volunteer skills, experience, and contacts in service to NLACRC's goals and needs.

Commented [NB1]: Fix spacing if necessary.

- To represent NLACRC in a positive and supportive manner at all times and in all
 places. To seek the involvement and interest of the community in NLACRC's
 programs and activities.
- To respect the perspectives and contributions of fellow Board members and staff, and to set aside my personal interests in Board discussions and votes.
- To serve with respect, concern, courtesy, and responsiveness in carrying out the
 organization's mission and demonstrate the highest standards of personal integrity,
 truthfulness, honesty, and fortitude in all our activities in order to inspire confidence
 and trust in our activities.
- To use sensitivity and make efforts to avoid offensive or malicious language or statements. Members should not make disparaging remarks toward age, gender, race, ethnicity, disability, religious orientation, or sexual orientation of other board members. Good faith efforts should be made toward cultural sensitivity.
- Avoid representing myself on behalf of, or as a spokesperson, for NLACRC or the Board of Trustees without prior expressed consent of the Board of Trustees or NLACRC. This does not mean you cannot identify yourself as a NLACRC Trustee of the Board.
- Annually, or upon seating on the bBoard, acknowledge and sign the Code of Conduct pledge, a copy of which is attached hereto as Exhibit Aolicy in writing.

Failure to Adhere

In the event that a bBoard member fails to adhere to the Code of Conduct Policy, a complaint may be filed with the President of the Board of Trustees, or any other Officer of the Board, or the Chief Human Resources Officer ("CHRO"). All complaints will be investigated promptly, resulting in a recommended resolution if noncompliance is found.

Procedure

- Complaints regarding a Board member's conduct should be directed to the Executive Committee. President, or other Officer, of the Board, or the CHROhief Human Resources Officer. Complaints may be verbal or may be submitted in writing to NLACRC Board Support at boardsupport@nlacrc.org. All complaints submitted to boardsupport@nlacrc.org will be provided to both the Board President and CHROthe Executive Committee.
- 2. Complaints will be addressed by the a designee of the Executive Committee, which may include President and/or the Chief Human Resources Officer and outside counsel.

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Commented [NB2]: Who would emails addressed to boardsupport@nlacrc.org go to? Let's say the Complaint is against the Board President but the individual sending it wants to remain anonymous. Is the only option to make a verbal report to another Officer or the CHRO? Or can a written report be sent directly to another Board Officer or the CHRO?

Commented [NB3]: What is your intention with the word "addressed"? Would this include hiring an outside investigator?

Commented [NB4]: Will the President, Officer or CHRO be making the recommendation? Or will one of those individuals present the outcome of the investigation to the Executive Committee, which will make a recommendation to the full Board? Or will the President, Officer or CHRO be making the recommendation to the full Board. This should probably be specified.

dDepending upon the nature and frequency of the noncompliance violation, recommended resolutions may range from counseling the bB oard member, to providing additional training, up to a recommendation of removal from the bB oard for cause, among other remedial actions commensurate with the severity of the offense. Removal for cause must adhere to the bylaws, which requires a majority vote by the Trustees then in office. {Article IV, Section 7(g)(2)}.



Draft Strategic Plan

BACKGROUND:

Since Fiscal Year 2013/14, ARCA has operated under a strategic plan to help ensure the work of the staff and the organization as a whole are consistent with its overall goals. As each strategic plan generally covers a three-year period, specific priorities consistent with the plan are identified each year. In October 2022, ARCA Board members and staff participated in a strategic planning retreat to identify the major priorities for the organization for Fiscal Years 2023/24 – 2025/26, which are:

- Funding for Current and Future Needs;
- Flexible and Sustainable Services;
- Preservation of the Lanterman Act and Efficacy of the Developmental Services System; and,
- Inclusive and Equitable Communities and Decision-Making.

The Board of Directors also spent time at the retreat identifying key strategies for approaching the work in the above areas. Since that time, ARCA staff drafted a strategic plan document that incorporates work from the retreat.

ANALYSIS/DISCUSSION:

ARCA's Strategic Plan for Fiscal Years 2023/24 – 2025/26 is now in draft form and ready to share with individual regional center boards as well as various ARCA discipline groups and committees for their comments and feedback. Please keep in mind through the feedback process:

- ARCA's mission is to <u>support regional centers</u> to do their work on behalf of individuals with developmental disabilities in the community.
- This plan is intended to help prioritize work for a three-year period, so it is by design very high level.
- As the group spent a significant amount of time in the pre-retreat survey and at the retreat itself
 establishing the overall goals (beginning with "ARCA envisons"), ARCA needs feedback that helps to
 clarify and strengthen those.
- Given the specific strategies (beginning with "ARCA will work to implement this change by") are less refined, comments designed to identify and shape those are welcome.
- After review and discussion, please email feedback to Amy Westling (<u>awestling@arcanet.org</u>) no later than <u>March 31, 2023</u>. This will enable staff and the Strategic Planning Committee to make needed revisions for final approval at the June ARCA Board of Directors meeting.

ATTACHMENT(S): Draft Strategic Plan for Fiscal Years 2023/24 – 2025/26



Association of Regional Center Agencies Strategic Plan Fiscal Years 2023/24-2025/26

The Strategic Planning Process

The Intent and Objective: Why a Strategic Plan?

Strategic planning determines where an organization is going, how it's going to get there, and how it'll know if it got there or not. The fundamental purpose of strategic planning is to align the mission and vision with appropriate strategies and initiatives. Without them, the plan exists in a vacuum. And organizations that develop plans without considering mission and vision usually fail in their execution. The value statements are also important to the strategic planning process, as they provide a touchstone for the organization for how business decisions are made, and what are acceptable strategies and tactics. Goals, strategies, and tasks are the cornerstone of every strategic plan. They are the roadmap for where the organization is going. They define what will be accomplished, by whom, and when. By having focused goals, strategies, and tasks — coupled with a strong accountability system — an organization's likelihood of success is enhanced.

The Next Step: Conducting a Strategic Planning Process

In 2012, ARCA began work on the strategic plan that guided its efforts during the 2013-14 through 2015-16 Fiscal Years. The plan was later revised to guide the organization's work during both the 2016-17 through 2018-19 Fiscal Years and the 2019-20 through 2022-23 Fiscal Years. Most recently, ARCA convened a strategic planning retreat in October 2022 to begin work on its updated strategic plan, intended to guide its work in the coming three Fiscal Years. This document is the result of that concentrated discussion, as well as further consultation with ARCA's various discipline groups and committees.

Given the extensive review of the Vision, Mission, and Values of the organization that was undertaken in 2012, it was agreed that they continue to be current and applicable. It was felt that it was essential all regional centers have an opportunity to participate in the strategic planning process. As such, each regional center Executive Director and Board Delegate was asked to jointly complete a survey regarding the current strengths, challenges, and priorities that should be considered as the strategic planning process unfolded.

Vision, Mission, Values

Vision

The Association of Regional Center Agencies effectively represents a strong regional center system that supports Californians with developmental disabilities and the developmental services system.

Mission

The mission of the Association of Regional Center Agencies (ARCA) is to promote, support, and advance regional centers in achieving the intent and mandate of the Lanterman Developmental Disabilities Services Act in providing community-based services that enable individuals with developmental disabilities to achieve their full potential and highest level of self-sufficiency.

Values

The Association of Regional Center Agencies values:

- Respectful interactions with all stakeholders;
- Democratic decision-making among its members;
- Honesty and integrity in communicating with all stakeholders;
- Analysis of relevant information and crafting of policy;
- Assertive leadership and advocacy; and,
- Effective negotiation of agreements with DDS and partner organizations.

Funding for Current and Future Needs

ARCA will pursue funding to enhance stability and supporting greater individual choice while achieving the intent and mandate of the Lanterman Developmental Disabilities Services Act.

ARCA envisions <u>sustainable funding</u> that is <u>adequate to meet mandates</u> and allows California to keep its commitments to people with developmental disabilities through <u>individually-chosen</u> <u>services</u> and <u>lifelong service coordination</u> supported by <u>manageable caseload ratios</u>.

The developmental disabilities service system has seen...

The State has made recent investments to reduce caseload ratios, particularly for targeted populations, and update service provider rates to link them to the actual cost of service delivery, but neither reform is accompanied by a long-term commitment to keep funding levels updated. Steps are being taken to tie reimbursements to individual outcomes, with priority being given to more robust data collection, choice, person-centered planning, and cultural competence. The lack of guaranteed funding leads to annual budgetary vulnerability. In the long term, this uncertainty, coupled with a lack of automatic adjustments in response to inflationary pressures, has resulted in inadequate staffing and high turnover in both regional center and service provider workforces, which compromises quality outcomes for individuals, particularly in the areas of choice of service providers and lifelong person-centered planning.

- 1. Directly advocating for rates that are based on the actual cost of service provision and automatically adjust with time, leveraging ARCA's resources to calculate fiscal impacts, connecting advocates to legislative champions and decisionmakers in the Administration, and demonstrating the importance of this due to its impact on individuals served and their families as they seek greater person-centered choice and community participation.
- 2. Leading efforts to modernize and automatically update regional centers' Core Staffing Formula through a legislative and pubic relations campaign that includes rich data, cultivation of legislative champions, and advocacy coalition building with active participation from people served, their families, and local and statewide service provider organizations to highlight the importance of supporting robust service coordination.
- 3. Exploring and pursuing, with the support of stakeholders and governmental champions, reliable funding sources for the developmental services system outside the state's General Fund, beginning with an in-depth analysis of the funding streams for education and behavioral health systems.
- 4. XXX
- 5. XXX

Flexible and Sustainable Services

ARCA will pursue reforms to enhance resources to meet individual needs as envisioned in the Lanterman Developmental Disabilities Services Act.

ARCA envisions a developmental services system that efficiently offers a greater variety of services and enhanced choice to people with developmental disabilities in order to empower them to meet their individualized person-centered goals.

The developmental disabilities service system has seen...

A foundational tenet of California's developmental services system is that services and supports should be uniquely tailored to enable each person served to meet his or her individualized goals, which requires the expansion of flexible service models as the people served become increasingly diverse racially, ethnically, and linguistically, as well as in their needs and preferences. The system has seen fiscal constraints and limitations on flexibility in the services it can offer to meet identified needs. Individuals with developmental disabilities and their families are increasingly expressing a desire to access more flexible, innovative, individualized services. The pandemic demonstrated the benefit of flexible service options and control for those served by regional centers and their families, particularly as a tool for increasing service equity and satisfaction.

- 1. Building momentum for needed regulatory changes, including through public relations efforts, to enhance service flexibility informed by ideas provided by individuals served and their families through focus groups, surveys, and other means.
- 2. Promoting the value and importance of regional center flexibility to operationalize DDS directives and statutory and regulatory changes, with input from their local communities.
- 3. Embedding the philosophy of person-centeredness in formal decision-making processes and community communications and advocating for dedicated funding for person-centered education and training for regional centers and the broader community to empower and support individualized planning and resource matching.
- 4. XXX
- 5. XXX

Preservation of the Lanterman Act and Efficacy of the Developmental Services System

ARCA will pursue greater stakeholder and decision-maker understanding and support for the structure of California's developmental services system as outlined in the Lanterman Developmental Disabilities Services Act and Early Intervention Services Act.

ARCA envisions a developmental services system that <u>visibly</u> and <u>effectively</u> supports people with developmental disabilities through regional centers, which maintain their independence, are <u>accountable to</u>, <u>representative of</u>, and <u>embedded in their communities</u>, and <u>earn the support</u> of those served, legislators, and stakeholders.

The developmental disabilities service system has seen...

Regional centers were intentionally designed to meet the needs of their communities by making them responsive to both their state funding source and, through volunteer boards of directors, local communities. Uniform statutes, regulations, and contracts establish a consistent framework for services across regional center catchment areas. Rapid growth in both population served and state fiscal investment have led to increased scrutiny of individual regional centers and the whole service system, as well as questions about the balance between statewide consistency and local flexibility. With the support of various advocacy groups, the Legislature and Administration have increasingly constrained local control in recent years. Since its inception, the developmental services system has enjoyed bipartisan legislative support, but given legislative turnover, it lacks consistent legislative champions.

- 1. Educating legislators and staff about the regional center system and the value of its independence through a coordinated media strategy that will include clear, customizable materials, multilingual outreach, and refined talking points augmented by Grassroots Day and ongoing networking.
- 2. Improving collaboration with stakeholders and decision-makers to champion preservation of the regional center system through regular engagement and educational opportunities, including for those without ready digital access.
- 3. Enhancing ARCA's role as a recognized authority for quality information and perspectives on the developmental services system through reporting on strengths and challenges, and highlighting the strategies regional centers use to meet the needs of their communities.
- 4. Developing meaningful metrics supported by clean, actionable information that demonstrate regional center effectiveness through the establishment of standard and consistent definitions, data collection on meaningful outcomes, and periodic evaluation with an eye towards continuous improvement.
- 5. Supporting greater consistency in performance across all 21 regional centers through the sharing of quality data, the establishment of a peer review and support structure, creation of a cross-regional center intervention and escalation strategy, and formalization of a mentorship process for incoming regional center Executive Directors.

Inclusive and Equitable Communities and Decision-Making

ARCA will pursue reforms to support greater visible and authentic participation of those served by regional centers in all of California's geographic, ethnic, and linguistic communities.

ARCA envisions a developmental services system <u>led by the people it serves</u> that supports their <u>meaningful integration</u>, better aligns with their <u>wants</u>, <u>needs</u>, <u>and aspirations</u>, and <u>enhances</u> their quality of life as measured by data and their satisfaction.

The developmental disabilities service system has seen...

While its origins were in a professional-led medical model, the developmental services system continues to evolve to improve its person-centeredness and its systemic and individually-defined outcomes. Building on an understanding that people are the experts in their own lives, federal guidance now requires the balancing of what is important for the individual with what is important to them. Increasingly, communities are moving from acceptance to integration to inclusion of individuals with disabilities, but there is still a lack of broad understanding of the value their participation brings to community life. Increasingly, there is greater understanding of the importance of hearing from people served directly when possible and following their lead in the development of policy and practices, although much work remains to be done in this area to ensure its more consistent application. Much of the future work in this area can be supported through partnerships with community-based organizations to leverage available funding sources (e.g., Service Access and Equity, Community Grants, Placement Plan/Community Development Plan).

- 1. Identifying, supporting, and advancing people served to participate in statewide and local committees, commissions, and initiatives, including those internal to ARCA, through highlighting their strengths, contributions, and expertise.
- Developing two-way communication and education strategies with diverse communities
 to support advocacy for improving information and services available to local
 communities.
- 3. Increasing the recognition by the general public and other agencies of the presence and contributions of people served by regional centers through public relations and networking efforts.
- 4. Supporting the work of regional centers and their partners to increase inclusion in community life (*e.g.*, employment and housing) among individuals with developmental disabilities through better outreach tools and advocacy for needed service capacity.
- 5. Enhancing the capacity of regional centers to develop more culturally sensitive and responsive services and supports through the building of provider capacity that reflects the diversity of various cultural and ethnic communities.
- 6. Advocating for the flexible development of a greater array of services and supports to meet the needs of people requiring differing levels of support intensity and seeking funding to address identified shortfalls in this area.

Operational Focus Area: Regional Center System Efficacy

ARCA will pursue an effective, efficient organization that promotes the goals and objectives of the ARCA Board of Directors and encourages and supports regional center efforts in California.

ARCA envisions an <u>effective</u>, <u>efficient</u> organization that <u>promotes the goals and objectives</u> of the Board of Directors, and <u>encourages and supports</u> regional center efforts in California.

- 1. Fostering relationships with state-level partners and stakeholders, including DDS, the Legislature, the State Council on Developmental Disabilities, The Arc and United Cerebral Palsy California Collaboration, and others.
- 2. Representing ARCA, the regional centers, and the developmental disabilities service system in legislative and Budget hearings, promoting the developmental disabilities service system at Grassroots Day and other venues, and by being responsive to requests for information, testimony, and formal and informal meetings with state representatives, including members of the Legislature, DDS, and others.
- 3. Promoting education and information sharing within the ARCA office, with the Board of Directors, its committees and sub-committees, task forces, key stakeholders, and our community.
- 4. Providing relevant and vital information to internal and external partners in a respectful, clear, and concise manner.
- 5. Maintaining fiscal responsibility to its regional center members with an unqualified independent audit with no material findings, and operating within budget.

Implementation and Accountability

The Strategic Plan establishes a prioritization of activities for the next three years.

Annual budget and work plan development in each fiscal year should be organized around the focus areas of the Strategic Plan.

Annual focus areas will be developed at the beginning of each fiscal year.

Periodic reporting on progress will ensure there is ongoing awareness of, and engagement with, the plan.





MEMORANDUM

DATE: February 8, 2023

TO: All Eligible Board Members

FROM: Clarence Foster, Chief Human Resources Officer (CHRO)

RE: Completion of the Executive Director's Performance Evaluation –

Due March 8, 2023

In accordance with the Executive Director's Evaluation Board of Trustees Policy, all board members with three (3) or months of time served are required to participate in the executive director's performance evaluation. Please note that failure to submit a signed evaluation to the Board President by the scheduled date will be treated as resignation from the Board, unless discussed with the Board President and there is agreement to grant an extension.

The board president will be available to help board members who need assistance regarding content, therefore, please feel free to contact **Ana Quiles** at **ariquiles@yahoo.com**.

If you are experiencing any technical difficulties completing the performance evaluation or wish to complete a non-electronic version of the performance evaluation, please feel free to contact **Clarence Foster** at **cfoster**@nlacrc.org or you may call him at **818-756-6125**.

Attached you will find the Executive Director Performance Evaluation that is in an Adobe PDF fillable form, please complete all areas and return no later than March **8**, 202**3** to Lawya Rangel, NLACRC Legal Counsel at lirangel@csattys.com, or fax number: (909) 941-3389 or mail to:

Lawya L. Rangel Clouse Spaniac Attorneys 8038 Haven Avenue, Suite E Rancho Cucamonga, CA 91730

Please note the following:

"Needs Improvement" should only be used if the following has occurred:

- 1) The issue has been identified by a board member and documented in writing to the board president or an elected officer;
- 2) The issue has been addressed at an Executive Session of the Executive Committee during the months between October to January;
- 3) The Executive Committee has confirmed that there is a need for improvement;
- 4) The board president or designated member of the Executive Committee has met with the Executive Director regarding the performance deficit identified, the improvement needed, and any performance recommendations made by the Executive Committee; and
- 5) The Executive Director has been provided with a full performance review period to address the issue.

Thank you for your participation in this board process!

North Los Angeles County Regional Center

Executive Director Performance Evaluation

Completed by: Name:	
Board committees on which you have served	:
Board offices you have held:	
	eports; committee reports; monthly financial
and board goals; DDS feedback; pers	reports; quality assurance reports; ased contract; status of board self-audits connel reports from human resources; ARCA; consumer survey results; information provided in
Outstanding Exceeds Expectations	Meets Expectations Needs Improvement*
Executive Committee for action. Any time	oriate unless previously communicated to the ne the executive director's performance in any es should identify the area for corrective action.

• All eligible board members will have an opportunity to bring concerns/issues regarding any areas of performance in which the executive director needs to improve during the executive director's current performance period. If a board member has identified a deficit in the executive director's performance, the board member should bring this to the attention of the board president or any elected officer to be addressed at an executive session of the Executive Committee during the time period between October 22 through January 23. Upon confirmation of the need for improved performance, the board president or designated member of the Executive Committee will meet with the executive director regarding the performance deficit identified, the improvement needed and any performance recommendations made by the Executive Committee.

A.	Board Functions	Yes	No
1	Does the executive director support the regional center's programs and policies?		
2	Does the board have the information it needs to carry out its responsibilities?		
3	Is help and guidance provided to the board in setting policy?		
4	Are important items identified for board attention?		
5	Does the executive director clearly communicate policy decisions and actions to the board through regular reports?		
6	Does the executive director understand and communicate information on legislative issues?		
7	Do board members feel comfortable asking the executive director for help in understanding issues?		
8	Does the executive director effectively convey board goals and policies to the staff, consumers, service providers, and appropriate community agencies?		
9	Does the executive director provide adequate staff and technical assistance to committees?		
10	Does the executive director effectively represent the board with other agencies (e.g. the Association of Regional Center Agencies (ARCA), local public agencies, appropriate community agencies)?		
11	Does the executive director give the board information about possible problems and suggest plans of action?		
12	Are individual committee goals / actions combined into an overall plan for the board?		
13	Is appropriate board training provided?		
14	Are the annual fiscal audits (results of a review by an outside accounting firm) reported to the board?		
15	Does the board have a signed contract with DDS?		
16	Are the goals of the performance-based contract being met?		

Α.	Board Functions (continued)	Yes	No
17	Are monthly financial reports provided to the board?		
18	Are possible financial problems identified clearly and early?		
19	Are the Purchase of Service Expenditure Projection (PEP) reports reviewed by the board?		
20	If required, does the center have a credit line?		
21	Is a critical calendar of necessary actions issued each year?		
22	Is an annual status of insurance coverage provided to the board?		
23	Are potential legal problems and options clearly explained?		
Sun	nmary rating and comments on the executive director's performance in this	area:	
	Outstanding	provem	ent
In tl	nis category, what do you feel are the executive director's greatest strengths?		
	this category, what could the executive director change that would benefit hir onal center most?	n and/o	or the

B.	Center Operations	Yes	No
1	Does the center have a personnel manual and union contract that are legally compliant and consistent with the DDS contract?		
2	Have important changes in employment practices that could affect the level of case management services provided to consumers or employee morale been clearly explained to the board?		
3	Are union related issues being monitored and reported?		
4	Does the center have a staff development plan that supports its business?		
5	Are new program requirements anticipated and are needed resources developed?		
6	Are service standards current and reviewed by DDS?		
7	Are the rights of consumers safeguarded and promoted?		
Sun	nmary rating and comments on the executive director's performance in this	area:	
	Outstanding	provem	ent
In th	nis category, what do you feel are the executive director's greatest strengths?		
	this category, what could the executive director change that would benefit hir onal center most?	n and/o	or the

C.	Center Representation and Community Support	Yes	No	
1	Is the executive director in touch with local legislators and their staff?			
2	Does the executive director effectively convey board goals and policies to the staff, consumers, service providers, and appropriate community agencies?			
3	Is information distributed to the community?			
4	Does the executive director maintain communication lines to the service provider community?			
5	Does the executive director effectively represent the center at ARCA?			
6	Does the regional center work with public and private organizations (generic resources) to maximize the provision of services to consumers?			
7	Does the executive director and other staff meet on a regular basis with community and provider groups to share information and solve problems?			
8	Are self-advocacy groups supported?			
Sun	nmary rating and comments on the executive director's performance in this	s area:		
	Outstanding	nprovem	ent	
In th	In this category, what do you feel are the executive director's greatest strengths?			
For this category, what could the executive director change that would benefit him regional center most?			or the	

	It is very important that you provide comments in this section:
D.	Do you recommend that the board renews the executive Yes No director's contract?
	nmary rating and comments on the executive director's overall performance: Outstanding Exceeds Expectations Meets Expectations Needs Improvement rall, what do you feel are the executive director's greatest strengths?
	rall, what could the executive director change that would benefit him and/or the regional er most?

2023 Critical Calendar NLACRC Spring Legislative Event

Grassroots Visits to State Legislator's District Offices

#	Timeline/Item/Task	Person Responsible	Progress Report
1.	 Schedule group training at 1/25 EC meeting Evening hours training Daytime hours training Proposal to EC – March 6/7 or March 13/14 	Robert/ PI Staff	
2.	 Congratulate legislators Educate new legislators on dd service system Legislative priorities Core Staffing Formula Staffing Shortages Feedback from GCRC and Board 	Ruth/Board/ Robert	
4.	Early Feb: Outreach email to Board, VAC and CAC to solicit participation in outreach visits.	Robert/ Silvia	
5.	 Late Jan./Early Feb: Send meeting request letter to all 10 state NLACRC Legislators Legislative Spring Break April 3-7 in district when our legislators will be in their districts. Suggest sending as soon as possible via email. Follow up with phone calls. Current indications are visits will be in-person. 	Robert/ Silvia	
6.	 Mid Feb: Develop visit teams (from outreach) Review outreach. Seek diversity and geography. Recruit additional Board, CAC, and VAC members if needed. Conduct Teams meeting with staff who will assist and help coordinate visits. Determine Ruth's or Senior Staff availability to meet with all new legislators (relationship building) 	Ruth/Board/ Robert/Staff	
7.	March: Inform GCRC with training dates, information about visits, and legislative visit talking points to be discussed during meeting.	Robert	

8.	 Early March: Send out emails to individual teams with legislator packet, visit talking points, and training dates. Include tips and guidelines. Legislator information. Social media campaign information (check in's, twitter) 	Robert/ PI Staff
9.	March: Conduct legislative visits trainings with consultants. Strongly suggest role playing. This may be conducted via Zoom meeting.	Ruth/Board/ Robert/PI Staff
11.	March: Final draft questions based on talking points for visits.	Ruth/Board/ Robert
13.	Late March: Prior to visit, provide information to each legislator (representative questions, talking points and names of attendees)	Robert/Silvia
14.	 Late March- early April: Send out individual team emails. Date and time of visit Meeting format Tip sheet Assigned legislator information sheet Meet with teams 15-30 minutes prior to legislative visit to review and prep. Review coaching tip sheet provided from Robert.	Staff assigned to each legislative visit
15.	April: Draft and send thank you letters for legislators	Robert/Silvia

North Los Angeles County Regional Center **Executive Director's Report** February 8, 2023

I. North Los Angeles County Regional Center

A. Regional Center Staffing

<u>Director of Consumer Services – SFV Adult and Transition Services</u>

Donna Rentsch has promoted from Consumer Services Manager to Consumer Services Director, effective 01/17/2023. Donna has been with the Center for 20 years and has served in the capacity of Consumer Services Coordinator (CSC) and Quality Assurance Specialist in the Center's Antelope Valley Office prior to her position as Consumer Services Manager.

Community Services Manager

Venus Rodriguez-Khorasani joined NLACRC in 2014 as a CSC, and held the positions of Quality Assurance Specialist and Community Services Supervisor prior to her promotion as Community Services Manager.

Contract Administration and Privacy Manager

Megan Mitchell, a long tenured employee of the Center, has promoted to Contract Administration and Privacy Manager. Megan has served the Center in the capacity of CSC, Forensic Specialist, Consumer Services Supervisor and Consumer Services Manager.

Consumer Services Supervisor

Raul Gonzalez and Jessica Ross have promoted to the position of Consumer Services Supervisor under the Center's reformed education requirement. Raul was a former CSC in the Antelope Valley and is now the Consumer Services Supervisor – Antelope Valley OD/Floater Unit. Jessica was a CSC in the San Fernando Valley and is now responsible for the San Fernando Valley School Age 4 Unit.

Public Information Supervisor

Christopher Whitlock, a returning employee, has joined the Center as the new Public Information Supervisor. Chris' prior professional experience as Director of Media and Marketing will serve the Center well as he supports management and dissemination of the Center's public facing information. Additionally, Chris will provide technical assistance to direct service professionals who participate in the department's Direct Service Professional Training Stipend and Incentives Program Chris reports to the Public Information Manager Robert Dhondrup.

B. Recruitment and Retention

Recruitment and retention are a priority of the Center and is engaging in multiple strategies to onboard and retain staff. Towards that end, NLACRC is promoting the benefits of working for NLACRC such as the Loan Forgiveness Program and hybrid work schedule (as applicable, by position). Additionally, the "Fall in Love with North LA" Career Day/Job Fair will be held February 8th and February 11th from 9:00 AM to 1:00 PM at the San Fernando Valley office where onsite pre-interviews will be conducted as well as a raffle. A similar

Career Day will be held in the Center's Antelope Valley office. The Center has also reduced the minimum education requirement for the Consumer Services Supervisor and Community Services Supervisor positions from Master's to Bachelor's degree, resulting in two recent promotions.

New hires for December and January include 15 Consumer Services Coordinators (8 Bilingual Spanish), Deaf Specialist, Public Information Manager, Public Information Supervisor, Human Resources Information System Analyst, Human Resources Specialist I, Office Assistant II – DEIB, and Executive Assistant – IT.

Efforts toward retention include the provision of a "Hero Bonus Payment" of \$1,000 per employee (except the Executive Director) at the conclusion of the last fiscal year, the creation of Lead Consumer Service Coordinator positions, and an analysis of compensation for all positions. The Lead CSC positions will be non-case carrying positions and will be dedicated to training and support of new service coordinators. The compensation analysis was conducted by a consultant for all positions to assist in the establishment of fair market salary ranges and economic proposals for negotiations.

C. Staff Training

Lanterman Act and System Reform" training is being conducted in January, February and March for all Consumer Services staff (service coordinators, supervisors, managers, and directors); the training is open to additional staff from other areas of operation. The Lanterman Act portion of the training will focus on service coordination and program planning.

D. DDS Direct Service Professional Training Stipend and Incentive Program Pilot The Center will be conducting a pilot of the department's DSP Training Stipend and Incentive Program and will be providing technical assistance to DSPs to ensure they are able to access the online trainings. The program will provide DSPs with up to two (2) \$500 stipends for participating in the program. DSPs employed by regional center vendors or who provide services to Self Determination Program participants and spend at least 50% of their time providing direct services to consumers are eligible to participate.

E. Transportation Services

NLACRC has received a proposal from Ventura Transit in response to the Center's Request for Proposal serving NLACRC's San Fernando Valley.

F. Enhanced Community Integration for Children and Adolescent Grant

The Center submitted seven (7) Social Recreation Grant proposals to the department for consideration on January 31, 2023.

G. Coordinated Family Support Services Pilot Program/Adult Consumers Who Reside with Their Family

Service will coordinate and provide assistance to identify and provide needed supports to successfully reside in the family home, training and assistance to navigate comprehensive services including overcoming barriers to accessing generic resources, provide additional information on resources on consumer's diagnosis, coordinate training across providers specific to consumer's needs, assist with scheduling medical appointments, identify transportation options, identify backup supports, provide futures planning, and provide training that maximizes independence. CFS cannot replace or duplicate any regional center service coordination, generic service or other funded regional center service.

H. Inclusion, Equity and Diversity Policy - Cultural Competency Training

The third quarter training to be conducted between March and June of 2023 is "Valuing Diversity and Disability Culture."

I. Quality Assurance

For the month of January 2023, Community Services conducted 49 residential visits as follows:

- o 29 unannounced visits
 - 23 CCFs, 6 ICFs, 0 FHAs, 0- FFA (0 AV, 29 SFV/SC)
- o 14 Annual Reviews CCF and Day Program (2 AV, 12 SFV/SC)
- o 6 Other In-Person Visits (New Provider Orientation, QA/RD Walkthrough, 7 Day visit, SIR Follow/Complaint/CAP Follow-up, Attempted Unannounced Visits provider was not home)
- 1 Corrective Action Plans developed with residential providers
- o 0 Plan of Improvement with a non-residential provider

J. Consumer Statistics

As of January 2023, the Center served 32,817 consumers and applicants, including 4,565 in Early Start, and 25972 (increase of 325) in the Lanterman program. The Center's San Fernando Valley Office serves 20,116 individuals, Antelope Valley serves 8,086 and the Santa Clarita Office serves 3,672 (these totals include applicants, and individuals served under Lanterman and the Early Start programs).

K. Special Incident Reports

During the month of January 2023, the center received 63 special incident reports, 4 of which occurred in months prior to January. One incident of death in January was reported as COVID related.

L. Upcoming Support and Consumer Advocacy Group Meetings include:

- Virtual Cafecito Entre Nos, February 9th at 11:00 am
- Early Start Transition Workshop, February 14th, 9:00 am and 10:30 am
- Virtual Alianza de Hombre, February 14th at 7:00 pm
- Virtual Aprendiendo Entre Nos/Learning Amongst Us, February 16th at 10:00 am
- Self Determination Local Advisory Committee, February 16th at 3:00 pm
- Parent of Adult Consumers Support Group, February 22nd at 6:30 at 6:30 pm
- Cultivar y Crecer, February 24th at 6:30 pm

Additionally, the **Family Focus Resource Center** coordinates several support groups including "Black & African American Family Focus Support Group" "Mamas Latinas Grupo de Apoyo" and the "Parent Check-In and Chat". Please see **NLACRC's Calendar of Events**, which includes a **link** for the **Family Focus Resource Center**, for information regarding more support groups, training opportunities, dates, times, and links.

M. <u>Upcoming Community Events and Educational Training Opportunities</u>

- FFRC Alternative to Conservatorship, February 6th at 12:00 pm
- Fall in Love with North LA Career Day, February 11th at 9:00 am
- Different Thinkers, Different Learners Workshop, February 28th at 10:00 am

Additional training and support groups are offered as well! Please see **NLACRC's Calendar of Events**, which includes a **link** for the **Family Focus Resource Center**, for information regarding dates, times and links for these events, trainings and more.

II. COVID

A. Statistics

LA County Public Health COVID Update as of Tuesday, January 31, 2023 http://publichealth.lacounty.gov

Current Hospitalizations: 705

Positivity Rate: 5.6% (7-day average)

B. DDS Guidance/Directives

<u>Department Directive 01-122022: Extension of Waivers, Modifications, and Directors due to</u> COVID-19

The most recent directive issued by department extends the provisions of several former directives into late January and mid-February of 2023.

Governor Newsom has announced the State of Emergency will end February 28, 2023 which will end the extension of waivers and modifications due to COVID-19.

III. LEGISLATION

No update.

IV. STATE/LOCAL UPDATES

A. <u>Department of Developmental Services</u>

1. Regional Center Performance Measures (RCPM) Program

The RCPM program is voluntary and has six focus areas: Early Start, Employment, Equity and Cultural Competency, Individual and Family Experience and Satisfaction, Person-Centered Services Planning, and Service Coordination and Regional Center Operations. Each focus area has one or more performance measures tied to specific desired outcomes, with corresponding performance targets and incentives. DDS issued guidance in December for the following focus areas::

Early Start

Desired Outcome

Children who are eligible for Early Start are identified and enrolled in a timely manner. Measure 1

Child Find Plan identifying how a regional center intends to address and target underserved populations identified in federal regulations: unhoused children and families, children in foster care, and Native American children and families who reside on tribal lands; due April 1, 2023.

Measure 2

Number of children ages birth through age one and birth through age two determined eligible for Early Start services and have an Individualized Family Service Plan (IFSP). Incentive

Year 1 is baseline information and subsequent years will result in recognition of performance posted on DDS' website. Details of incentive types for subsequent phases of this measure will be provided in future directives from DDS.

Desired Outcome:

Children and families have timely access to Early Start services to minimize the impact of developmental delays.

Measure

Rate of IFSPs completed within 45-day timeframe from receipt of referral.

Incentive

Baseline data - no incentive

Person Centerer Services Planning

Desired Outcome:

Regional Center Service Coordinators demonstrate person centered planning skills.

Measure:

Number of certified Person-Centered Plan Facilitation Trainers employed by the RC and qualified to deliver plan facilitation training. One certified Person-Centered Planning Trainer for every 10,000 people served in FY22/23.

Incentive:

\$70,000 for submission of evidence of one certified Person-Centered Plan Facilitation Trainer for every 10,000 people; an additional incentive of \$15,000 per each additional certified trainer up to \$30,000 in additional incentive payments.

NLACRC is currently in the process of securing an agency to certify 7 staff in Person-Centered Planning by June 1, 2023 to qualify for the incentives.

2. Transportation Monthly Reimbursement Rate

DDS has authorized providers of transportation services to use a monthly reimbursement rate for the provision of transportation services to individuals effective January 1, 2023 through December 31, 2023. Providers are encouraged to offer services beyond the normal hours of operation and/or their typical destinations, thereby increasing opportunities for individuals to access transportation services. For each individual, providers may submit reimbursement claims for the following: One-quarter (0.25) unit for 1-6 trips, Half (0.5) unit for 7-12 trips, Three-quarters (0.75) unit for 13-18 trips, One (1.0) unit for 19 or more trips.

3. Quality Incentive Program

DDS has completed the validation of providers eligible for an \$8,000 incentive payment for completing the Direct Support Professional Workforce survey, 2,101. Regional centers may begin processing incentive payments.

Data Submission for Prevention and Wellness for ARFPSHNs on or before February 28, 2023 for those who have lived in the facility for at least 6 months, for vendored facilities in good standing, may receive an incentive payment.

B. Association of Regional Center Agencies (ARCA)

ARCA Board of Directors met on January 20, 2023; presentations were made by the California Dental Association and KP Public Affairs. ARCA has contracted with KP Affairs to support the advancement of ARCA's mission to advocate, promote, and support regional centers. KP Public Affairs will seek develop and maintain a positive image of ARCA and regional centers with policymakers and key political audiences, enhance ARCA's voice and visibility among key

audiences including the Legislature, Newsom Administration, membership, media and the public, and advance the public policy, and political narratives of Californians with developmental disabilities. Additional items reviewed by the board included an update to ARCA's Personnel Policies and the Association's Draft FY23-24 – FY25-26 Strategic Plan. ARCA is seeking feedback from each regional center's Board of Trustees on their draft strategic plan by the end of March. A legislative report was provided, including Capitol Briefing Day, Grassroots Day and a federal update. Lastly, ARCA Committee chairs provided reports from each committee meeting.

C. State Council on Developmental Disabilities (SCDD)

SCDD is conducting statewide trainings, presented in English and Spanish, every Monday at 10:00 am (except on holidays). "Regional Center Fair Hearings & Complaints" will be held February 13 (English) and 27 (Spanish); Self Determination Program will be held March 6 & 20 (English) and March 13 & 27 (Spanish). Link to trainings can be found on the SCDD website at https://scdd.ca.gov.

SCDD Statewide Self Determination Advisory Committee Meeting is Thursday, February 9 from 10:00 am to 4:00 pm.



Residential and Day Program Quality Assurance Monitoring Activities January 2023 - December 2023

Month	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Totals
# of Res'l & Day QA Staff	6												
# Annual Facility Monitoring Visits	14												14
# Unannounced Visits	29												29
# Corrective Action Plans Issued	1												1
*Substantial Inadequacies Cited:													
1.Threat to Health or Safety													
2.Provision of fewer staff hours than req'd													
3. Violations of Rights													
4.Failure to implement consumer's IPP	1												
5.Failure to comply with Admission Agreement													
6.Deficiencies handling consumers' cash resources													
7.Failure to comply with staff training reqs													
8.L4 fails to use methods per program design													
9.L4 fails to measure consumer progress													
10.Failure to take action per CAP	1												
11.Failure to use rate increase for purposes authorized													
12.Failure to ensure staff completes DSP requirements.													
13.Failure to submit Special Incident Report													
*per Title 17 §56054(a)	2	0	0	0	0	0	0	0	9	0	0	0	

NORTH LOS ANGELES COUNTY REGIONAL CENTER MONTHLY STATISTICS RECAP As of December 2022

	February 2022 Total	January 2023 Total	Increase/ Decrease	% Change
ALL VALLEYS				
Total Non-Early Start	24,576	25,972	1,396	5.68%
Total Early Start	4,491	4,565	74	1.65%
Unit Supervisor Cases (*) Self Determination Specialist (*)	141 63	227 16	86 -47	60.99% -74.60%
Prenatal Services	03	0	0	#DIV/0!
Provisional Eligiblity	285	517	232	81.40%
Development Center	14	14	0	0.00%
Enhanced Caseloads	0	237	237	#DIV/0!
On-Duty Specialist Unit	0	0	0	#DIV/0!
Enhanced Case Mgmt	37	32	-5	-13.51%
Specialized 1:25 Caseloads	22	29	7	31.82%
Pending Transfer	112	61 212	-51	-45.54%
Early Start Intake Services Intake Services	0 796	935	212 139	#DIV/0! 17.46%
TOTAL ALL VALLEYS	30,537		2,280	7.47%
CAN FERNANDO VALLEY				_
SAN FERNANDO VALLEY Adult Services	6,253	6,365	112	1.79%
Adult Unit Supervisor (*)	18	10	-8	-44.44%
Transition Services	3,166	3,240	74	2.34%
Transition Unit Supervisor (*)	28	37	9	32.14%
School Age Services	5,880	6,523	643	10.94%
School Age Unit Supervisor (*)	55	95	40	72.73%
Early Start Services	2,945	3,098	153	5.20%
Early Start Unit Supervisor (*)	5	3	-2	-40.00%
Early Start Intake Unit Supervisor (*) Prenatal Services	0	0	0	#DIV/0! #DIV/0!
Provisional Eligibility	285	517	232	#DIV/0! #DIV/0!
Provisional Unit Supervisor (*)	0	13	13	#DIV/0!
On-Duty Specialist Unit	0	0	0	#DIV/0!
Development Center	14	14	0	0.00%
Enhanced Caseload	0	237	237	#DIV/0!
Enhanced Case Mgmt	37	32	-5	-13.51%
Specialized 1:25 Caseloads	22	29	7	31.82%
Pending Transfer	112	61	-51	-45.54%
Early Start Intake Services	0	212	212	#DIV/0!
Intake Services Self Determination Specialist (*)	571 30	488 5	-83 -25	-14.54% -83.33%
TOTAL	19,421	20,116	1.558	8.02%
101712	10,421	20,110	1,000	0.0270
ANTELOPE VALLEY	40	7	40	00.400/
Self Determination Specialist (*) Adult Services	19 2,447	7 2,653	-12 206	-63.16% 8.42%
Adult Unit Supervisor (*)	2,447	2,033	-4	-44.44%
Transition Unit	1,947	1,836	-111	-5.70%
Transition Unit Supervisor (*)	6	6	0	0.00%
School Age Services	2,052	2,297	245	11.94%
School Age Unit Supervisor (*)	11	26	15	136.36%
Early Start Unit Supervisor (*)	9	32	23	255.56%
Early Sart Intake Unit Supervisor (*)	0	0	0	#DIV/0!
Early Start Services Intake Services	888 225	853 447	-35 222	-3.94% 98.67%
TOTAL	7,559	8,086	561	7.42%
7 0 11 12	1,000	2,000		717.270
SANTA CLARITA VALLEY				
Self Determination Specialist (*)	14	4	-10	-71.43%
Adult Services Transition Services	951	958 704	7	0.74%
School Age Services	627 1,253	704 1,396	77 143	12.28% 11.41%
School Age Supervisor (*)	1,233	1,390	0	#DIV/0!
Early Start Services	658	614	-44	-6.69%
Early Start Unit Supervisor (*)	0	0	0	#DIV/0!
Early Start Intake Unit Supervisor (*)	0	0	0	#DIV/0!
TOTAL	3,489	3,672	183	5.25%

^{*} Numbers not part of ratio count, but counted on Total All Valleys

^{**}This number is our total number of consumers as of December 2022 (Early Start, Lanterman and others: Intake services, pending transfers, DC, enhanced case management, etc.)

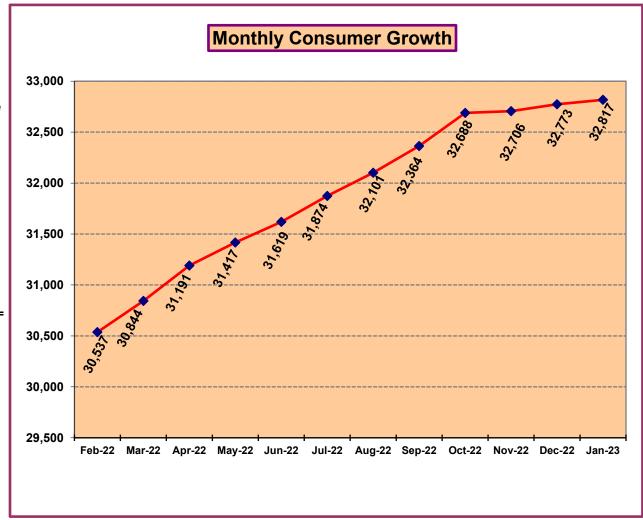
NLACRC TOTAL (ALL SERVICES) MONTHLY CONSUMER GROWTH ALL VALLEYS

Month	Consumers	Growth	% Change
Feb-22	30,537	307	1.01%
Mar-22	30,844	347	1.13%
Apr-22	31,191	226	0.72%
May-22	31,417	202	0.64%
Jun-22	31,619	255	0.81%
Jul-22	31,874	227	0.71%
Aug-22	32,101	263	0.82%
Sep-22	32,364	324	1.00%
Oct-22	32,688	18	0.06%
Nov-22	32,706	67	0.20%
Dec-22	32,773	44	0.13%
Jan-23	32,817		

 Total
 2,280

 Average
 207

 Percent Chg
 7.47%



January 2023 CSC Caseload Ratio

•	anuary							
San Fernando Valley								
Adult Services	Consumers	Ser. Coor.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Adult Unit I	761	8	95.1	1				
						- 1		
Adult Unit II	961	11	87.4			1		
Adult Unit III	8							
Adult Unit IV	973	9	108.1	2				
Adult Unit V	869	9	96.6	1				
Adult Unit VI	888	6	148.0	4				
Adult Unit VII	1005	10	100.5	2				
Adult Unit VIII	900	10	90.0	1				
Total	6,365	63	101.0	11		1		
Transition Services	Consumers	Ser. Coor.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Transition Unit I	905	9	100.6	2		1		
Transition Unit II		10				<u>'</u>		
	1,100		110.0	1				
Transition Unit III	1,235	13	95.0					
	3,240	32	101.3	3		1		
School Age Services	Consumers	Ser. Coor.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
School Age III	1,203	12	100.3			1		
				2				
School Age IV	1,093	9	121.4	3				
School Age V	1,085	9	120.6	3				
School Age VI	1,153	9	128.1	3				
School Age VII	1,085	11	98.6	1				
School Age VIII	904	10	90.4	-				
				10				
Total		60	108.7	10				
Early Start Services	Consumers	Ser. Coor.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Early Start 1 (Status 1 & 2)	670							
Early Start 1 Intake	79							
Early Start I Total	749	10	74.9			1		
		10	74.9			 		
Early Start 2 (Status 1 & 2)	576	 						
Early Start 2 Intake	84							
Early Start 2 Total	660	8	82.5	1				
Early Start 3 (Status 1 & 2)	585							
		 				1		
Early Start 3 Intake	55	_						
Early Start 3 Total	640	9	71.1	1				
Early Start 4 (Status 1 & 2)	520							
Early Start 4 Intake	53							
Early Start 4 Total	573	7	81.9	2				
		,	01.9					
Early Start 5 (Status 1 & 2)	445							
Early Start 5 Intake	31							
Early Start 5 Total	476	6	79.3	2				
Status 1 Over 36 mo.	36							
Total		40	77.5	6				
Total								
	Consumers		Case Ratio	Opening	Hold	Floater	OD	Assoc.
Total Non-Early Start	16,128	155	104.1	24		2		
Total Early Start	3,098	40	77.5	6				
Total		195	98.6	30		2		
				30				
SFV Self Determination Specialist*	5	2	2.5					
Intake Services	488	9	2.5 54.2					2
Intake Services	488	9	54.2	Opening	Hold	Floater	OD	
Intake Services Antelope Valley	488 Consumers	9 Ser. Coor.	54.2 Case Ratio	Opening	Hold	Floater	OD	Assoc.
Intake Services Antelope Valley Adult Unit I	488 Consumers 1,039	9 Ser. Coor.	54.2 Case Ratio 129.9	3	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II	488 Consumers 1,039 1,142	9 Ser. Coor. 8 11	54.2 Case Ratio 129.9 103.8	3 1	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III	488 Consumers 1,039 1,142 472	9 Ser. Coor. 8 11 4	54.2 Case Ratio 129.9 103.8 118.0	3 1 1	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II	488 Consumers 1,039 1,142	9 Ser. Coor. 8 11	54.2 Case Ratio 129.9 103.8	3 1	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III	488 Consumers 1,039 1,142 472 2,653	9 Ser. Coor. 8 11 4 23	54.2 Case Ratio 129.9 103.8 118.0 115.3	3 1 1 5	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit II Adult Unit III Total Transition Unit I	488 Consumers 1,039 1,142 472 2,653 987	9 Ser. Coor. 8 11 4 23	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7	3 1 1 5 2	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Total Transition Unit I Transition Unit II	488 Consumers 1,039 1,142 472 2,653 987 849	9 Ser. Coor. 8 11 4 23 11 8	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1	3 1 1 5 2 2	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total	488 Consumers 1,039 1,142 472 2,653 987 849 1,836	9 Ser. Coor. 8 11 4 23 11 8	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1	3 1 1 5 2 2	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit II Adult Unit III Adult Unit III Transition Unit I Transition Unit II Transition Unit II School Age I	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204	9 Ser. Coor. 8 11 4 23 11 8 19	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4	3 1 1 5 2 2 4 2	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total	488 Consumers 1,039 1,142 472 2,653 987 849 1,836	9 Ser. Coor. 8 11 4 23 11 8	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1	3 1 1 5 2 2	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit II Adult Unit III Adult Unit III Transition Unit I Transition Unit II Transition Unit II School Age I	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204	9 Ser. Coor. 8 11 4 23 11 8 19	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6	3 1 1 5 2 2 4 2	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Total Transition Unit I Transition Unit II Total School Age I School Age II	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093	9 Ser. Coor. 8 11 4 23 11 8 19	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6	3 1 1 5 2 2 4 2	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit I Transition Unit I Total School Age I School Age II School Age III Total	488 Consumers 1,039 1,142 2,653 987 849 1,836 1,204 1,093	9 Ser. Coor. 8 11 4 23 11 8 19	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4	3 1 1 5 2 2 2 4 2 5	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Total Transition Unit I Transition Unit II Total School Age I School Age III AV Early Start 1 (Status 1 & 2)	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093	9 Ser. Coor. 8 11 4 23 11 8 19	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6	3 1 1 5 2 2 2 4 2 5	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II School Age I School Age II School Age III Total	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480	9 Ser. Coor. 8 111 4 23 111 8 19 10 8	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6	3 1 1 5 2 2 2 4 2 5	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Transition Unit II School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480 10	9 Ser. Coor. 8 11 4 23 11 8 19	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6	3 1 1 5 2 2 2 4 2 5	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II School Age I School Age II School Age III AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 1 Cotal AV Early Start 1 Status 1 & 2)	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480 10 490 341	9 Ser. Coor. 8 111 4 23 111 8 19 10 8	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6	3 1 1 5 2 2 2 4 2 5	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Transition Unit II School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480 10	9 Ser. Coor. 8 111 4 23 111 8 19 10 8	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6	3 1 1 5 2 2 2 4 2 5	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II School Age I School Age II School Age III School Age III School Age III AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Intake	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480 10 490 3411 222	9 Ser. Coor. 8 111 4 4 23 111 8 8 19 100 8 8 18 5	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6	3 1 1 5 2 2 2 4 2 5 7	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Teas III School Age I School Age II School Age III School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total AV Early Start 2 Total AV Early Start 2 Total	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480 490 341 222 363	9 Ser. Coor. 8 111 4 4 23 111 8 9 10 10 8 5 5 5	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6	3 1 1 5 2 2 2 4 2 5	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II School Age I School Age II School Age III School Age III School Age III AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Intake	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480 10 490 341 222 363 37	9 Ser. Coor. 111 4 4 233 111 8 8 19 100 8 5 5	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6	3 1 1 1 5 2 2 2 2 4 4 2 5 7				Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total School Age I School Age II School Age III AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo.	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 480 10 490 341 22 363 37 Consumers	9 Ser. Coor. 8 8 11 11 4 23 111 8 8 19 100 8 8 5 5 5 Ser. Coor.	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio	33 11 11 55 22 2 44 22 55 77 44	Hold	Floater	OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Teas III School Age I School Age II School Age III School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total AV Early Start 2 Total AV Early Start 2 Total	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 480 10 490 341 22 363 37 Consumers	9 Ser. Coor. 111 4 4 233 111 8 8 19 100 8 5 5	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6	3 1 1 1 5 2 2 2 2 4 4 2 5 7				Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 47 1,093 480 10 490 341 22 363 37 Consumers 6,786	9 Ser. Coor. 8 111 4 4 23 111 8 19 100 8 8 18 5 Ser. Coor.	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1	3 1 1 1 5 2 2 2 2 4 4 2 2 5 5 7 7				Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Total Transition Unit I Transition Unit I Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total AV Early Start 2 Total Status 1 Over 36 mo.	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480 490 341 222 363 37 Consumers 6,786 853	9 Ser. Coor. 8 111 4 4 23 111 8 9 10 10 8 5 5 Ser. Coor.	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3	3 1 1 1 1 1 5 5 2 2 2 2 5 5 7 7 4 4 1 1 Opening 16 5 5 5 5				Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Total Transition Unit I Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total AV Early Start 2 Total Status 1 Over 36 mo.	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480 490 341 22 363 37 Consumers 6,786 853 7,639	9 Ser. Coor. 8 111 4 4 23 111 8 19 100 8 8 18 5 Ser. Coor.	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1	33 11 11 55 22 2 44 22 55 77 44 0Pening 16 55 21				Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Total Transition Unit I Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total AV Self Determination Specialist*	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 480 10 490 341 22 363 37 Consumers 6,786 853 7,639	9 Ser. Coor. 8 11 4 23 111 8 8 19 100 8 8 5 5 5 Ser. Coor. 600 10 70	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1	3 1 1 1 1 1 5 5 2 2 2 2 5 5 7 7 4 4 1 1 Opening 16 5 5 5 5				Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Total Transition Unit I Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total AV Early Start 2 Total Status 1 Over 36 mo.	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480 490 341 22 363 37 Consumers 6,786 853 7,639	9 Ser. Coor. 8 111 4 4 23 111 8 9 10 10 8 5 5 Ser. Coor.	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3	33 11 11 55 22 2 44 22 55 77 44 0Pening 16 55 21				Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Total Transition Unit I Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total Early Start Total AV Self Determination Specialist*	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 480 10 490 341 22 363 37 Consumers 6,786 853 7,639	9 Ser. Coor. 8 11 4 23 111 8 8 19 100 8 8 5 5 5 Ser. Coor. 600 10 70	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1	33 11 11 55 22 2 44 22 55 77 44 0Pening 16 55 21				Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit I Transition Unit II Total School Age I School Age II School Age III School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total AV Self Determination Specialist* AV Intake Services	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480 490 341 222 363 37 Consumers 6,786 853 7,639 7	9 Ser. Coor. 111 4 233 111 8 19 100 8 18 5 Ser. Coor. 60 100 70	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1	33 11 11 55 22 24 42 25 57 7 44 11 Opening 65 21 1	Hold	Floater	OD	Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Total Transition Unit I Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start AV Self Determination Specialist* AV Intake Services Santa Clarita Valley	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 480 10 490 341 22 363 37 Consumers 6,786 853 7,639 7 Consumers	9 Ser. Coor. 8 8 11 4 23 111 8 8 19 100 8 5 5 5 5 Ser. Coor. 60 70 5 Ser. Coor.	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 127.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio	33 11 11 55 22 2 44 22 55 77 44 0Pening 16 55 21			OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit I Transition Unit II Total School Age I School Age II School Age III School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total AV Self Determination Specialist* AV Intake Services	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480 490 341 222 363 37 Consumers 6,786 853 7,639 7	9 Ser. Coor. 111 4 233 111 8 19 100 8 18 5 Ser. Coor. 60 100 70	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1	33 11 11 55 22 24 42 25 57 7 44 11 Opening 65 21 1	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Total School Age II School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Total AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start AV Intake Services Santa Clarita Valley Adult Unit	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 400 490 341 222 363 37 Consumers 6,786 853 7,639 7 447 Consumers	9 Ser. Coor. 8 111 4 4 23 111 8 9 10 10 8 8 5 5 5 Ser. Coor. 60 10 70 Ser. Coor. 11	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 Case Ratio 87.1	33 11 11 55 22 24 42 25 57 7 44 11 Opening 65 21 1	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 10 490 341 22 363 37 Consumers 6,786 853 7,639 7 447 Consumers 958	9 Ser. Coor. 8 8 11 4 23 111 8 8 19 100 8 5 5 Ser. Coor. 60 70 5 Ser. Coor. 11	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio 87.1 67.0	33 11 11 55 22 24 42 25 57 7 44 11 Opening 16 55 21 1 Opening	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I I Adult Unit II I Adult Unit III Transition Unit I I Transition Unit II Transition Unit II Total School Age I School Age II School Age III School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit II Transition Unit II	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 470 2,297 480 10 490 341 22 363 37 Consumers 6,786 853 7,639 7447 Consumers 958	9 Ser. Coor. 8 111 4 23 111 8 19 100 8 8 118 15 5 5 Ser. Coor. 60 10 70 Ser. Coor. 11 66	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 Case Ratio 87.1	33 11 11 55 22 24 42 25 57 7 44 11 Opening 65 21 1	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 470 2,297 480 10 490 341 22 363 37 Consumers 6,786 853 7,639 7447 Consumers 958	9 Ser. Coor. 8 111 4 23 111 8 19 100 8 8 118 15 5 5 Ser. Coor. 60 10 70 Ser. Coor. 11 66	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio 87.1 67.0	33 11 11 55 22 24 42 25 57 7 44 11 Opening 16 55 21 1 Opening	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit I Transition Unit II Total Total Total	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 480 10 490 341 222 363 37 Consumers 6,786 853 7,639 7 447 Consumers 958	9 Ser. Coor. 11 Ser. Coor.	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 72.6 Case Ratio 113.1 85.3 109.1 Case Ratio 87.1 97.0 101.2	3 3 1 1 1 1 1 5 5 2 2 2 2 5 5 7 7 4 4 1 1 Opening 16 5 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I I Adult Unit II I Adult Unit III Transition Unit I I Transition Unit II Transition Unit II Total School Age I I School Age III School Age III AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit I Transition Unit I Total School Age Unit I	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 10 490 341 22 363 377 Consumers 6,786 853 7,639 7 447 Consumers 958	9 Ser. Coor. 11 4 23 111 8 8 19 100 8 18 5 5 5 Ser. Coor. 60 10 70 5 Ser. Coor. 11 1 6 6	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio 87.1 97.0 101.2	33 11 11 55 22 24 42 25 57 7 44 11 Opening 16 55 21 1 Opening	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II School Age I School Age II School Age III School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit I Transition Unit II School Age Unit I School Age Unit II School Age Unit II	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 470 2,297 480 10 490 341 22 363 37 Consumers 6,786 853 7,639 7447 Consumers 958 97 607 704 931 465	9 Ser. Coor. 8 111 4 4 23 111 8 8 19 100 8 8 18 15 5 5 5 5 5 5 5 5 5 5 5 5 5 5 6 C. Coor. 11 1 1 6 6 6 7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio 87.1 97.0 101.2	3 3 1 1 1 1 1 5 5 2 2 2 2 5 5 7 7 4 4 1 1 Opening 16 5 2 1 1 1 Opening 1 1 3 3	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit I Transition Unit II School Age Unit I School Age Unit I School Age Unit II Total	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480 10 490 341 22 363 37 Consumers 6,786 853 7,639 7 447 Consumers 958 97 607 704 931 465 1,396	9 Ser. Coor. 11 4 23 111 8 8 19 100 8 18 5 5 5 Ser. Coor. 60 10 70 5 Ser. Coor. 11 1 6 6	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio 87.1 97.0 101.2	3 3 1 1 1 1 1 5 5 2 2 2 2 5 5 7 7 4 4 1 1 Opening 16 5 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I I Adult Unit II I Adult Unit III Transition Unit I I Transition Unit II Transition Unit II Total School Age I School Age II School Age III AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit II School Age Unit II School Age Unit II School Age Unit II Early Start (status 1 & 2)	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 480 341 22 363 377 Consumers 6,786 853 7,639 7 447 Consumers 958	9 Ser. Coor. 8 111 4 4 23 111 8 8 19 100 8 8 18 15 5 5 5 5 5 5 5 5 5 5 5 5 5 5 6 C. Coor. 11 1 1 6 6 6 7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio 87.1 97.0 101.2	3 3 1 1 1 1 1 5 5 2 2 2 2 5 5 7 7 4 4 1 1 Opening 16 5 2 1 1 1 Opening 1 1 3 3	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit II School Age Unit I School Age Unit II School Age Unit I School Start (status 1 & 2) Early Start Intake	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,093 1,093 1,093 2,297 480 10 490 341 22 363 37 Consumers 6,786 853 7,639 97 447 Consumers 958 97 607 704 931 1,396 1,396 541 73	9 Ser. Coor. 8 111 4 23 111 8 8 19 100 8 8 18 15 5 5 5 Ser. Coor. 600 100 70 5 5 Ser. Coor. 11 1 6 6 7 5 12	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio 97.0 101.2 133.0 93.0 116.3	3 3 1 1 1 1 1 5 5 2 2 2 2 5 5 7 7 4 4 1 1 Opening 16 5 5 21 1 1 Opening 1 1 3 3 3 3 3	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I I Adult Unit II I Adult Unit III Transition Unit I I Transition Unit II Transition Unit II Total School Age I School Age II School Age III AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit II School Age Unit II School Age Unit II School Age Unit II Early Start (status 1 & 2)	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 480 341 22 363 377 Consumers 6,786 853 7,639 7 447 Consumers 958	9 Ser. Coor. 8 111 4 4 23 111 8 8 19 100 8 8 18 15 5 5 5 5 5 5 5 5 5 5 5 5 5 5 6 C. Coor. 11 1 1 6 6 6 7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio 87.1 97.0 101.2	3 3 1 1 1 1 1 5 5 2 2 2 2 5 5 7 7 4 4 1 1 Opening 16 5 2 1 1 1 Opening 1 1 3 3	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I I Adult Unit III Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit I School Age Unit I School Age Unit I School Age Unit I School Age Unit I School Status 1 & 2) Early Start (status 1 & 2) Early Start (status 1 & 2) Early Start (status 1 & 2) Early Start Intake	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,093 1,093 1,093 2,297 480 10 490 341 22 363 37 Consumers 6,786 853 7,639 97 447 Consumers 958 97 607 704 931 1,396 1,396 541 73	9 Ser. Coor. 8 111 4 23 111 8 8 19 100 8 8 18 15 5 5 5 Ser. Coor. 600 100 70 5 5 Ser. Coor. 11 1 6 6 7 5 12	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio 97.0 101.2 133.0 93.0 116.3	3 3 1 1 1 1 1 5 5 2 2 2 2 5 5 7 7 4 4 1 1 Opening 16 5 5 21 1 1 Opening 1 1 3 3 3 3 3	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Transition Unit II Transition Unit II School Age II School Age III School Age III AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit I Transition Unit I School Age Unit I School Age Unit I Early Start (status 1 & 2) Early Start Intake Early Start Total	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 10 490 341 22 363 37 Consumers 6,786 853 7,639 7 447 Consumers 958 97 607 704 931 465 1,396 541 73 614	9 Ser. Coor. 11 4 23 111 8 8 19 100 8 18 5 5 5 Ser. Coor. 60 10 70 5 Ser. Coor. 11 16 6 7 5 12	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio 97.0 101.2 133.0 93.0 116.3	3 3 1 1 1 1 5 5 2 2 2 2 5 5 7 7 4 4 1 1 Opening 16 6 5 5 21 1 1 Opening 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I I Adult Unit II I Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total School Age I School Age II School Age III AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit II School Age Unit I School Age Unit I School Age Unit II Early Start (status 1 & 2) Early Start Total Status 1 Over 36 mo.	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,836 1,093 480 10 490 341 222 363 37 Consumers 6,786 853 7,639 958 97 447 Consumers 958 97 607 704 931 465 1,396 541 73 614 11 Consumers	9 Ser. Coor. 8 111 4 23 111 8 8 19 100 8 8 18 15 5 5 5 Ser. Coor. 600 10 70 5 5 Ser. Coor. 11 11 10 Ser. Coor.	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio 97.0 101.2 133.0 93.0 116.3 Case Ratio	3 3 1 1 1 1 1 5 5 2 2 2 2 5 5 7 7 4 4 1 1 Opening 16 5 5 21 1 1 Opening 1 1 3 3 3 3 3	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Total Transition Unit I Total Transition Unit II Total School Age II School Age II School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480 10 490 341 22 363 37 Consumers 6,786 853 7,639 7 447 Consumers 958 97 607 704 931 465 1,396 541 73 614 11 Consumers	9 Ser. Coor. 11 4 23 111 8 19 100 8 18 5 Ser. Coor. 60 100 700 5 Ser. Coor. 11 6 7 5 Ser. Coor. 11 10 Ser. Coor. 300	54.2 Case Ratio 118.0 98.0 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio 97.0 101.2 133.0 93.0 116.3 61.4 Case Ratio 101.9	3 3 1 1 1 5 5 2 2 2 2 5 5 7 7 4 4 4 2 2 5 5 7 7 4 4 4 7 1 1 Opening 16 5 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater	OD OD 1	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I I Adult Unit III Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total School Age I School Age II School Age III AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit II School Age Unit II School Age Unit II Early Start (status 1 & 2) Early Start Total Status 1 Over 36 mo.	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480 341 22 363 37 Consumers 6,786 853 7,639 7 447 Consumers 958 97 607 704 465 1,396 541 73 614 11 Consumers	9 Ser. Coor. 11 4 4 23 111 8 8 19 100 8 8 18 11 1 1 100 100 100 100 100 1	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio 97.0 101.2 133.0 93.0 116.3 Case Ratio 101.9 61.4 Case Ratio	3 3 1 1 1 1 1 5 5 2 2 2 2 5 5 7 7 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater	OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I I Adult Unit III Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total School Age I School Age II School Age III AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit II School Age Unit II School Age Unit II School Age Unit II Early Start (status 1 & 2) Early Start Total Status 1 Over 36 mo.	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 1,093 480 10 490 341 222 363 37 Consumers 6,786 853 7,639 7447 Consumers 958 97 607 704 931 465 1,396 541 73 614 111 Consumers 3,058 614 111 Consumers	9 Ser. Coor. 8 111 4 23 111 8 8 19 100 8 8 18 5 5 5 5 5 5 5 6 Coor. 600 10 70 5 5 5 5 5 5 5 5 5 5 6 Coor. 11 1 1 1 6 7 7 5 5 12 12 10 10 10 10 10 10 10 10 10 10 10 10 10	54.2 Case Ratio 118.0 98.0 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio 97.0 101.2 133.0 93.0 116.3 61.4 Case Ratio 101.9	3 3 1 1 1 5 5 2 2 2 2 5 5 7 7 4 4 4 2 2 5 5 7 7 4 4 4 7 1 1 Opening 16 5 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater	OD OD 1	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit II Adult Unit III Adult Unit III Transition Unit I Transition Unit II Transition Unit II School Age II School Age II School Age III AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total Early Start Total Early Start Total Start Total Start Total Start Total Start Total Transition Unit II Transition Unit II School Age Unit II Early Start (status 1 & 2) Early Start (status 1 & 2) Early Start (status 1 & 2) Early Start Intake Early Start (status 1 & 2) Early Start Intake Early Start Total Status 1 Over 36 mo.	488 Consumers 1,039 1,142 472 2,653 987 849 1,836 1,204 1,093 2,297 480 341 22 363 37 Consumers 6,786 853 7,639 7 447 Consumers 958 97 607 704 465 1,396 541 73 614 11 Consumers	9 Ser. Coor. 11 4 4 23 111 8 8 19 100 8 8 18 11 1 1 100 100 100 100 100 1	54.2 Case Ratio 129.9 103.8 118.0 115.3 89.7 106.1 96.6 120.4 136.6 127.6 98.0 72.6 Case Ratio 113.1 85.3 109.1 89.4 Case Ratio 97.0 101.2 133.0 93.0 116.3 Case Ratio 101.9 61.4 Case Ratio	3 3 1 1 1 1 1 5 5 2 2 2 2 5 5 7 7 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater	OD	Assoc. Assoc.

January 2023 CSC Caseload Ratio

All Valleys	Consumers	Ser. Coor.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Total Non-Early Start	25,972	245	106.0	44		2	1	
Total Early Start	4,565	60	76.1	12		1		
Sub-total	30,537	308	99.1	57		3	1	
*Self Determination Specialist	16	3		1				
*Total Non Early Start Supervisor	192							
*Total Early Start Supervisor Status 1&2	35							
*Total Early Start Supervisor Intake								
Intake Services	935	14	66.8					4
Early Start Intake	212	5	42.4					3
Prenatal Services								
Provisional Eligibility	517	7	73.9			1		
Enhanced Caseloads	237	6	39.5					
On-Duty Specialist Unit							4	
AV On-Duty Specialist Unit						2	4	
Development Center	14							
Enhanced Case Management	32	1						
Specialized 1:25 Caseloads	29	2		1				
Pending Transfer	61							
Total	32,817	343	95.7	58		6	9	7

* Numbers not part of ratio count, but counted on Total Summary section					
SFV Adult Unit Supervisor*	10				
SFV Transition Unit Supervisor*	37				
SFV School Age Unit Supervisor*	95				
SFV Early Start Unit Supervisor*	3				
SFV Early Start Intake Unit Supervisor*					
Provisional Unit Supervisor	13				
SCV Early Start Unit Supervisor*					
SCV Early Start Intake Unit Supervisor*					
SCV School Age Supervisor*					
AV Adult Unit Supervisor*	5				
AV Transition Supervisor*	6				
AV School Age Supervisor*	26				
AV Early Start Unit Supervisor*	32				
AV Early Start Intake Unit Supervisor*					

FOR REFERENCE						
Cases included in Sub-Total above						
(1)Total Status 1 Over 36 mo.	84	Medicaid Wai	ver by Office:			
(2) Shared-in	8	SFVO	6565			
(3)Shared-out	26	SCVO	1390			
Total Early Start (Status 1 & 2)	4,193	AVO	2465			
Total Early Start Intake	407	IRT	16			
,		Total	10436			

- Notes
 (1) These are individuals transitioning from Early Start
 (2) Share-in: NLACRC provides case management
 (3) Share-out: NLACRC provides funding

Special Incident Reports in January 2023

Special Incidents	Children	Adults	Total
Other	4	52	56
Death	1	2	3
			50

Special Incident Reports From Prior Months & Reported in January 2023

Special Incidents	Children	Adults	Total
Other	0	1	1
Death	0	3	3
			4
TOTAL			63

Special Incident Types Report November 2022 through January 2023 & January 2022

Reasonably Suspected Abuse	23-Jan	22-Dec	22-Nov	22-Jan
Physical Abuse/Exploitation	0	1	2	4
Sexual Abuse/Exploitation	0	6	0	2
Fiduciary Abuse/Exploitation	1	2	1	1
Emotional/Mental Abuse/Exploitation	0	2	3	3
Physical and/or Chemical Restraint	1	1	1	1
	otal: 2	12	7	11
Neglect	0	•	4	0
Failure to Provide Care to Elderly/Adult	0	0	1	3
Failure to Provide Medical Care	1	0	0	2
Failure to Prevent Malnutrition	0	0	0	0
Failure to Prevent Dehydration	0	0	0	0
Failure to Protect from H/S Hazards	6	0	0	2
Failure to Assist w/ Personal Hygiene	0	0	0	0
Failure to Provide Food/Cloth/Shelter	1	0	0	0
	otal: 8	0	1	7
Serious Injuries/Accidents	0	7	0	0
Lacerations	3	7	2	3
Puncture wounds	0	0	0	0
Fractures	6	8	6	8
Dislocations	0	1	0	0
Bites	0	0	0	0
Internal Bleeding	3	1	0	3
Medication Errors	11	9	0	10
Medication Reactions	0	0	3	0
Burns	0	0	0	0
Tot		26	11	24
Unplanned/Unscheduled Hospitalization				
Respiratory Illness	5	12	13	10
Seizure Related	3	1	6	4
Cardiac Related	6	0	2	3
Internal Infections	5	11	14	8
Diabetes	0	0	0	0
Wound/Skin Care	0	0	0	2
Nutritional Deficiencies	2	2	1	5
Involuntary Psych Admission	1	4	2	2
	otal: 22	30	38	34
Victim of Crime	_		_	
Robbery	0		0	0
Aggravated Assault	3	1	2	0
Larceny	1	3	0	0
Burglary	0	1	0	0
Rape or Attempted Rape	0	1	0	0
	otal: 4	6	2	0
Other				
Missing Person-Law Notified	4	2	2	2
Death	6	15	11	11
	otal: 10	17	13	13
Total Incidents*	69	91	106	89

*Please note that some Special Incident Reports include multiple reportable incident types and thus, this summary reflects the total number of incident types received for the timeframe indicated.

	Description	Action	Final Disposition
Incidents of Death Children		Incidents from prior montl	ns and reported in January
UCI:			
FN:			
LN:			
Age:			
Inc. Date:			

	Description	Action	Final Disposition
Incidents of Death Adults		Incidents from prior month	ns and reported in January
Age: 17 Inc. Date: 9/29/2022	Consumer resided with family. Family notified NLACRC that she passed away due to complications from COVID-19.	CSC to follow up and request a copy of the death certificate. This case will be to Committee for record review.	
Age: 20 Inc. Date: 11/19/2022	Consumer resided in a Skilled Nursing Facility. He was transported by ambulance to the ER due to high blood pressure. He experienced several cardiac arrests while in the hospital and liquid was also found in his lungs. He passed away while in hospital care.	CSC to follow up and request a copy of the death certificate. This case will be to the Mortality Committee for record review.	
Age: 34 Inc. Date: 12/30/2022	Consumer resided with Family. He received Home Health Services and the vendor report that he passed away.	CSC to follow up and request a copy of the death certificate. This case will be the Committee for record review.	

^{*} Please note that highlighted incidents involve allegations of abuse and/or neglect, or crime victimization.

	Description	Action	Final Disposition
Other Incidents Children			nd reported in January
UCI:			
FN:			
LN:			
Age:			
Inc. Date:			

	Description	Action	Final Disposition
Other Incidents Adults		Incidents from prior months	and reported in January
Age: 42 Inc. Date: 12/31/2022	Consumer resides in an ICF/DD-H. She did not receive her schedule evening prescription medications due to staff forgetting to administer them.		

^{*} Please note that highlighted incidents involve allegations of abuse and/or neglect, or crime victimization.

	Description	Action	Final Disposition
Incidents of Death Children			
Age: 2	Consumer resided with family. She had been		
Inc. Date: 1/01/2023	hospitalized for a few weeks prior. She was sent home and passed away in her sleep. Ambulance was called, but she had already passed.		

	Description	Action	Final Disposition
Incidents of Death Adults			
Age: 27	Consumer resided in an ICF-DD/N. He had several		
Inc. Date: 1/27/2023	visits to the ER, with brief hospitalizations due to possible Sepsis, Urinary Tract Infections, and GI Bleeds. Family declined further treatment and signed a DNR (Do Not Resuscitate) with no intubation.	case will be forwarded to the Mortality Review Committee for	
Age: 52	Consumer resided in a CCF. She was receiving		
Inc. Date: 1/13/2023	hospice care and passed away while in the hospital.	copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review.	

	Description	Action	Final Disposition
Other Incidents Children			
Age: 6	The consumer resided in an ICF-DD. He was noted as		
Inc. Date: 1/17/2023	having low oxygen levels and was transported to the ER via ambulance. He was admitted into the hospital for further observation and treatment due to Respiratory Infection.	Consultant and NLACRC Community	
Age: 14 Inc. Date: 1/07/2023	Consumer resides with family. While receiving respite care, he was left unsupervised with a younger female		

^{*} Please note that highlighted incidents involve allegations of abuse and/or neglect, or crime victimization.

	Description	Action	Final Disposition
	child. This led to him being suspected of having had sexually violated the younger female child.	NLACRC Community Services were notified of this incident.	
Age: 14 Inc. Date: 1/23/23	Consumer resides with family. Due to his escalating disruptive behavior, it was recommended by his psychiatrist that he be taken to ER for medication evaluation. He was held on a 5150 hold and later admitted for further treatment.	Community Services and Psychiatry Consultant was notified of this	
Age: 16 Inc. Date: 1/16/2023	Consumer resides with family. A male person known to the family, physically assaulted consumer by punching, kicking, and threatening him with a pocketknife. He was taken to the hospital for assessment and treatment, but no serious injuries were reported.	Services, Law Enforcement, and NLACRC Community Services were notified of this incident.	

	Description	Action	Final Disposition
Other Incidents Adults			
Age: 19 Inc. Date: 1/26/2023	Consumer resides with family. He was stabbed six times by a family member who is also a regional center consumer. He was transported to the ER by ambulance and received medical treatment for superficial wounds.	NLACRC Community Services were notified of this incident.	
Age: 21 Inc. Date: 1/23/2023	Consumer resides in a CCF. He signed out of home to go out in the community and was reminded to be home by 7pm for medication. He didn't arrive home or respond to texts/phone calls from staff. Law Enforcement was notified. He communicated with parents that he was staying at a friend's house.	Licensing, Law Enforcement and NLACRC Community Services were notified of this incident.	
Age: 21 Inc. Date: 1/24/2023	Consumer resides in a CCF. He had eloped from his group home the day prior and had not returned home until 2 days later resulting in him missing dosages of his prescription medications		

^{*} Please note that highlighted incidents involve allegations of abuse and/or neglect, or crime victimization.

	Description	Action	Final Disposition
Age: 24 Inc. Date: 1/19/2023	Consumer resides in an Adult Residential. Staff reported that family did not reorder his monthly prescription in a timely manner, resulting in a missed dosage.	CSC to follow up. Community Care Licensing, NLACRC Community Services, and Nurse Specialist Consultant were notified of this incident.	
Age: 26 Inc. Date: 1/27/2023	Consumer resides in a CCF. Upon his release from Central County Jail, staff arrived to pick him up and transport him to his new CCF. While traveling in the van, the vehicle stopped at a nearby intersection, he unfastened his seatbelt, left the vehicle, and ran into the nearby train station. Staff were unable to locate him.		
Age: 27 Inc. Date: 1/01/2023	Consumer resides in a CCF. He went for a walk around the facility, but staff noticed that he had eloped the property. When he did not answer staff's phone calls and could not be located, law enforcement was notified. He returned to the home after talking with family.		
Age: 27 Inc. Date: 1/14/2023	Consumer resides in an ICF-DD/N. Staff observed that he was emotionally distraught and had an elevated body temperature. Staff found his g-tube stoma with a large amount of bile drainage on gauze and abdomen appeared distended. He was transported to ER via ambulance and admitted into the hospital for further evaluation and treatment.	CSC to follow up. Department of Health Services, NLACRC Community Services, and Nurse Specialist Consultant were notified of this incident.	
Age: 27 Inc. Date: 1/20/2023	Consumer resides in an ICF-DD/N. He was recently discharged from hospital and house staff found that he had an elevated heart rate and showed signs of emotional distress. 911 was called and an ambulance transported him to the ER where he was admitted for further evaluation and treatment. Family placed him on hospice services after consulting with physician.	Services, NLACRC Community Services, and Nurse Specialist Consultant were notified of this incident.	
Age: 28 Inc. Date: 1/03/2023	Consumer resides with family. He was taking public transportation with his community group. They were returning to program after volunteering, when he was punched suddenly on the back, by a male not known to him.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	

^{*} Please note that highlighted incidents involve allegations of abuse and/or neglect, or crime victimization.

	Description	Action	Final Disposition
Age: 28 Inc. Date: 1/02/2023	Consumer receives Supported Living Services. He awoke at 1:30am and declined the request from SLS staff to return to bed. He became agitated and began to assault staff. Staff preceded to grab his arms and pin him against the wall several times. During this event he received a scratch on his wrist which did not need medical attention.	Services and NLACRC Community Services were notified of this incident.	
Age: 29 Inc. Date: 1/16/2023	Consumer receives Supported Living Services. A substitute staff had assumed that the previously scheduled staff had administered the scheduled medications. It was discovered the next day, that she was not administered her scheduled afternoon medications.	CSC to follow up. NLACRC Community Services and Nurse Specialist Consultant were notified of this incident.	
Age: 29 Inc. Date: 1/26/2023	Consumer receives Supported Living Services. While reaching for her water bottle, she lost her balance, fell, and hit her head and left thumb on the sofa arm rest. Her helmet shifted in the fall resulting in a head laceration. She visited the ER for treatment and received glue for her head laceration.	CSC to follow up. NLACRC Community Services and Nurse Specialist Consultant were notified of this incident.	
Age: 31 Inc. Date: 1/17/2023	Consumer resides in a CCF. Home staff repeatedly attempted to ensure that his medication would be refilled before it ran out. Due to doctor not refilling it timely, the consumer missed a day of his medication.	Services and Nurse Specialist Consultant	
Age: 31 Inc. Date: 1/18/2023	Consumer resides in a CCF. It was noticed that she had bruising on her foot. She stated that during the night she was banging her foot against the wall. She was transported to the hospital where she was examined and found to have a fractured foot.	CSC to follow up. Community Care Licensing, NLACRC Community Services, and Nurse Specialist Consultant were notified of this incident.	
Age: 32 Inc. Date: 1/14/2023	Consumer resides in a CCF. After stating that he missed his family repeatedly, he left and did not return home. A police report was filed.	CSC to follow up. Community Care Licensing, Law Enforcement, and NLACRC Community Services were notified of this incident.	
Age: 33 Inc. Date: 1/10/2023	Consumer resides in an ICF/DD-H. Staff was assisting her with the gait belt while she walked to the bathroom. Her legs gave out and she fell forward hitting her face against the door frame. After standing	CSC to follow up. Community Care Licensing, NLACRC Community Services, and Nurse Specialist Consultant were	

^{*} Please note that highlighted incidents involve allegations of abuse and/or neglect, or crime victimization.

	Description	Action	Final Disposition
	up, she fell again. She was transported to the ER via 911 Ambulance and admitted for testing.		
Age: 35 Inc. Date: 1/22/2023	Consumer resides in an ICF-DD/N. During a visit with family, the home was notified that he may have injured his foot. Upon returning home, he was transported to the ER, where it was found that he had a fractured right foot. Family stated that the injury may have occurred when his foot hit the wall during a	CSC to follow up. Department of Health Services, NLACRC Community Services, and Nurse Specialist Consultant were notified of this incident.	
Age: 40 Inc. Date: 1/28/2023	seizure. Consumer resides in an ICF/DD-H. Staff noticed that her meds were signed off as given but her medications had not been administered to her for the evening prior. To prevent and control seizures, her missing evening dose was given in the early morning, along with the scheduled evening prescription.	Licensing, NLACRC Community Services, and Nurse Specialist Consultant were	
UCI: 7297867 Age: 44 Inc. Date: 1/26/2023	Consumer resides in a CCF. While at the gym, a bar fell on top of her right foot. She visited the ER where she was found to have a fractured big toe. Her toe was placed in a metal splint and no medications were prescribed.	CSC to follow up. NLACRC Community Services and Nurse Specialist Consultant were notified of this incident.	
Age: 47 Inc. Date: 1/16/2023	Consumer resides in a CCF. While walking in the hallway, he was bumped into by another consumer, which caused him to fall. He hit the edge of the wall and fell to the floor. He sustained a cut on his head, was transported to the ER by ambulance, where he received stitches for his laceration.	CSC to follow up. Community Care Licensing, NLACRC Community Services, and Nurse Specialist Consultant were notified of this incident.	
Age: 47 Inc. Date: 1/23/2023	Consumer resides in a CCF. In the early morning, she tripped and fell while walking to the bathroom. She fell and hit her nose which began to bleed. She was transported to the ER where she was found to have a facial fracture.	CSC to follow up. Community Care Licensing, NLACRC Community Services, and Nurse Specialist Consultant were notified of this incident.	
Age: 49 Inc. Date: 1/01/2023	Consumer resides in a CCF. While sitting in his wheelchair, he began to vomit. After vomiting multiple times, he was transported to the ER via 911 ambulance. He was admitted into the hospital and treated for pneumonia.		

^{*} Please note that highlighted incidents involve allegations of abuse and/or neglect, or crime victimization.

	Description	Action	Final Disposition
Age: 54 Inc. Date: 1/11/2023 Age: 54	Consumer resides in an ICF/DD-H. During assistance while toileting, he dropped to the floor and complained of chest pain. He was taken to the ER due to experiencing chest pain. He was admitted into the hospital for further observation and treatment. Consumer resides in an ICF/DD-H. Staff noticed that he	CSC to follow up. NLACRC Community Services and Nurse Specialist Consultant were notified of this incident. CSC to follow up. NLACRC Community	
Inc. Date: 1/13/2023	appeared weak and his blood pressure was low. He was transported to the ER via 911 ambulance. He was admitted into the hospital for further observation and treatment due to hypotension and fatigue.	Services and Nurse Specialist Consultant were notified of this incident.	
Age: 55 Inc. Date: 1/11/2023	Consumer resides in an ICF-DD/N. She appeared congested with labored breathing. She was transported to the ER via 911 Ambulance. She was admitted into the hospital and will be monitored for health and safety.	Services, NLACRC Community Services, and Nurse Consultant were notified of this incident.	•
Age: 55 Inc. Date: 1/23/2023	Consumer resides in a CCF. He was mistakenly given another consumer's prescribed list of seven different medications by house staff. The mistake was quickly discovered, and he was transported to the ER via 911 ambulance. He was held for observation and testing.	and Nurse Specialist Consultant were notified of this incident.	
Age: 58 Inc. Date: 1/04/2023	Consumer resides with family. While traveling on his morning bus route, he fell out of his sleep when the bus made a turn. As he fell to the floor of the bus, his seat belt remained fastened around consumer's waist. No injuries were reported.	CSC to follow up. NLACRC Community Services were notified of this incident.	
Age: 58 Inc. Date: 1/27/2023	Consumer resides in an ICF/DD-H. During the nurse's weekly audit, it was discovered that the medication was signed off for as given, but the consumer was not administered her morning prescribed medications for that morning.	CSC to follow up. Community Care Licensing, NLACRC Community Services, and Nurse Specialist Consultant were notified of this incident.	

^{*} Please note that highlighted incidents involve allegations of abuse and/or neglect, or crime victimization.

	Description	Action	Final Disposition
Age: 59 Inc. Date: 1/15/2023	Consumer resides in an ICF-DD/N. He was taken to and admitted into the hospital due to having swollen feet. He was diagnosed with congestive heart failure and will receive further evaluation and treatment.	CSC to follow up. Community Care Licensing, NLACRC Community Services, and Nurse Specialist Consultant were notified of this incident.	
UCI: 5345566	Consumer resides in a CCF. She experienced a seizure and the next day reported back pain. No bruising or	CSC to follow up. NLACRC Community Services and Nurse Specialist Consultant	Eunice Home I
FN: Martha	injuring were observed, but she was taken to Urgent	were notified of this incident.	
LN: Zamora	Care, where she was diagnosed and treated for fractured ribs.		
Age: 59	mactured ribs.		
Inc. Date: 1/23/2023			
Age: 59 Inc. Date: 1/27/2023	Consumer resides in an ICF/DD-H. Due to frequent coughing, lethargy, foul urine odor, slight shortness of breath, and elevated temperature she was transported to the ER via 911 ambulance. She was admitted into the hospital for further observation and continued antibiotics for possible respiratory and bladder infection.	Services, NLACRC Community Services, and Nurse Specialist Consultant were notified of this incident.	
Age: 60 Inc. Date: 1/19/2023	Consumer receives Supported Living Services. Staff noticed that his wheelchair was missing, when they inquired about missing chair, they were informed that one of his SLS staff had taken it to their home to use. That SLS staff was asked to return the chair and did so.	Services and NLACRC Community	
Age: 61 Inc. Date: 1/13/2023	Consumer resides in a CCF. Day Program Staff reported that he was sent to program with moldy, smelly chicken nuggets. He was given a replacement lunch by day program.	Licensing and NLACRC Community	

^{*} Please note that highlighted incidents involve allegations of abuse and/or neglect, or crime victimization.

	Description	Action	Final Disposition
Age: 63 Inc. Date: 1/20/23	Consumer receives Supported Living Services. In the early morning, she experienced an anxiety attack. Hours later, after experiencing another anxiety attack, she also experienced a seizure. Staff called 911 and she was transported to the ER, where she was admitted into the hospital for further evaluation and treatment.	CSC to follow up. NLACRC Community Services and Nurse Specialist Consultant were notified of this incident.	
Age: 63 Inc. Date: 1/29/2023	Consumer resides in a CCF. With his prescriptions already in his mouth, he attempted and failed to open his water bottle and spit out some of his medications. Staff gave him another set of medications. Due to the possibility of receiving double doses of his medications he was taken to the ER for observation.	CSC to follow up. NLACRC Community Services and Nurse Specialist Consultant were notified of this incident.	
Age: 64 Inc. Date: 1/18/2023	Consumer resides in an ICF-DD/N. He was complaining of chest pain and was transported to the ER via 911 ambulance. He was admitted into the hospital for further evaluation, testing, and treatment.	CSC to follow up. NLACRC Community Services and Nurse Specialist Consultant were notified of this incident.	
Age: 64 Inc. Date: 1/26/2023	Consumer resides in an ICF-DD/N. Due to elevated heart rate he was transported to the ER via 911 ambulance. He was admitted into the hospital for further observation and cardiac monitoring.	CSC to follow up. Department of Health Services, NLACRC Community Services, and Nurse Specialist Consultant were notified of this incident.	
Age: 65 Inc. Date: 1/16/2023	Consumer receives Supported Living Services. She was left alone overnight due to staffing shortage. While she was alone, she over medicated with prescribed medication.	CSC to follow up. NLACRC Community Services and Nurse Specialist Consultant were notified of this incident.	
Age: 65 Inc. Date: 1/27/2023	Consumer resides in an ICF/DD-H. During the nurse's weekly audit, it was discovered that the medication was signed off for as given, but she was not administered her morning prescribed medications for that morning.	CSC to follow up. Community Care Licensing, NLACRC Community Services, and Nurse Specialist Consultant were notified of this incident.	
Age: 66 Inc. Date: 1/29/2023	Consumer resides in an ICF/DD-H. He was transported to the ER via 911 Ambulance due to general weakness and possible fainting. He was admitted into the	CSC to follow up. Department of Health Services, NLACRC Community Services, and Nurse Specialist Consultant were notified of this incident.	

^{*} Please note that highlighted incidents involve allegations of abuse and/or neglect, or crime victimization.

	Description	Action	Final Disposition
	hospital for further observation and treatment; diagnosed with seizure disorder and low sodium.		
Age: 67 Inc. Date: 1/22/2023	Consumer resides in a CCF and receives Independent Living Services. ILS staff reported that she was taken to the ER via 911 paramedics due to experiencing chest pain. She was currently admitted into the hospital for further observation and treatment.	Services and Nurse Specialist Consultant were notified of this incident.	
Age: 68 Inc. Date: 1/06/2023	She lives with her husband, who has control over her finances. She receives Supported Living Services and staff have observed that the kitchen is empty of food for consumer, but alcohol bottles are scattered throughout the house. Hygienic toiletries are not being provided. Staff have provided food/supplies for the consumer.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 68 Inc. Date: 1/28/2023	Consumer resides in an ICF/DD-H. Staff noticed that his meds were signed off as given but had not been administered to him for the evening prior.		
Age: 70 Inc. Date: 1/24/2023	Consumer resides in a CCF. He had fallen a few days prior but refused medical attention. A few days later, while at an ER visit, it was determined that he had a left hip fracture and received hip surgery later the same day.	CSC to follow up. NLACRC Community Services and Nurse Specialist Consultant were notified of this incident.	
Age: 71 Inc. Date: 1/22/2023	Consumer resides in an ICF-DD/N. He was taken to the ER and received stitches after severely scratching his scrotum.	Licensing, NLACRC Community Services, and Nurse Specialist Consultant were notified of this incident.	
Age: 74 Inc. Date: 1/23/2023	Consumer receives Supported Living Services. During an appointment with her primary physician, she was diagnosed with a Urinary Tract Infection and treated and advised to go the hospital. She was admitted for treatment.	CSC to follow up. NLACRC Community Services and Nurse Specialist Consultant were notified of this incident.	
Age: 75 Inc. Date: 1/11/2023	Consumer receives Supported Living Services. During a scheduled phone appointment with her physician, he recommended she check into Urgent Care. Upon checking into Urgent Care, she was admitted into the	CSC to follow up. NLACRC Community Services and Nurse Specialist Consultant were notified of this incident.	

^{*} Please note that highlighted incidents involve allegations of abuse and/or neglect, or crime victimization.

	Description	Action	Final Disposition
	hospital for further observation and treatment. She was given a blood transfusion and medication to treat a fungal infection.		
Age: 75 Inc. Date: 1/13/2023	Consumer resides in a CCF. Day Program Staff reported that she was sent to program with moldy, smelly chicken nuggets. Group Home Staff reported that morning staff neglected to check the lunch that the consumer packed for herself before she left for program. She was given a replacement lunch by day program.	Licensing and NLACRC Community Services were notified of this incident.	
Age: 78 Inc. Date: 1/02/2023	Consumer resides in a CCF. He was taken to the ER due to vomiting and his G-Tube containing black residual. After examination he was diagnosed with having a GI bleed and low hemoglobin. He was admitted into the hospital for further tests and treatment.	Licensing, NLACRC Community Services, and Nurse Specialist Consultant were	
Age: 79 Inc. Date: 1/06/2023	Consumer resides in a CCF. Home LVN noticed that he was experiencing seizures on and off during a 4-hour time frame. 911 was called and he was transported to the ER and admitted into the hospital for further observation and treatment.	Licensing, NLACRC Community Services, and Nurse Specialist Consultant were	
Age: 81 Inc. Date: 1/01/2023	Consumer receives Supported Living Services. Late last month he fell and required hip surgery and went to a Rehab Facility. He required transport back to ER/Hospital requiring medical treatment for pain, dehydration, and a Urinary Tract Infection.	Services and Nurse Specialist Consultant	

^{*} Please note that highlighted incidents involve allegations of abuse and/or neglect, or crime victimization.



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Self Determination Program Report - Implementation Updates

January 1, 2023

North Los Angeles County Regional Center Statistics

Participants have completed Orientation: 580 Total number of budgets that are certified: 202

Total number of budgets that are in the certification process: 2

Total number of spending plans in progress: 34

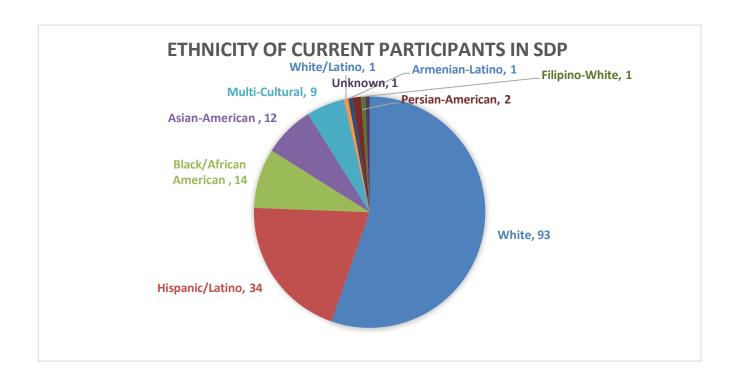
Total number of PCP's completed: 197

Total number of participants that have opted out of SDP after enrolled: 1

Total number of Inter-Regional Center Transfers (out):2

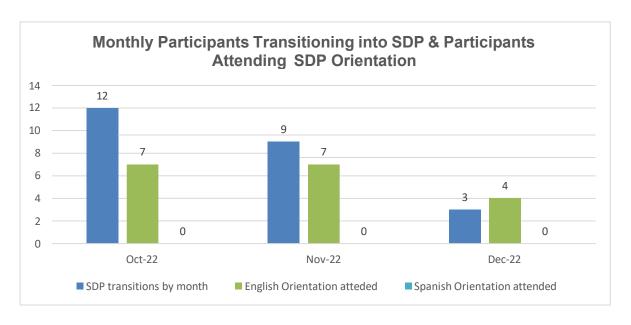
Total number of participants that have fully transitioned into SDP with approved

spending plans and active SDP IPPs: 168

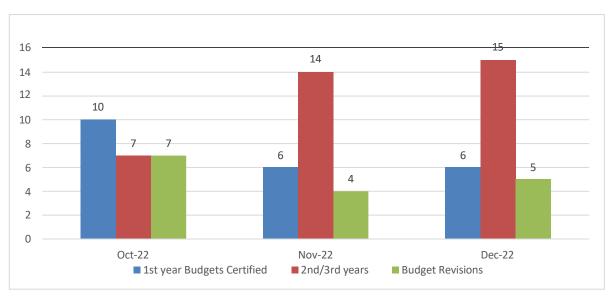




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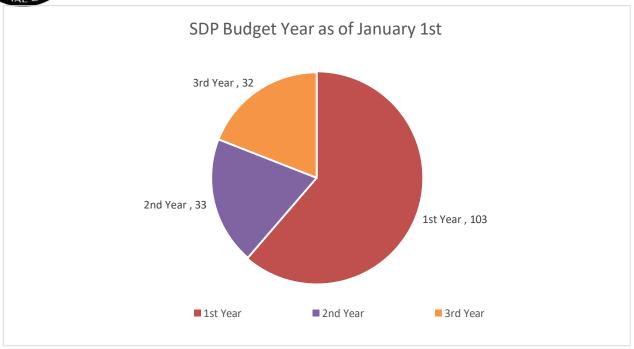


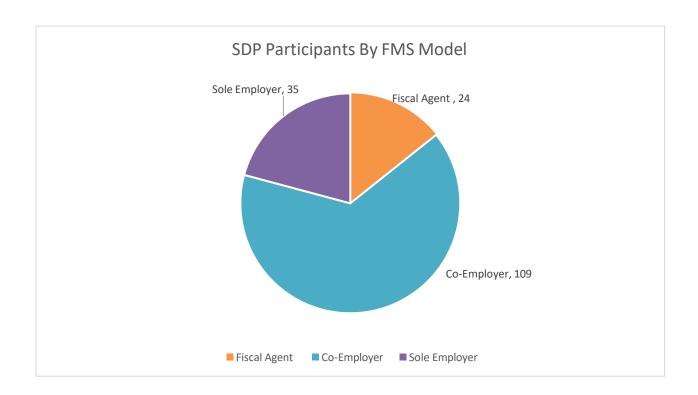
Monthly Budgets Certified





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^{**}FMS agencies used by NLACRC SDP Participants: Aveanna, Mains'l, Cambrian, GT Independence, Acumen, & Casa Fiscal /Essential Pay



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NLACRC Implementation Updates

- On December 30, 2022; the Department of Developmental Services (DDS) provided an update regarding
 the continuation of services when a budget year has ended and there is no new budget or spending plan.
 The directive states that Regional Centers are to continue funding for services either by extending budget
 year (if they have unused funds) or continuing the same budget.
 SDP Continuing the Individual Budget
 (ca.gov)
- SDP Informational Meetings are no longer held at NLACRC. The informational meeting is no longer required as we are past the implementation period. Please click on the link For more information on SDP and to access the SDP workbook.
- SDP Orientation is available:
 - 1. Through State Council https://scdd.ca.gov/sdp-orientation/
 - 2. Live through NLACRC on the 1st Monday of the month in English and 3rd Monday of the month in Spanish (unless there is a holiday, day may change).
 - RSVP: selfdetermination@nlacrc.org
 - 3. Virtually available at any time (24/7) through NLACRC website: <u>Self-Determination Orientation</u> | NLACRC.
- Next Orientation meetings:
 - Monday January 23, 2023 (Spanish) from 9AM-12:00PM
 - Monday February 6, 2023 (English) from 9AM-12:00PM
 - Monday February 27, 2023 (Spanish) from 9AM-12:00PM
- Pre-enrollment Transition Support:
 DDS has extended Option A through June 30, 2023.
- Services in the SDP Spending plan must comply with the HCBS Final Rule. Regional Centers along with FMS agencies, must assess and confirm that services comply.

http://www.dds.ca.gov/initiatives/cms-hcbs-regulations http://www.dds.ca.gov/initiatives/cms-hcbs-regulations/training-information

- NLACRC has the following allocations to support the implementation of SDP:
 - o FY 2021/22: 149,331.00 **RFP process in progress
 - o FY 2022/23: 127,699.00 **RFP process in progress

Contracts are currently being established with:

Claudia Cares for recruitment and training for Independent Facilitators.

Disability Voices United for joint training on SDP principles & program logistics.

Claudia Cares and The Legacy Center for small group and individualized coaching.

Disability Voices United for SDP Orientation Supports/Workgroups/Resource Fair.

Disability Voices United for translation & interpretation services.



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- Self Determination Support Group 1st Wednesday of each month
 - o Next meeting Wednesday February 1, 2023 6:00-7:30PM
- SDP Local Volunteer Advisory Committee- Thursday February 16, 2023 from 6:30PM-8:30PM
 - o The meeting will be held virtually. The Zoom link can be found on NLACRC's calendar.
 - o Everyone is welcomed to attend meetings!
- SDP Local Volunteer Advisory Committee & Disability Voices United Best Practices Subcommittee
 - o The Best Practices Subcommittee is reviewing workflows and processes related to NLACRC's implementation of Self Determination. The committee meets every other week.
- NLACRC is hosting a monthly partnership meeting with vendored FMS agencies. There is representation from the following NLACRC departments: Community Services, Accounting and Case Management.

Resources:

- Disability Voices United SDP Connect Meetings (Every other Wednesday at 4:30-6pm) <u>Upcoming Events | Disability Voices United</u>
- Self Determination Program Service Definitions:
 https://www.dds.ca.gov/wp-content/uploads/2019/05/SDP Service Definitions.pdf



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FMS Providers Serving NLACRC Catchment Area:

Available FMS Services	FMS Model	Languages Spoken	Accepting participants?	Employee Burden Cost
Acumen	Bill Payer, Sole Employer	English & Spanish	Has not responded.	14.8%
Aveanna Support Services	Bill Payer and Co- Employer (with nursing through home health agency only)	English, Spanish, Vietnamese, Cantonese, Mandarin and Trieu Chau	Not until February or March of 2023.	13.9% + 3.3% sick pay They advise consumers to go with 20% just in case.
Cambrian	Bill Payer, Sole Employer, Co- Employer	English, Spanish, Vietnamese, Tagalog, Farsi	Not at this time.	22%
Casa Fiscal/Essential Pay	Bill Payer, Co- employer	English & Spanish	Not at this time	To be determined.
GT Independence	Bill Payer, Sole Employer, Co- Employer	All Languages are supported to assist Individuals in the language of their choice	Not until March 2023.	Co-employer 19.5% Sole Employer- Varies depending on workers comp
Mains'l	Bill Payer, Sole Employer, and Co- employer	English Only	No. They have a waitlist and cannot take anyone at this time.	16.5%

^{*}The Emlyn closed effective 9/30/2022

^{**} Waiting 2023 employee burden cost

THE 5 PRINCIPLES OF SDP:

- Freedom
- Authority
- Support
- Responsibility
 Confirmation

LVAC MEETINGS

3rd Thursday of the month (currently meeting via Zoom)

6:30pm to 8:30pm

A total of 10 meetings per year. There are no meetings in July and December.

LVAC Events:

- Resource Fair
- SDP Support Group
- Workshops

SELF-DETERMINATION

The Self-Determination Program (SDP) is a voluntary program available

to consumers that are eligible for Regional Center services. The program allows participants to have more control in developing their service plans and selecting service providers to better meet their needs.

Why is there an SDP Local Volunteer Advisory Committee?

The Self-Determination Law provides for community oversight by establishing local and statewide advisory committees for the Self-Determination Program.

What is the role of the committee?

The committee shall review the development and ongoing progress of the Self-Determination Program including:

- 1. Whether the program advances the principles of SDP.
- 2. Is operating consistent with the requirements in the law.
- 3. May make ongoing recommendations for improvement to the regional center and the department

What does it mean to be the Board Liaison for the SDP Local Volunteer Advisory Committee?

- -You are comitting to attend the LVAC every 3rd Thursday of the month.
- -You will assist with the improvement of the SDP.
- -You will open communication between the LVAC and the Board.
- -After LVAC monthly meeting, you will complete a report that will be presented at the Executive Committee Meeting.



Date: December 23, 2022

To: Liz Chavez, Executive Administrative Assistant

From: Vini Montague, Chief Financial Officer

CC: Ruth Janka, Executive Director

RE: Board Member Respite Reimbursement Rate

Change in In-Home Respite Worker Reimbursement Rate

Effective January 1, 2023

Due to the enactment of Senate Bill 3, effective January 1, 2023, the minimum wage in the State of California will increase to \$15.50 per hour for all employers.

On December 19, 2022, DDS provided regional centers with new Voucher and Participant-Directed Respite rates. As authorized by the current state budget and Welfare & Institutions Code, Section 4691.6(g), effective January 1, 2023 the in-home respite worker rate will increase as follows:

Description	Prior Rate	New Rate
	Effective April 1, 2022	Effective January 1, 2023
1:1 Ratio, In-Home Respite	\$20.15 per hour	\$21.13 per hour
1:2 Ratio, In-Home Respite	\$12.59 per hour	\$13.21 per hour
1:3 Ratio, In-Home Respite	\$10.08 per hour	\$10.57 per hour
1:4 Ratio, In-Home Respite	\$8.82 per hour	\$9.24 per hour

In accordance with our Board of Trustees Board Member Support Policy, effective January 1, 2023, please update all board member in-home respite reimbursement forms accordingly.



Date: January 4, 2023

To: Liz Chavez, Executive Administrative Assistant

From: Vini Montague, Chief Financial Officer

CC: Ruth Janka, Executive Director

RE: Board Member Mileage Reimbursement Rate

Effective January 1, 2023

On December 29, 2022, the Internal Revenue Service ("IRS") announced that the standard mileage reimbursement rate for use of a personal vehicle for business purposes will increase by 3 cents per mile to 65.5 cents per mile effective January 1, 2023.

Description	Prior Rate Effective July 1, 2022	New Rate Effective January 1, 2023
IRS Mileage Rate	62.5 cents per mile	65.5 cents per mile

In accordance with our Board of Trustees Board Member Support Policy, please update all board member mileage reimbursement forms to 65.5 cents per mile effective January 1, 2023.



IRS issues standard mileage rates for 2023; business use increases 3 cents per mile

IR-2022-234, December 29, 2022

WASHINGTON — The Internal Revenue Service today issued the 2023 optional standard mileage rates used to calculate the deductible costs of operating an automobile for business, charitable, medical or moving purposes.

Beginning on January 1, 2023, the standard mileage rates for the use of a car (also vans, pickups or panel trucks) will be:

- 65.5 cents per mile driven for business use, up 3 cents from the midyear increase setting the rate for the second half of 2022.
- 22 cents per mile driven for medical or moving purposes for qualified active-duty members of the Armed Forces, consistent with the increased midyear rate set for the second half of 2022.
- 14 cents per mile driven in service of charitable organizations; the rate is set by statute and remains unchanged from 2022.

These rates apply to electric and hybrid-electric automobiles, as well as gasoline and diesel-powered vehicles.

The standard mileage rate for business use is based on an annual study of the fixed and variable costs of operating an automobile. The rate for medical and moving purposes is based on the variable costs.

It is important to note that under the Tax Cuts and Jobs Act, taxpayers cannot claim a miscellaneous itemized deduction for unreimbursed employee travel expenses. Taxpayers also cannot claim a deduction for moving expenses, unless they are members of the Armed Forces on active duty moving under orders to a permanent change of station. For more details see Moving Expenses for Members of the Armed Forces.

Taxpayers always have the option of calculating the actual costs of using their vehicle rather than using the standard mileage rates.

Taxpayers can use the standard mileage rate but generally must opt to use it in the first year the car is available for business use. Then, in later years, they can choose either the standard mileage rate or actual expenses. Leased vehicles must use the standard mileage rate method for the entire lease period (including renewals) if the standard mileage rate is chosen.

Notice 2023-03 PDF contains the optional 2023 standard mileage rates, as well as the maximum automobile cost used to calculate the allowance under a fixed and variable rate (FAVR) plan. In addition, the notice provides the maximum fair market value of employer-provided automobiles first made available to employees for personal use in calendar year 2023 for which employers may use the fleet-average valuation rule in or the vehicle cents-per-mile valuation rule.

Page Last Reviewed or Updated: 29-Dec-2022

LOS ANGELES COUNTY REGIONAL CENTER ARCA Reporting Out Form

Name: Lety Garcia

Meeting: Quarterly Meeting Date of Meeting: 1/19-1/20/23

1.	Number of Attendees	Approximately 50
2.	Public Input:	Question posed to Nancy Bergman, Director of DDS regarding the Core Staffing Formula. Nancy said DDS doesn't set salaries for Consumer Services Coordinators.
3.	Funding and Sustainability:	DDS received \$1 for every \$20 in the state budget. This budget serves one in 100 people in California.
4.	Inclusive Communities:	KP Public Affairs has been hired to develop a PR campaign for ARCA and will create materials and address media in different languages.
5.	Flexible and Sustainable Service Models:	
6.	Implementation of the Self-Determination Program:	
7.	Points of Discussion for the Board:	Grassroots Day March 29, 2023. Focus is Vendor Rate Continuance, Family Fee elimination, and Core Staffing Formula as it relates to the budget. A copy of the draft strategic plan is presented to each RC
8.	Miscellaneous:	board statewide for feedback.
9.	Next Meeting:	March 16-17, 2023 in Sacramento

North Los Angeles County Regional Center <u>Consumer Advisory Committee Meeting Minutes</u> (Via Zoom)

February 1st, 2023

Present: Pamela Aiona, Jennifer Koster, Bill Abramson, and Suzanne Paggi – Committee Members

Alex, Destry Walker, Miguel Lugo, Juan H., Elizabeth, Desiree Boykin, Azucena Bustillos-Interpreter - Guests

Jose Rodriguez, Nahid Abouzar, Dr. Michael Fernandez, Yaneth Parvool, Robert Dhondrup, Lisseth Carrillo, and Cesar Cuevas – Staff

Absent: Cynthia Somano

I. Call to Order & Introductions

J.Koster called meeting to order at 3:02 pm and introductions were made by all committee members, staff, and guests.

II. Consent Items

A. Approval of Agenda

M/S/A (P.Aiona/D.Walker/S.Paggi) To approve the Agenda as presented with 1 abstention from Suzanne Paggi.

B. Approval of Minutes from January 4, 2023 Meeting

M/S/C (J.Koster/S.Paggi) To approve the Minutes as presented.

III. Committee Business

A. CAC Chair Report

J.Rodriguez needs more information on the type of report the CAC would like. S.Paggi suggested consumer business followed by any other committees.

- B. ARCA Presentation *deferred*J.Rodriguez stated that it's been deferred. The CAC is requesting that the ARCA presentation be done in the month of April.
- C. CAC Webpage Review Suzanne Paggi

S.Paggi suggests that there be more information added to NLACRC's webpage to make it more exciting and shared a draft prompt with participants. Dr. Fernandez welcomes ideas to encourage more adult consumer involvement.

Action item: M.Lugo will send a resource to J.Rodriguez that can convert a written prompt to an appropriate level of language for the intended audience.

- D. Monthly Training/Presentation update
 - J.Rodriguez reviewed the upcoming calendar meetings and confirmed the presenters for these meetings. M.Lugo suggested that he give a presentation.
- E. 2023 NLACRC Life After High School Fair J.Rodriguez presented the flyer for "Life After High School," an event that provides resources to consumers. The event will take place on March 16th, 2023. The vendors for NLACRC, as well as LAUSD, will be present to discuss the services they offer.
- F. Topics for Quarterly Public Presentations
 J.Rodriguez is looking for topics that the consumers are interested in that can
 be promoted to the community. The topics of interest would be different
 and separate from the existing calendar's topics. J.Koster suggested
 transportation and health insurance as two important topics. Elizabeth
 suggested that counseling be added.

Action item: J.Rodriguez will complete a schedule for quarterly public presentations. Participants should contact Jose to provide ideas.

IV. Identify Agenda Items for the Next Board Meeting

A. Minutes from the February 1st, 2023 Meeting

V. Announcements/Information/Public Input

- A. Next meeting: March 1st, 2023 at 3:00pm
- B. Abilities Expo J.Rodriguez shared the flyer for this event; it will take place from March 10th to March 12th, 2023.
- C. Valley Disaster Preparedness Fair
 This event will take place on February 25th, 2023. There will be many resources available for consumers.
- D. Committee Attendance

J.Rodriguez reminded everyone that attendance is tracked.

VI. Adjournment

J.Koster adjourned the meeting at 4:36 pm.

Submitted by:

Cesar Cuevas

Administrative Assistant



Board of Trustees Budget vs Expenditures Fiscal Year 2022-2023 Expenditures Paid through January 19, 2023 (December 2022 State Claim) Approved Budget

	A	В		С		D		E
		Approved				Budget		% of Budget
			Budget		YTD Expenses		Remaining	Utilized
No	Description	F	Y 2022-23				(B-C)	(C/B)
1	Board Retreat, Board Dinner and CAC Holiday Party	\$	20,000.00	\$	80.61	\$	19,919.39	0.40%
2	NLACRC Legislative Events	\$	3,500.00	\$	-	\$	3,500.00	0.00%
3	ARCA Meetings, Conferences, & Activities (includes airfare, hotels, cabs, meals, parking, etc.)	\$	5,000.00	\$	-	\$	5,000.00	0.00%
4	Board Member Support to Participate in Meeting & Events (overnight mailing, iPads, supplies, etc)	\$	28,000.00	\$	12,248.94	\$	15,751.06	43.75%
5	Transportation for Board Members (Keolis)	\$	1,000.00	\$	-	\$	1,000.00	0.00%
6	Child Care/Attendant Care Support for Board Members	\$	12,000.00	\$	687.77	\$	11,312.23	5.73%
7	Meals for Board and Board Committee Meetings	\$	3,000.00	\$	953.62	\$	2,046.38	31.79%
8	Board & VAC Member Recruitment Expenses	\$	2,000.00	\$	-	\$	2,000.00	0.00%
9	Board Meeting Supplies (nameplates, flowers, greeting cards, paper goods)	\$	9,000.00	\$	1,242.99	\$	7,757.01	13.81%
10	Sponsorships	\$	3,000.00	\$	-	\$	3,000.00	0.00%
11	Board Training	\$	15,000.00	\$	300.00	\$	14,700.00	2.00%
				\$	_	\$	-	
	Total	\$	101,500.00	\$	15,513.93	\$	85,986.07	15.28%

2019-2020 NCI® Family Guardian Survey

Family Report

North Los Angeles County Regional Center



This report tells us:



The services you receive



Satisfaction with the services



Activities in the community

Making Connections – Why is This Important?

When family members with IDD move out of their family homes, parents and other family members continue to be concerned about their well-being and whether their needs are being met. National Core Indicators (NCI) data tells us that across states 3 out of 5 people with IDD live in a supported setting. In California there are over 30,000 adults who live independently or in a supported setting.

This report summarizes findings from the Family Guardian Survey (FGS), which is sent to families of adults who live independently or in a supported setting. It is important to know if families – like parents or siblings – believe their family member is getting needed

siblings – believe their family member is getting needed support from staff and their service coordinator. This information can be shared with state officials (like a governor or regional centers) and policy makers. If they know when needs are not being met, they can try to find resources to help. This report gives families a way of letting state officials and policy makers know what is working for them and what is not working.



"Individuals like you"

In this report when we say "individuals like you" we mean the person who is getting services from the regional center who is over 18 and lives independently or in a supported setting.

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Information about Services and Supports

Services are things the regional center helps organize. It is important that people who help plan services for you have information to help them make choices that are right for you and your family.

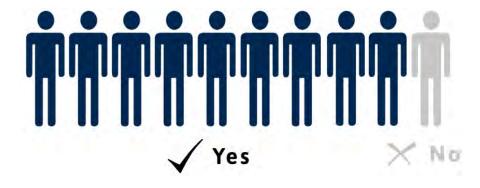


7 out of 10 families said they got enough information to help plan services.





9 out of 10 families said the information they got about services was easy to understand.

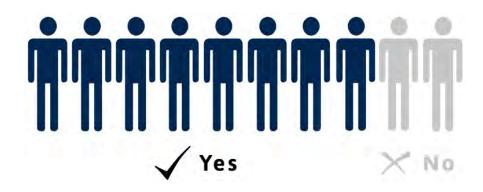


Service Planning

People who get services from a regional center have an individual program plan (IPP). The IPP is a list of services your service coordinator helps you and your family get.

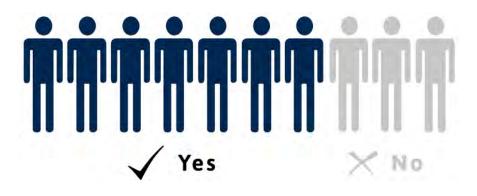


8 out of 10 families said the IPP included all the services and supports needed.





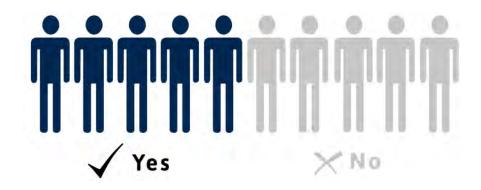
7 out of 10 families said all the services listed in the IPP were received.



Family Involvement in Service Planning

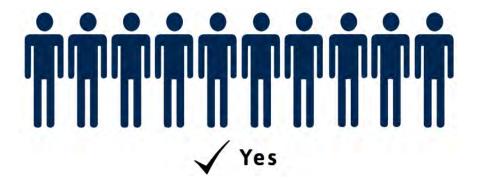


5 out of 10 families said individuals like you helped make the IPP.



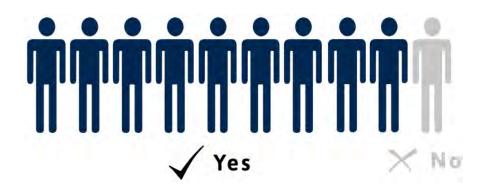


10 out of 10 families said the information from the regional center was offered in their preferred language.





9 out of 10 families said they received a copy of the IPP in their family's preferred language.

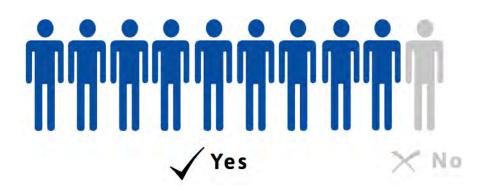


Access to Healthcare Services

Healthcare professionals are people like doctors, dentists, counselors and psychologists. It is important for people to be able to see healthcare professionals so they can stay healthy.

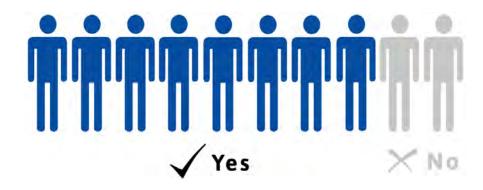


9 out of 10 families said individuals like you could see health professionals when they needed to.



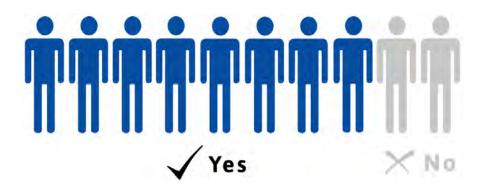


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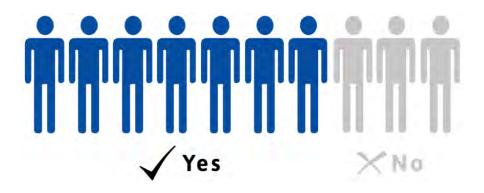


8 out of 10 families said individuals like you could go to the dentist when they needed to.





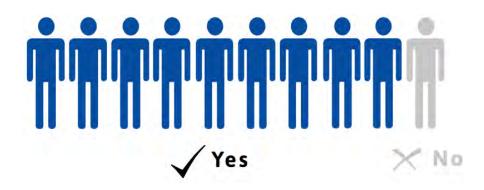
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Family Access to Services and Supports

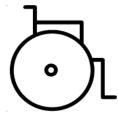


9 out of 10 families said they knew what medications were for if medication was taken.

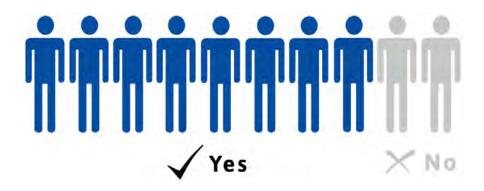


Access to Needed Services

It is important you get the different kinds of services and supports you need.

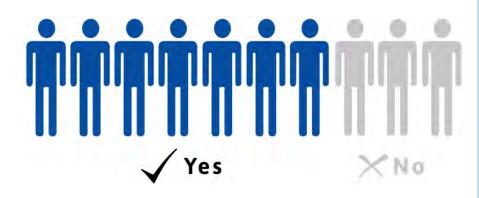


8 out of 10 families said individuals like you had the special equipment or accommodations they needed.





7 out of 10 families got the supports and services they needed.



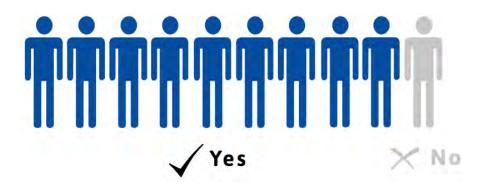


Satisfaction with Services and Supports

It is important that you are happy with the services you get.

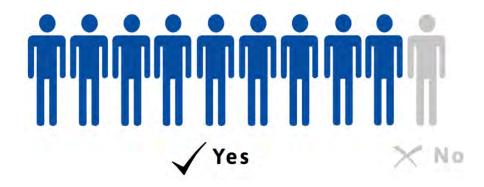


9 out of 10 families said that overall, they were happy with services and supports.



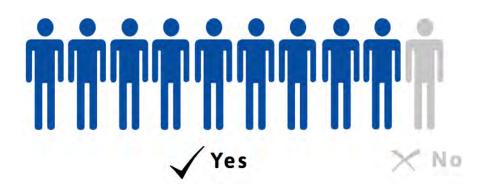


9 out of 10 families said services and supports have made a positive difference in the lives of individuals like you.



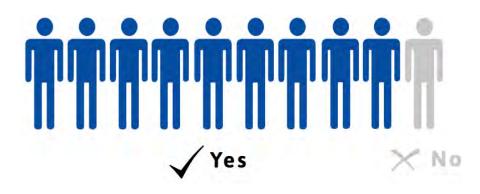


9 out of 10 families said services and supports helped individuals like you live a good life.





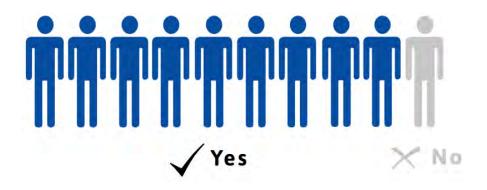
9 out of 10 families said there were support workers available who could speak their preferred language.



Family Access to Services and Supports

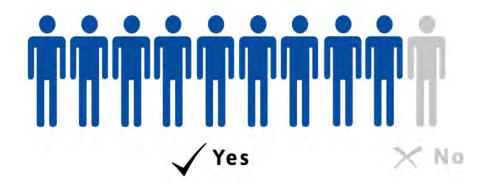


9 out of 10 families said their service coordinator spoke their preferred language.





9 out of 10 families said their service coordinator supported them in a way that was respectful to their culture.

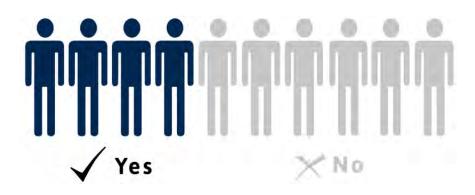


Crisis and Emergency Services

Sometimes emergencies like a medical emergency or natural disaster happen. It is important that you have the information you need to handle emergencies if they happen.

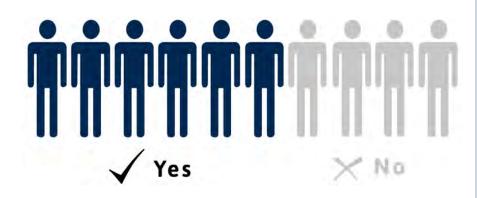


4 out of 10 families said they talked about how to handle emergencies at the last IPP meeting.





6 out of 10 families said they felt prepared to handle the needs of individuals like you in an emergency.





Visit the Wellness
Toolkit on the DDS website for information and tools related to health and safety.

https://www.dds.ca. gov/consumers/well ness-toolkit

Complaint Filing

If something bad happens, it is important to know who to talk to.



5 out of 10 families said they knew how to file a complaint or grievance about provider agencies or staff.





7 out of 10 families said they knew how to report abuse or neglect.

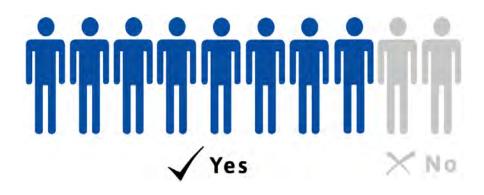


Going Out

People go out in their community to do many things. You may like to go to the movies, concerts, or play sports. When we ask about community, we mean the places close to home where you and other people go out.



8 out of 10 families said that individuals like you took part in activities in the community.



Challenges to Community Involvement

Although most individuals participated in community activities, some still found challenges to community involvement. Some challenges were:



Stigma
1 out of 10



Cost 2 out of **10**



Lack of
Transportation
2 out of 10



Lack of Support Staff 2 out of 10

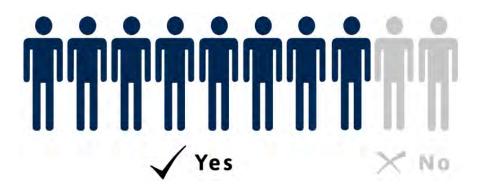
Overall, challenges were not preventing most individuals from participating in the community.

Service Coordinators and Support Workers

There may be many people who help you and your family. Service coordinators work closely with your family to help them decide, organize, and get the services you need. Support workers are paid to help you at home, at work, and at your day program.

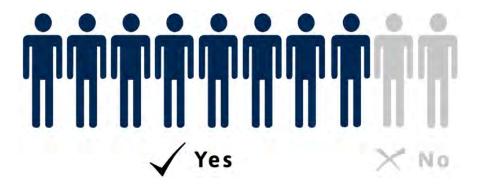


8 out of 10 families said they were able to contact their service coordinator when they wanted.



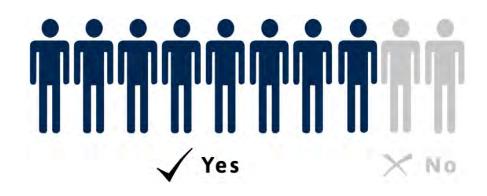


8 out of 10 families said the service coordinator respected their family's choices and opinions.



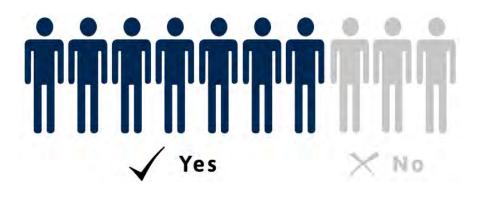


8 out of 10 families said they were able to contact support workers when they wanted.



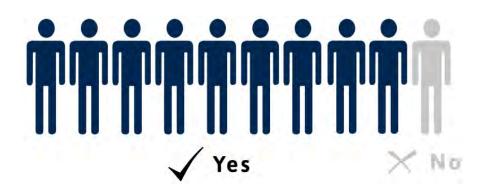


7 out of 10 families said support workers came and went when they were supposed to.



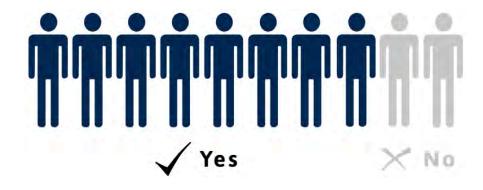


9 out of 10 families said support workers spoke to them in a way they understood.



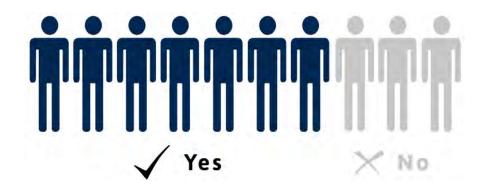


8 out of 10 families said support workers had the right information and skills to meet their family's needs.



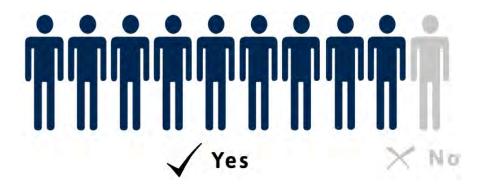


7 out of 10 families said providers worked together to provide support.





9 out of 10 families said services were delivered in a way that was respectful of the family's culture.



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What is NCI?

Each year, National Core Indicators (NCI) asks people with intellectual and developmental disabilities (IDD) and their families how they feel about their lives and the services they get. NCI uses surveys so that the same questions can be asked to people in all NCI states.

Who answered questions to this survey?

Questions for this survey are answered by a family member or legal guardian - usually a parent or sibling - of an adult with IDD who lives independently or in a supported setting.



How are data shown in this report?

We use words and images to show the number of yes and no answers we got. Some of our survey questions have more than a yes or no answer. They ask people to pick: "always," "usually," "sometimes," or "seldom/never." For this report, we count all "always" and "usually" answers as a yes. All others we count as no.





Learn More



View the NCI Interactive Dashboards

https://www.dds.ca.gov/rc/nci



View Self-Advocate Wellness Bulletins

https://www.dds.ca.gov/consumers/wellness-toolkit/self-advocates



Find NCI Regional Center Liaisons

https://www.dds.ca.gov/rc/nci



Find Regional Center Information

https://www.dds.ca.gov/rc

Produced by



for the







2019-2020 NCI® Adult Family Survey

Family Report

North Los Angeles County Regional Center





This report tells us:



The services you receive



Satisfaction with the services



Activities in the community

Making Connections – Why is This Important?

Many adults with intellectual and developmental disabilities (IDD) who get services and supports live with their families. National Core Indicators (NCI) data tells us that across states 2 out of 5 people with IDD live with their family. In California there are over 90,000 adults who live with their family.

This report summarizes findings from the Adult Family Survey (AFS), which is sent to families who live with their adult relative with IDD. It is important to know if people and their families – like parents or siblings – are getting their needs met. This information can be shared with state officials (like a governor or regional centers) and policy makers. If they know when needs are not being met, they can try to find resources to help. This report gives families a way of letting state officials and policy makers know what is working for them and what is not working.



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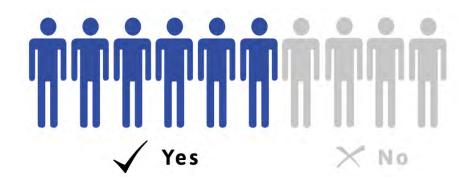
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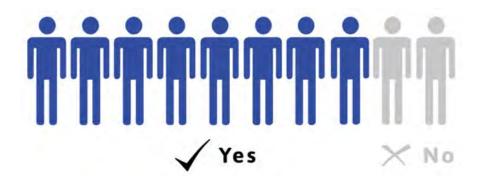


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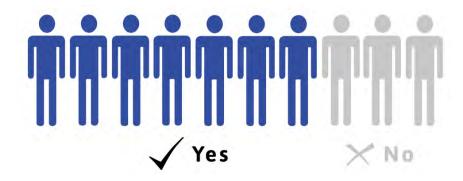


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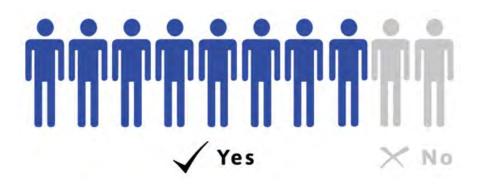


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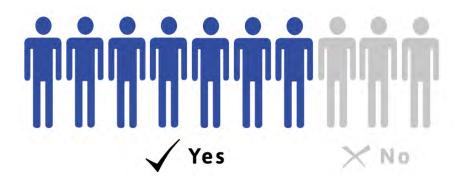


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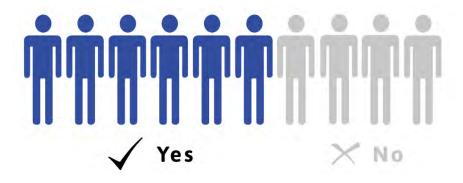


7 out of 10 families said they or someone else in their family (other than individuals like you) helped make the



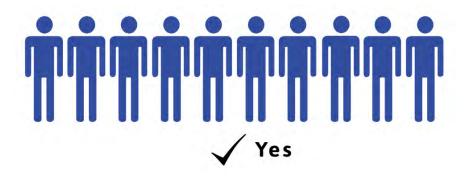


6 out of 10 families said individuals like you helped make the IPP.



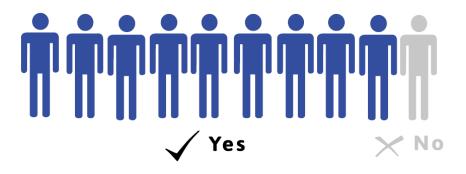


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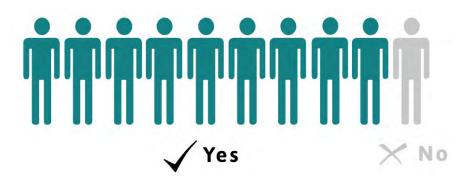


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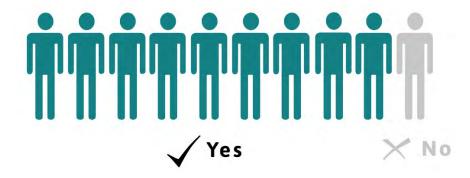


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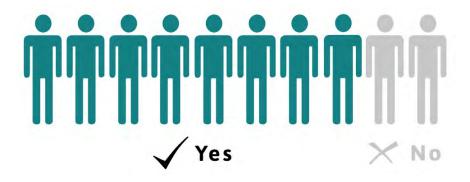


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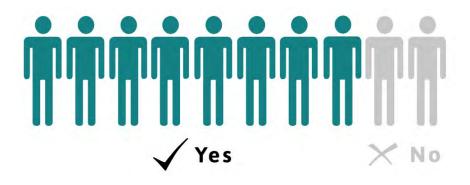


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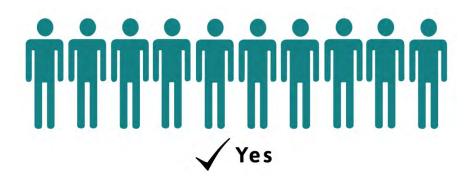


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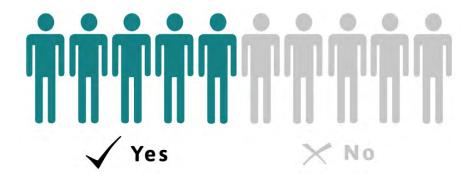


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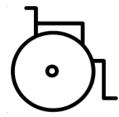


5 out of 10 families who needed respite services were able to use them.

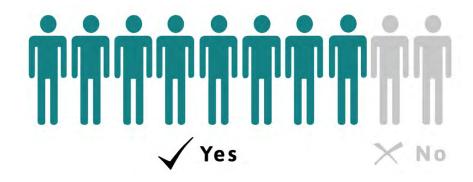


Access to Needed Services

It is important you get the different kinds of services and supports you need.

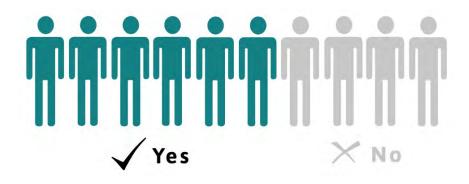


8 out of 10 families said individuals like you had the special equipment or accommodations they needed.





6 out of 10 families got the supports and services they needed.



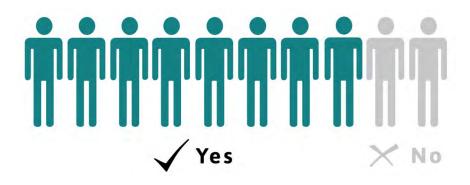


Satisfaction with Services and Supports

It is important that you are happy with the services you get.

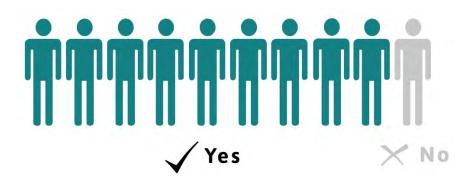


8 out of 10 families said that overall, they were happy with services and supports.



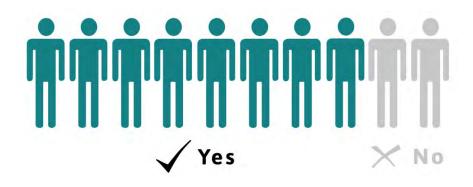


9 out of 10 families said services and supports have made a positive difference in the lives of individuals like you.



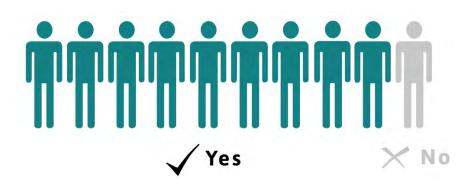


8 out of 10 families said services and supports helped individuals like you live a good life.



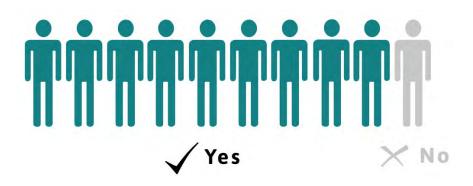


9 out of 10 families said there were support workers available who could speak their preferred language.



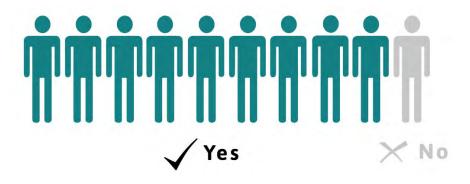


9 out of 10 families said their service coordinator spoke their preferred language.





9 out of 10 families said their service coordinator supported them in a way that was respectful to their culture.

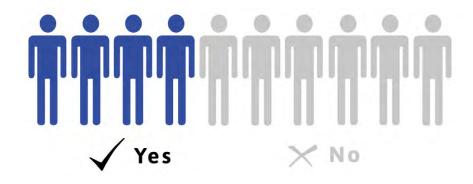


Crisis and Emergency Services

Sometimes emergencies like a medical emergency or natural disaster happen. It is important that you have the information you need to handle emergencies if they happen.

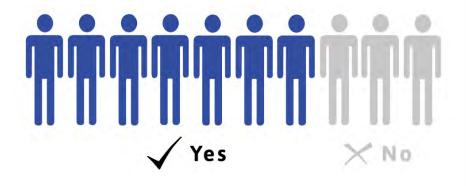


4 out of 10 families said they talked about how to handle emergencies at the last IPP meeting.





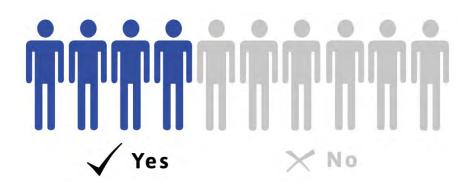
7 out of 10 families said they felt prepared to handle the needs of individuals like you in an emergency.







4 out of 10 families who asked for crisis or emergency services in the past year got services when needed.





Preparing for an Emergency



1 Get Alerts and Know your Support Team



2 Prepare an Emergency Supply Kit



3 Make an Emergency Evacuation Plan



4 Practice Your Plan

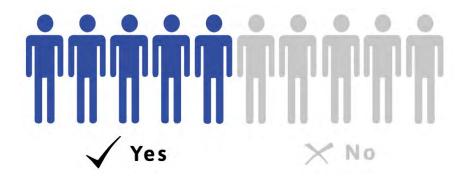
Visit the "Preparing for an Emergency" wellness bulletin at https://www.dds.ca.gov/consumers/wellness-toolkit/self-advocates for more information.

Complaint Filing

If something bad happens, it is important to know who to talk to.

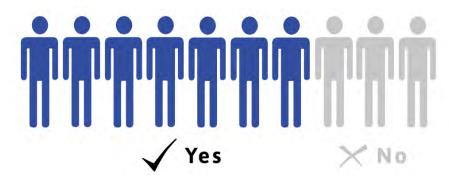


5 out of 10 families said they knew how to file a complaint or grievance about provider agencies or staff.





7 out of 10 families said they knew how to report abuse or neglect.

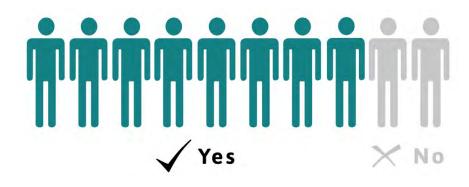


Going Out

People go out in their community to do many things. You may like to go to the movies, concerts, or play sports. When we ask about community, we mean the places close to home where you and other people go out.



8 out of 10 families said that individuals like you took part in activities in the community.



Challenges to Community Involvement

Although most individuals participated in community activities, some still found challenges to community involvement. Some challenges were:



Stigma 1 out of 10



Cost 2 out of 10



Lack of **Transportation** 2 out of 10



Lack of **Support Staff** 2 out of 10

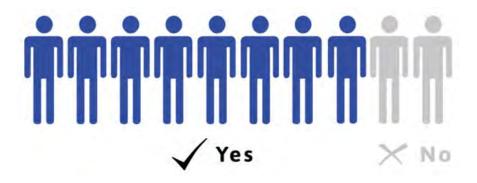
Overall, challenges were not preventing most individuals from participating in the community.

Service Coordinators and Support Workers

There may be many people who help you and your family. Service coordinators work closely with your family to help them decide, organize, and get the services you need. Support workers are paid to help you at home, at work, and at your day program.

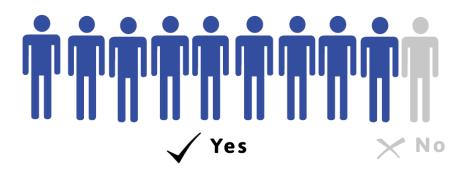


8 out of 10 families said they were able to contact their service coordinator when they wanted.



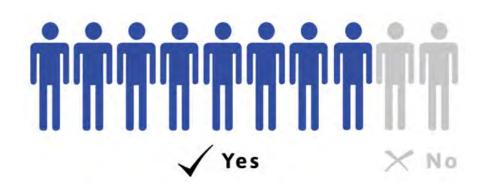


9 out of 10 families said the service coordinator respected their family's choices and opinions.



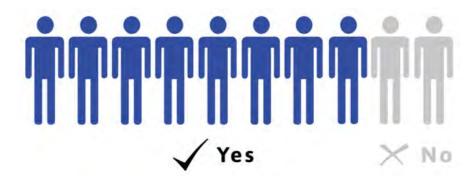


8 out of 10 families said they were able to contact support workers when they wanted.



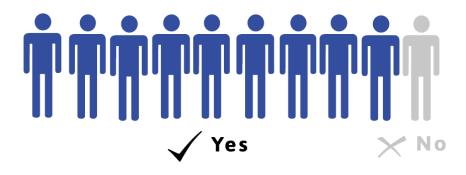


8 out of 10 families said support workers came and went when they were supposed to.



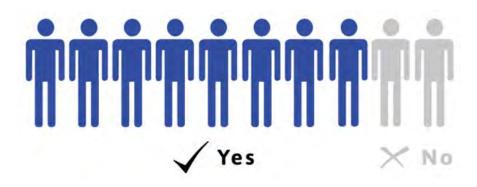


9 out of 10 families said support workers spoke to them in a way they understood.



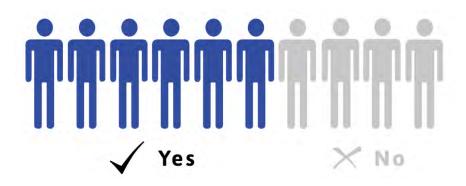


8 out of 10 families said support workers had the right information and skills to meet their family's needs.



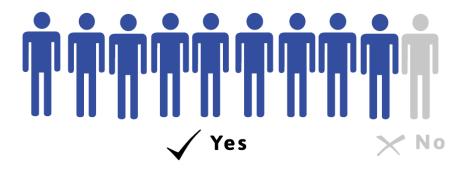


 $\boldsymbol{6}$ out of $\boldsymbol{10}$ families said providers worked together to provide support.





 $\bf 9$ out of $\bf 10$ families said services were delivered in a way that was respectful of the family's culture.



What is NCI?

Each year, National Core Indicators (NCI) asks people with intellectual and developmental disabilities (IDD) and their families how they feel about their lives and the services they get. NCI uses surveys so that the same questions can be asked to people in all NCI states.

Who answered questions to this survey?

Questions for this survey are answered by a person who lives in the same house as an adult who is getting services from the regional center. Most of the time, a parent answers these questions. Sometimes a sibling or someone who lives with the person and knows them well answers these questions.



How are data shown in this report?

We use words and images to show the number of yes and no answers we got. Some of our survey questions have more than a yes or no answer. They ask people to pick: "always," "usually," "sometimes," or "seldom/never." For this report, we count all "always" and "usually" answers as a yes. All others we count as no.







View the NCI Interactive Dashboards

https://www.dds.ca.gov/rc/nci



View Self-Advocate Wellness Bulletins

https://www.dds.ca.gov/consumers/wellness-toolkit/self-advocates



Find NCI Regional Center Liaisons

https://www.dds.ca.gov/rc/nci



Find Regional Center Information

https://www.dds.ca.gov/rc

Produced by



Professional Education Human Services

for the







September 30, 2004 through December 31, 2022

(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)
		. ,	Fees			Obligation	Service Costs	Net Benefit
Quarter	Market	0	Payment	Cumulative	Net Change	at the end	and Actuarial	Obligation
Ended	Value (Note A)	Contributions	Reimbursement	Contributions	(B) - (E)	of year	Loss (Note B)	(G) - (B) - (H)
12/31/2022	28,781,962.22	14,981,112.01	978,457.89	15,959,569.90	12,822,392.32			
9/30/2022	27,217,933.71	14,981,112.01	947,610.18	15,928,722.19	11,289,211.52			
6/30/2022	28,418,065.69	14,981,112.01	915,430.90	15,896,542.91	12,521,522.78	Pending		Pending
3/31/2022	31,968,057.49	14,981,112.01	879,707.41	15,860,819.42	16,107,238.07			
12/31/2021	33,801,827.15	14,981,112.01	842,111.46	15,823,223.47	17,978,603.68			
9/30/2021	32,220,586.00	14,981,112.01	805,898.49	15,787,010.50	16,433,575.50			
6/30/2021	32,476,061.17	14,981,112.01	771,030.67	15,752,142.68	16,723,918.49	55,310,549.00		22,834,488
3/31/2021	30,881,909.86	14,932,280.06	736,971.50	15,669,251.56	15,212,658.30			
12/31/2020	29,864,190.06	14,932,280.06	706,197.16	15,638,477.22	14,225,712.84			
9/30/2020	27,184,546.51	14,932,280.06	672,813.12	15,605,093.18	11,579,453.33			
6/30/2020	25,025,730.08	14,932,280.06	643,117.31	15,575,397.37	9,450,332.71	63,387,477.00		38,361,747
3/31/2020	23,151,937.09	14,932,280.06	616,377.25	15,548,657.31	7,603,279.78			
12/31/2019	26,991,192.48	14,932,280.06	586,092.54	15,518,372.60	11,472,819.88			
9/30/2019	25,659,877.53	14,932,280.06	556,083.05	15,488,363.11	10,171,514.42			
6/30/2019	25,407,770.64	14,932,280.06	526,665.37	15,458,945.43	9,948,825.21	52,454,828.00		27,047,057
3/31/2019	24,681,251.82	14,932,280.06	498,041.92	15,430,321.98	9,250,929.84			
12/31/2018	22,750,076.18	14,932,280.06	471,519.69	15,403,799.75	7,346,276.43			
9/30/2018	24,754,120.10	14,932,280.06	442,868.28	15,375,148.34	9,378,971.76			
6/30/2018	24,047,856.89	14,932,280.06	415,236.62	15,347,516.68	8,700,340.21	46,426,713.00		22,378,856

September 30, 2004 through December 31, 2022

(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)
Quarter Ended	Market Value (Note A)	Contributions	Fees Payment Reimbursement	Cumulative Contributions	Net Change (B) - (E)	Obligation at the end of year	Service Costs and Actuarial Loss (Note B)	Net Benefit Obligation (G) - (B) - (H)
3/31/2018	23,756,424.36	14,932,280.06	387,859.78	15,320,139.84	8,436,284.52			
12/31/2017	23,928,098.35	14,932,280.06	360,494.56	15,292,774.62	8,635,323.73			
9/30/2017	23,165,331.53	14,932,280.06	333,868.65	15,266,148.71	7,899,182.82			
6/30/2017	22,504,425.55	14,932,280.06	307,889.66	15,240,169.72	7,264,255.83	45,760,110		23,255,684
3/31/2017	22,063,191.18	14,932,280.06	282,344.87	15,214,624.93	6,848,566.25			
12/31/2016	20,217,597.26	14,609,319.00	258,395.69	14,867,714.69	5,349,882.57			
9/30/2016	19,958,834.42	13,785,174.00	234,650.27	14,019,824.27	5,939,010.15			
6/30/2016	19,384,955.41	13,785,174.00	211,620.21	13,996,794.21	5,388,161.20	49,459,087		30,074,132
3/31/2016	18,957,650.17	13,785,174.00	189,109.82	13,974,283.82	4,983,366.35			
12/31/2015	18,601,206.79	13,706,179.00	167,060.70	13,873,239.70	4,727,967.09			
9/30/2015	18,107,160.01	13,706,179.00	145,439.46	13,851,618.46	4,255,541.55			
6/30/2015	19,018,017.51	13,706,179.00	145,439.46	13,851,618.46	5,166,399.05	47,370,818		28,352,800
3/31/2015	19,149,903.03	13,690,179.00	145,439.46	13,835,618.46	5,314,284.57			
12/31/2014	18,469,996.94	13,390,179.00	145,439.46	13,535,618.46	4,934,378.48			
9/30/2014	17,993,607.38	13,390,179.00	145,439.46	13,535,618.46	4,457,988.92			
6/30/2014	17,798,665.12	12,990,179.00	145,439.46	13,135,618.46	4,663,046.66	40,265,597		22,466,932
3/31/2014	17,166,361.87	12,874,279.00	145,439.46	13,019,718.46	4,146,643.41			
12/31/2013	14,136,856.25	11,074,279.00	145,439.46	11,219,718.46	2,917,137.79			
9/30/2013	14,040,952.16	10,674,279.00	145,439.46	10,819,718.46	3,221,233.70			

September 30, 2004 through December 31, 2022

(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)
,	, ,	()	Fees	()	()	Obligation	Service Costs	Net Benefit
Quarter	Market		Payment	Cumulative	Net Change	at the end	and Actuarial	Obligation
Ended	Value (Note A)	Contributions	Reimbursement	Contributions	(B) - (E)	of year	Loss (Note B)	(G) - (B) - (H)
6/30/2013	12,786,869.51	9,974,279.00	145,439.46	10,119,718.46	2,667,151.05	36,533,551		23,746,681
3/31/2013	12,832,688.19	9,960,179.00	145,439.46	10,105,618.46	2,727,069.73			
12/31/2012	11,153,372.04	8,865,179.00	145,439.46	9,010,618.46	2,142,753.58			
9/30/2012	10,994,759.59	8,865,179.00	145,439.46	9,010,618.46	1,984,141.13			
6/30/2012	10,522,360.20	8,815,179.00	145,439.46	8,960,618.46	1,561,741.74	36,001,927		25,479,567
3/31/2012	8,460,566.40	7,607,902.00	145,439.46	7,753,341.46	707,224.94			
12/31/2011	8,799,393.99	7,607,902.00	133,293.27	7,741,195.27	1,058,198.72			
9/30/2011	8,227,259.01	7,607,902.00	121,468.71	7,729,370.71	497,888.30			
6/30/2011	8,977,454.65	7,412,902.00	110,883.94	7,523,785.94	1,453,668.71	25,436,279		16,458,824
3/31/2011	7,302,925.50	5,777,902.00	99,559.75	5,877,461.75	1,425,463.75			
12/31/2010	7,009,509.24	5,777,902.00	89,252.74	5,867,154.74	1,142,354.50			
9/30/2010	6,564,685.61	5,777,902.00	79,720.77	5,857,622.77	707,062.84			
6/30/2010	6,057,022.65	5,777,902.00	70,765.15	5,848,667.15	208,355.50	25,087,477		19,030,454
3/31/2010	5,431,358.92	4,776,902.00	62,669.13	4,839,571.13	591,787.79			
12/31/2009	5,231,806.16	4,776,902.00	55,055.57	4,831,957.57	399,848.59			
9/30/2009	4,361,731.52	4,049,487.00	51,322.62	4,100,809.62	260,921.90			
6/30/2009	3,927,928.50	4,049,487.00	47,826.75	4,097,313.75	(169,385.25)	24,497,711		20,569,783
3/31/2009	3,540,603.35	4,049,487.00	44,662.79	4,094,149.79	(553,546.44)			
12/31/2008	3,075,682.95	3,360,000.00	41,492.49	3,401,492.49	(325,809.54)			
9/30/2008	3,498,140.33	3,360,000.00	38,639.65	3,398,639.65	99,500.68			
6/30/2008	3,723,104.42	3,360,000.00	35,500.58	3,395,500.58	327,603.84	23,999,545		20,276,441

September 30, 2004 through December 31, 2022

(A)	(B)	(C)	(D) Fees	(E)	(F)	(G) Obligation	(H) Service Costs	(I) Net Benefit
Quarter Ended	Market Value (Note A)	Contributions	Payment Reimbursement	Cumulative Contributions	Net Change (B) - (E)	at the end of year	and Actuarial Loss (Note B)	Obligation (G) - (B) - (H)
3/31/2008	3,783,960.42	3,360,000.00	32,714.03	3,392,714.03	391,246.39			
12/31/2007	3,970,244.92	3,360,000.00	29,947.05	3,389,947.05	580,297.87			
9/30/2007	4,051,900.78	3,360,000.00	26,861.93	3,386,861.93	665,038.85			
6/30/2007	3,186,671.22	2,560,000.00	23,660.98	2,583,660.98	603,010.24	23,046,848		19,860,177
3/31/2007	3,070,638.39	2,560,000.00	21,192.64	2,581,192.64	489,445.75			
12/31/2006	3,021,148.74	2,560,000.00	18,782.32	2,578,782.32	442,366.42			
9/30/2006	2,855,589.76	2,560,000.00	15,656.75	2,575,656.75	279,933.01			
6/30/2006	1,956,711.04	1,750,000.00	12,928.95	1,762,928.95	193,782.09	20,443,657	11,569,936	6,917,010
3/31/2006	1,968,644.95	1,750,000.00	11,025.59	1,761,025.59	207,619.36			
12/31/2005	1,871,742.20	1,750,000.00	9,116.27	1,759,116.27	112,625.93			
9/30/2005	1,847,106.17	1,750,000.00	7,255.40	1,757,255.40	89,850.77			
6/30/2005	1,055,849.57	1,000,000.00	5,156.85	1,005,156.85	50,692.72	12,356,248	5,137,013	6,163,385
3/31/2005	1,034,705.70	1,000,000.00	3,753.92	1,003,753.92	30,951.78			
12/31/2004	745,659.50	700,000.00	2,186.51	702,186.51	43,472.99			
9/30/2004	700,555.89	700,000.00	779.43	700,779.43	(223.54)			
6/30/2004	-	-	-	_	-	11,878,805	6,266,747	5,612,058

Note A: Market Value is based on US Bank's quarterly "Periodic Cash-Basis Statement".

NLACRC CalPERS Unfunded Accrued Liability ("UAL") Contribution Trust Market Value History

January 1, 2020 through December 31, 2022

(A)	(B)	(C)		(D)		(E)		(F)		(G)	(H)	(I)
Quarter Ended	Market Value	Cumulative ontributions	Cumulative Reimbursement Of Bank Fees		D	One-Time Disbursements	Cumulative Contributions & Disbursements (C thru E)		Net Market Change (B) - (F)		Obligation at the end of year	Net Benefit Obligation (H) - (G)
12/31/2022	\$ 8,960,867	\$ 10,787,341	\$	49,284	\$	-	\$	10,836,625	\$	(1,875,758)		
9/30/2022	\$ 8,568,076	\$ 10,787,341	\$	41,187	\$	(610,542)	\$	10,217,986	\$	(1,649,910)		
6/30/2022	\$ 9,563,809	\$ 10,787,341	\$	32,524	\$	-	\$	10,819,865	\$	(1,256,056)	Pending	Pending
3/31/2022	\$ 10,406,869	\$ 10,787,341	\$	23,807	\$	•	\$	10,811,148	\$	(404,279)		
12/31/2021	\$ 10,294,936	\$ 10,226,961	\$	17,744	\$	-	\$	10,244,705	\$	50,231		
9/30/2021	\$ 4,389,013	\$ 3,687,555	\$	13,786	\$	(252,368)	\$	3,448,973	\$	940,041		
6/30/2021	\$ 4,477,132	\$ 3,687,555	\$	17,612	\$	-	\$	3,705,167	\$	771,965	\$13,307,950.00	\$9,602,782.70
3/31/2021	\$ 4,477,132	\$ 3,687,555	\$	16,385	\$	-	\$	3,703,940	\$	773,191		
12/31/2020	\$ 3,656,064	\$ 3,687,555	\$	7,027	\$	-	\$	3,694,582	\$	(38,519)		
9/30/2020	\$ 3,449,521	\$ 3,687,555	\$	4,324	\$	(338,855)	\$	3,353,024	\$	96,496		
6/30/2020	\$ 3,366,324	\$ 3,348,700	\$	1,714	\$	-	\$	3,350,414	\$	15,910	\$10,021,434.00	\$6,671,019.83
3/31/2020	\$ 3,348,700	\$ 3,348,700	\$	-	\$	-	\$	3,348,700	\$	-		

North Los Angeles County Regional Center Vendor Advisory Committee Meeting Minutes

January 5, 2023

Present:

Suad Bisogno (Chair), Alex Kopilevich, Andrea Devers, Bob Erio, Dana Kalek, Don Lucas, Erica Beall, Jodie Agnew-Navarro, Lisa Williamsen, Nick Vokotic, Cal Enriquez, Rosalyn Daggs, Catherine Carpenter – **Committee Members**

Lizeth Chavez, Lilliana Windover, Gabriela Eshrati, Arshalous Garlanian, Cristina Preuss, Vini Montague, Malorie Lanthier, Evelyn McOmie—**Staff Members**

Michelle Heid - Legucator, Dolly Sharma -Minutes Services, Azucena Bustillos - Interpreter, and approximately 102 Service Providers- **Guests**

Absent:

Daniel Ortiz

I. Call to Order & Introductions

Suad Bisogno called the meeting to order at 9:30 am.

II. Public Input

No public input

III. Consent Items

A. <u>Approval of Agenda</u>

M/S/C (A. Kopilevich/E. Beall) To approve the agenda as presented

B. Approval of Minutes of the November 3rd meeting

M/S/C (A. Kopilevich/D. Kalek) To approve the Meeting Minutes for the November 3rd meeting as presented

IV. Executive Director's Report – Suad Bisogno for Ruth Janka

Suad reviewed items in the report on behalf of Ruth Janka, as presented in the packet. Highlights include:

Director of Consumer Services – Adult and Transition Services

While the Center continues to recruit for this Director position, Consumer Services Managers Donna Rentsch and Emmanuel Gutierrez are providing support and direction to the SFV Adult and Transition teams.

NLACRC's Board of Trustees has finalized the Center's 2022-2026 Strategic Plan, which includes five focus areas: Diversity, Equity, Inclusion & Belonging, Development & Growth of an Engaged Workforce, Employment & Day Services, Health and Wellness, and Safe, Affordable, & Accessible Housing. The full plan may be accessed on the Center's website at https://www.nlacrc.org/about-us/strategic-plan.

Alternative Service Delivery

Alternative service delivery ceased effective 12/31/2022; remote service delivery remains for certain services such as tailored day services and early intervention services. Of note, remote service delivery is the provision of traditional services virtually. The service must be delivered as stated in the service provider's program design with the exception that it may be delivered via remote electronic communication, the current directive extends the authorization of this through 2/1/2023.

Extended Remote Service Delivery for ILS, day programs and look alike day programs

DDS issued a directive on 11/23/22 allowing independent living skills training, adult day programs and "look alike" day programs to provide traditional services through remote service delivery through 12/31/2023. This directive is intended to protect health and safety, and acknowledges the current staffing shortages. Providers must notify the regional Center of the consumer's preference for remote services and document the monthly amount for consumer will receive. Regional centers shall confirm that remote services will be effective in meeting needs and are preferred by the consumer.

Office of the Ombudsman

DDS has established the Office of the Ombudsperson to assist individuals and their families who are applying for or receiving reginal center services under the Lanterman Act. Effective December 1, 2022, this office became available to provide information, facilitate resolution to disagreements and complaints, make recommendations to the Department, and compile and report data. Information about the Office of the Ombudsperson can be found on NLACRC's website in the Publications & Resources section.

Lanterman Act Hearings Advisory Committee

DDS and the Office of Administrative Hearings are establishing an advisory committee to provide input regarding mediations and hearings conducted by the OAH. The committee will have up to 18 members, with at least half of the membership being individuals and families served by the regional Center. Other members will include Disability Rights California, State Council on Developmental Disabilities, Association of Regional Center Agencies, Office of Clients Rights Advocacy and other developmental advocacy services organizations. Committee will meet virtually twice per year.

V. Chief Financial Officer's Report – Vini Montague

VI. Community Services Director's Report – Arshalous Garlanian

Arshoulous reviewed items in the report as presented in the packet.

Department Announcement:

The department is pleased to announce the promotion of Venus Rodriguez Khorasani as the Community Services Manager.

Alternative Nonresidential Services

NLA continues to engage with consumers on the options for services including but not limited to traditional, traditional services delivered remotely and/or tailored day services with the conclusion of the provision of Alternative Services on December 31, 2022.

Remote Services:

The Department issued a directive on November 23, 2022, that provides consumers the ability to voluntarily choose remote delivery for Day Programs, Look-a-like day programs, and independent living services through December 31, 2023. Providers must notify consumer CSC's of the consumer's preference and document the number of remote services each consumer receives monthly. If you have questions related to Remote Services, contact Resourcedevelopment@nlacrc.org.

Tailored Day Services (TDS)

On 12/1/2022, DDS rolled out a one-page addendum to update program designs for vendors interested in providing Tailored Day Services. To find the Addendum, please visit the NLA website. Tailored Day Services Addendums. Please submit the TDS addendum to NLA Resource Development team at resourcedevelopment@nlacrc.org. Program designs can be reviewed to determine who is eligible for TDS.

<u>Transportation</u>

In response to concerns raised regarding Transportation Services and the transition from Alternative Services, the Department is working with a small group of providers to help inform a temporary option while a long-term alternative is explored. Information about the temporary option is forthcoming and expected to begin in January 2023.

NLACRC Tech Lending Library Resource

Resource available for individuals and families who are in need of technological equipment (such as a laptop, IPad or Tablet). Supply is limited. Please contact your CSC for additional information as well for a referral to the service.

2023 Service Provider Trainings/Webinars/Symposiums

Community Services is excited to announce many trainings/webinars/symposiums this coming year. Some of the types of training include Person Centered Thinking, Cultural Diversity training, Open Futures Learning, Universal Lifestiles, etc.

Request for Proposal (RFP) Transportation provider

NLA is seeking service providers to operate transportation services and transportation assistant services to serve people with developmental disabilities who reside in the San Fernando Valley region of Los Angeles County. The applicant(s) selected to provide

transportation services and transportation assistant services in the NLA service region will work closely with R&D Transportation Services Inc. (R&D), transportation broker, who provides scheduling, routing, quality assurance, and oversight of all contract transportation billing invoices. The deadline for submissions is January 29, 2022.

Request for Proposal (RFP)/Grant: Enhanced Community Integration for Children and Adolescents

NLACRC has received an allocation of \$848,800 to fund projects that will enhance inclusive social and recreation programs for families, children, and adolescents with I/DD in

underserved communities. The deadline for Submission is January 8, 2023. All awardees must have fully executed contracts by March 2023.

Soc Rec RFV

With the restoration of Social Recreation, CAMP, and Non-Medical Therapy Services, NLACRC's continues to have the Request for Vendorization open for these types of services & will remain until the need for the resources is met. There are no start-up funds associated with these projects.

Open Proposal Period (OPP)

Cycle will begin the last week of January and interested applicants can submit a request for any currently vendorizable service/service code.

HCBS Compliance

NLA will continue to provide technical assistance to providers on their validation and remediation forms. If NLA has contacted you for follow-up regarding your agency's validation or remediation status, please reply ASAP. • For any questions regarding your agencies, please get in touch with the NLA HCBS team at hcbscompliance@nlacrc.org. For more information on the HCBS Final Rule please visit our website at https://www.nlacrc.org/serviceproviders/hcbs-cms-final-rule.

Electronic Visit Verification (EVV)

Effective January 1, 2023, Home Health Agencies must be registered and use the electronic visit verification (EVV) system. Home Health care services subject to EVV: 460 Participant-Directed Nursing Services, 742 Licensed Vocational Nurse, 744 Registered Nurse, 361 Skilled Nursing. Agencies providing: 854 Home Health; 856 Home Health Aide; 707 Speech Pathology; 773 Occupational Therapy; 772 Physical therapy; 359 Home Health Aide; 372 Speech, Hearing, & Language; 375 Occupational Therapy; 376 Physical Therapy. DDS EVV page at https://www.dds.ca.gov/services/evv/

DDS to host Open office hours for Providers to ask questions.

Upcoming Office Hours:

- January 12, 2023, 5:30-6:30pm
- January 17, 2023, 2:00-3:00pm

Annual Program Evaluations

Community-based day programs (Service Codes 505, 510, 515, 520 and 805) were due for Fiscal Year 2022 September 30th. All programs submitted their evaluations. In-home respite

agencies (service code 862) annual program evaluations are due for calendar year 2022 to: contract&compliance@nlacrc.org by Friday, March 31st.

Rate increases

ARM rate changes effective January 1, 2023. Accounting will update rate, there is no action required from service providers. To request an adjustment based on increased payroll cost of \$15.50/hour per CA State minimum wage, submit request by March 1, 2023

Negotiated rates: Submit request to NLA Accounting at raterequest@nlacrc.org

DDS-set rates: Submit request to DDS Fiscal team at RateAdjustRequest@dds.ca.gov

https://www.dds.ca.gov/rc/vendor-provider/minimum-wage/

AB 136 / 2019 Rate Study Implementation Updates

Effective January 1, 2023, rate adjustment of "50% of the difference between rate in effect March 31, 2022, and the fully-funded rate model". This is the 2nd of 3 phases.

As a reminder, four goals guide rate reform: 1) consumer experience, 2) equity, 3) quality and outcomes, and 4) system efficiencies.

Per WIC, 4519.10(c)(1)(B), a priority of this phase 2 rate increase is to enhance wages and benefits for direct services staff who spend a minimum of 75 percent of their time providing support, care, supervision, or assistance to consumers.

Providers must maintain documentation that the percentage included for direct care staff wages and benefit costs included in the rate model is used to increase wages, salaries, or benefits of eligible staff members by at least the same percentage as provided in the rate models. Eligible service providers will receive the same dollar amount increase effective January 1, 2023 as received April 1, 2022. January invoices will reflect updated rates

Rate Letter & Excel calculations will be shared via Dropbox.com Any questions regarding rates should be referred to Contract&Compliance@nlacrc.org.

Vendor Support Forum

NLACRC hosted the first Vendor Support Forum on November 10th. NLA was present to help answer questions and discuss current changes to service delivery. The following Vendor Support Forum is on January 12, 2023 at 10 am.

Quality Incentive Program- Service Access and workforce capacity

The first round of funded incentives included 1,492 providers, the second phaser included 423 providers, and approximately 191 remain to be reconciled. The Department anticipates providing regional centers with the third and final round of funded incentive payments by January 4, 2023. Letters went out to 15 NLACRC vendors that were part of the second round of funded incentives.

Free COVID-19 Tests:

The United States Postal Service (USPS) has re-initiated test distribution, and each household can order four free COVID-19 tests. Tests will start shipping the week of December 19th. The order form can be found at: https://special.usps.com/testkits.

Braiding Resources to Collaboratively Develop and Strengthen Housing & Services Partnerships

Join the Housing and Services Resource Center (HSRC) to learn how state and local systems can develop lasting cross-sector partnerships to increase access to accessible, affordable

housing and supportive services for people with disabilities, older adults, and people at risk of or experiencing homelessness. The webinar will include real-time captioning and ASL interpreting. If you need any additional accommodations, or if you have questions, please email HSRC@acl.hhs.gov. This will take place on January 9th, 2023 at 2-:00 pm

Community Living Fund Program RFI Respondent Teleconference

DOR is seeking 501(c)(3) non-profit organizations to provide services to individuals with disabilities, including older adults, through the Community Living Fund Program. This program advances California's Master Plan for Aging and No Wrong Door models by expanding the capacity of disability and aging services and programs to provide personcentered institutional transition and diversion services for people of all ages and with any type of disability who do not qualify for existing services. Request For Interest (RFI) Response Required By: Friday, January 13, 2023.

VIII. Legislative Report – Michelle Heid

Michelle reviewed this report as presented in the packet. A few highlights include:

Legislative Update

Results from the November election have been certified and there were no major surprises across the state, but Santa Clarita did get a new Assemblymember, Pilar Schiavo who defeated Suzette Valladares in a close contest. Governor Gavin Newsom and Lt. Governor Eleni Kounalakis were reelected to their seats and all the democratic candidates won their statewide races. US Senator Alex Padilla won his first election as he was appointed to the seat by Governor Newsom when it was vacated by then Senator and now Vice President Kamala Harris. The Democrats will retain their supermajority status in both houses of the state with 32 Democrats in the Senate and 62 in the Assembly.

On December 5th 2022, the California Legislature began a new 2-year legislative session which began with the swearing in of many new legislators. Thirty-seven (37) of the 120 California Legislators are newly elected to state office. Legislators did not waste time and bill introduction began on the first day of the session. There will be hundreds more bills introduced before the bill introduction deadline on February 17th, 2023.

Governor Gavin Newsom also called for a special session to pass price gouging penalties on oil companies and push forward new efforts to increase transparency and accountability. The action came following a state hearing to investigate the unprecedented spike in gasoline prices that occurred in the fall.

January 1st, 2023 will be the effective date for many laws passed in 2022 including measures to reform conservatorship and supported decision-making, fight climate change, protect women's right to choose, support small businesses, pay equity, and relevant to the disability community AB 1663 and CARE Court will begin implementation. https://www.gov.ca.gov/2022/12/12/new-laws-taking-effect-next-year-and-why-they-matter/

Governor Gavin Newsom will start the 2023-2024 budget season off with the release of his January Budget proposal by January 10th. The Legislature's budget analyst predicts the state will see a deficit in the coming year of \$25 billion and possibly more if there's a recession. This comes just five months after spending the \$100 billion surplus that was seen during the 2022- 2023 budget year. The Assembly has released its Budget Blueprint which notes last year's \$1.2 billion investment in provider rates and the implementation of the new rates in 2023 and 18 Page 3 of 13 Engaging and Empowering the Disability Community 2024. The plan mentioned adjusting state formulas for inflation, however, there was no specific mention of regional center operations funding, which has not been adjusted in over 20 years. https://abgt.assembly.ca.gov/sites/abgt.assembly.ca.gov/files/2023%20Budget%20Bluepr int% 20Final.pdf

Fun Fact

The 91st Annual California State Capitol Tree Lighting Ceremony was held on December 1st, 2022 with singing, dancing, and musical performances rounding out the celebration. Governor Newsom and First Partner Jennifer Siebel Newsom were joined by special guest Layla Datskyy, an 8-year-old from Fair Oaks, CA who is served by the Alta California Regional Center. Since 1983, the State Capitol Tree has been decorated with ornaments hand made by children and adults with developmental disabilities. It's been 39 years since Governor Deukmajian began the tradition of inviting a child served by one of the state's regional centers to kick off the holiday season by hanging an ornament and lighting the tree.

Safety Net Workgroup

The workgroup met last on November 16th and December 5th, 2022. Data was presented on the Systemic, Therapeutic, Assessment, Resources and Treatment (START) program which serves individuals residing in-home and out-of-home, providing person-centered, trauma informed, evidence-based, positive support for individuals ages six and older. Information about the number of individuals served by START teams and reasons for referral to the program were presented. A look at pre- and post-enrollment outcomes based on psychiatric hospital admissions and emergency room visits shows a marked decrease in incidents.

<u>Lanterman Act Advisory Committee</u>

The Department of Developmental Services is now accepting applications to serve on the Lanterman Act Hearing Advisory Committee. The Committee will make recommendations on how to improve the various hearing/mediation processes. This committee will meet virtually (online) two times per year (with additional meetings possibly requested by DDS or OAH) to give the Office of Administrative Hearings (OAH) and DDS input on conducting the mediations and hearings. The Committee will have up to 18 members. Individuals and families receiving 25 Page 10 of 13 Engaging and Empowering the Disability Community regional center services will be at least half (1/2) of the total members. Other members include Disability Rights California; the State Council on Developmental Disabilities, representatives of regional centers; the Association of Regional Center Agencies; the Office of the Clients' Rights Advocacy; and developmental services advocacy organizations. Applications are due by January 31st, 2023.

https://www.surveymonkey.com/r/LAHACMembership

<u>Little Hoover Commission</u>

Modeled after the federal Hoover Commission, the Little Hoover Commission is an independent California state oversight agency, and is currently studying California's Department of Developmental Services system (DDS), looking at current disparities in service access, the underlying causes of these disparities, and the current state efforts to address them. They will then provide recommendations for how the state government can improve the consistency and timeliness of service delivery for the individuals and their families who rely on the state's developmental services programs. The Commission conducts public hearings and advisory committee roundtable discussions as part of their information gathering and study process. Recordings of these will be available on their website. The Commission had 3 hearings on October 13th, November 10th, and December 8th and held an Advisory Committee Roundtable on October 27th. Videos of the hearings can be viewed on the website above. It is expected that a report will be issued following these meetings.

ARCA Webinar Series

Beginning in late 2021, the Association of Regional Center Agencies (ARCA) began presenting a series of webinars on topics relevant to the disability community in CA. These webinars can all be viewed at the website above and include topics such as employment, regional centers and how services start, social recreation (one webinar for providers and another for individuals and families), and understanding the HCBS final rule. In addition to the webinar recordings resources on the topics are often provided.

Statewide Medi-Cal Managed Care Enrollment for Dual Eligible Beneficiaries in 2023 Starting January 2023, most dually eligible beneficiaries not already enrolled in Medi-Cal managed care will be enrolled in Medi-Cal plans in 2023. This will impact individuals enrolled in Medi-Cal and Medicare, often referred to as medi-medi patients. DHCS sent beneficiary notices at the end of 2022. The Department of Health Care Services (DHCS) provided a video to explain the changes which can be accessed at: https://youtu.be/EAeoGcBeiPI For more information on Medi-Cal managed care plan choices, please visit https://www.healthcareoptions.dhcs.ca.gov/

Medi-Cal Managed Care Procurement in 2024

On August 25, 2022, the Department of Health Care Services' (DHCS) issued a news release announcing its intent to award contracts to commercial managed care plans (MCPs) to deliver Medi-Cal services to Californians across the state, beginning in 2024. They subsequently announced the intended awardees which include Molina Healthcare, Anthem Blue Cross Partnership Plan, and Health Net. This impacts patients and providers in 21 counties across the state including Los Angeles County where patients will have 3 managed care plans to choose from: Kaiser, LA Care, and Molina Healthcare. Limited information is available regarding how this procurement plan will impact patients, but it appears that those in LA County will lose access to Health Net, Anthem, and Promise Health Plan (Blue California) leaving those patients to transition to another MCP. DHCS estimates 1,053,700 patients in LA County will transition to a new MCP. This procurement effort is part of DHCS' broader efforts to redefine how care is delivered to Medi-Cal beneficiaries, 99 percent of whom will be enrolled in managed care by 2024. DHCS' priority is to ensure minimal disruption to members, and ensure continuity of coverage, as they transition will MCPs that remain contracted with DHCS, effective January 1, 2024. This transition will

also impact providers who serve individuals with developmental disabilities including ABA providers some of which have had difficulty contracting with MCPs leading to inadequate provider networks and limiting access to care particularly for individuals with autism spectrum disorder.

IX. Committee Business

A. DSP University Levels 1, 2 & 3 Rate Models - Suad Bisogno

This section will be a placeholder on the agenda to provide continuous updates from DDS, there are no updates at this time.

B. Vendor Support Forum Update - Suad Bisogno

This meeting has been scheduled for January 12th at 10 am. This will compile requests and questions for David Ramos for further discussion during the forum. Committee Workgroup information are listed in the packet for those who would like to get involved.

C. In-Person VAC Meeting

After the in-person gathering, an in-person Committee Meeting was discussed. Registration will be available for those who want to attend, not to exceed 30 individuals with a Zoom option for anyone else who would like to attend. It was decided to plan the in-person meeting for Thursday, April 6, 2023 at the San Fernando Valley Location. Per current NLA practice, masks will be required.

X. Committee Work Group Reports

A. Early Start Services - Dana Kalek

Dana reported that after the November meeting, intake was the highest that it has ever been. There is a separate intake department that will be starting, more details to come. The department will expediate the process of intake assessments and obtaining services within 1–2-week period.

Concerns have been raised in regards to insurance companies are not paying for services. There has been communication that invoices can be submitted to NLA as the payor of last resort if unable to collect from insurance. Anyone who is having issues can contact the Billing Department for further assistance.

Laptops are being lended to families who need it for Telehealth Services. CSCs will be able to provide more information.

B. School Age Services - Cal Enriquez

There is nothing to report at this time, the next School-Age Workgroup will take place in February.

C. Adult Services - Suad Bisogno, Erica Beall

Suad shared that providers are still having challenges communicating with Service Coordinators. If providers are unable to reach the CSC, please CC their reporting manager. CSCs who have transitioned out of NLA should have an automatic response

should an email be sent to that account.

Billing issues were discussed in regards to CIE and PIP payments, which will further be discussed at the Vendor Support Forum. A new protocol for CIE and PIP contracts was requested from NLA, in addition to referral packets that are more accurate and with employment as a goal in the IPP.

Self-Determination was discussed, particularly that individuals are having issues getting budgets approved, which causes a delay in the start of services. Suad reached out to the Self-Determination team to establish a process where vendors can better support individuals/families.

Questions were raised on the timeline of the Tailored-Day Service process. Also, clarification was requested on when to report information to Lizeth Chavez or the Employment Specialist role.

Anyone interested in joining this workgroup can contact Suad at: suad@irioc.org

XI. **Board Committee Reports**

A. Administrative Affairs - Bob Erio

Bob reported that at the December meeting, there was routine discussion in regards to the COVID rates continued, as well as tailored-day services. Payments for ICF payments were about \$4.5 million dollars in the red, although he asked for clarification. IN regards to staffing, NLA reports that they are 85% staffed, with 17 new hires and 9 separations, there was a net positive of 8 positions filled in December

B. <u>Consumer Services</u> - Erica Beall

There was nothing to report for this month.

C. <u>Government & Community Relations</u> - Andrea Devers

There was nothing to report for this month.

D. Nominating - Suad Bisogno

Registration was closed for VAC applications, there were 7 applications total. There was 1 individual who resigned, and 3 people who are phasing out in June 2023 due to term limits. There will be 4 vacant positions. There are currently no representatives for Health Licensed Facilities and Transportation on the Committee. Anyone who is interested can reach out to Suad at: suad@irioc.org

E. <u>Strategic Planning</u> - Kimberly Bermudez

There was nothing to report for this month as Kimberly was not present.

Review of Meeting Action Items

Lizeth to send out additional RSVP information for the in-person meeting on April 6th, 2023.

XIII. Board Meeting Agenda Items

Meeting agenda:

A. Minutes of the January 5th Meeting

XII. Announcements / Information Items / Public Input

- B. Next Meeting: Thursday, February 2, 2023 at 9:30 am.
- C. Board Approved VAC Priorities for FY 2022-23
- D. Committee Attendance
- E. Committee Member Roster

Public Input

Michelle Heid asked if services like ABA and AST are allowed to be provided via Telehealth. There has been conflicting answers from NLA, Michelle was asking for clarification. She also inquired if there is a permanent allowance for Telehealth services via Early Start. Suad stated that Michelle was welcome to send the questions to herself or David Ramos for discussion at the Vendor Support Forum.

Jodie Agnew-Navarro shared at Registration is open for attendees and sponsors for the upcoming March Cal-Tash Conference.

XIV. Adjournment

Suad Bisogno, Committee Chair adjourned the meeting at 10:34 am.

XV. Committee Work Group Information:

- A. Early Start Services (Dana Kalek)
 Contact: Dana Kalek dkalek@cdikids.org
- B. School Age Services (Cal Enriquez)
 Contact: Cal Enriquez cenriquez@accreditednursing.com
- C. Adult Services (Suad Bisogno & Erica Beall) Contact: Suad Bisogno - Suad@irioc.org

Submitted by:

(*) Lizeth Chavez

Executive Administrative Assistant

(*) The majority of these minutes are taken from the Minute Service submission and reviewed/edited as presented herein by NLACRC staff.

NLACRC 2021-22 Board of Trustees Board Meeting Attendance

Rolling 12-Month Attendance	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Total
Board Members	Board	Dark	Board	Absences										
Ana Laura Quiles, President	P	P	P	P	P	P		Р	P	P	P		P	0
Alma Rodriguez	P	P	P	P	P	P		Р	P	P	P		P	0
Andrew Ramirez								Р	P	P	P		P	0
Brian Gatus								Р	P	P	P		P	0
Cathy Blin	P	P	P	P	P	P		Р	P	P	P		P	0
David Coe	P	P	P	P	P	P		Р	P	P	P		P	0
Nicholas Abrahms	P	P	P	P	P	P		Р	P	P	P		P	0
Leticia Garcia	P	P	Ab	P	P	P		Р	P	P	P		Р	1
George Alvarado								Р	P	P	P		Р	0
Jennifer Koster	P	P	Р	P	р	P		Р	P	P	P		Р	0
Jordan Feinstock								Р	P	P	P		Р	0
Lillian Martinez	P	P	P	P	P	P		Р	P	P	P		P	0
Rocio Sigala	P	Р	Р	Ab	Р	Р		Р	Р	Р	P		P	1
Sharmila Brunjes								Р	Р	Р	P		P	0
Sylvia Brooks Griffin	P	Р	Р	Р	Р	P		Р	Р	Ab	Ab		P	2
Suad Bisogno (VAC Rep)								Р	Ab	P	P		P	1

P = Present Ab = Absent

Attendance Policy: In the event a Trustee shall be absent from three (3) consecutive regularly-scheduled Board meetings or from three (3) consecutive meetings of any one or more committees on which he or she may be serving, or shall be absent from five (5) regularly-scheduled Board meetings or from five (5) meetings of any one or more Committees on which he or she may be serving during any twelve (12) month period, then the Trustee shall, without any notice or further action required of the Board, be automatically deemed to have resigned from the Board effective immediately. The secretary of the Board shall mail notice of each Trustee's absences during the preceding twelve (12) month period to each Board member following each regularly-scheduled Board meeting. (policy adopted 2-10-99)

12-Month Attendance	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Total
Administrative Affairs						Dark						Dark		Absences
David Coe, Chair							*P	P	P	P	P		P	0
Alma Rodriguez							*P	P	P	P	P		Ab	1
Lety Garcia									*P	P	P		P	0
Ana Quiles	P	P	P	P	P		P	P	P	P	P		P	0
Lillian Martinez	P	P	P	P	P		P	P	P	P	P		P	0
Bob Erio (VAC Rep)							*P	Р	P	P	P		P	0

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North Los Angeles County Regional Center Consumer Advisory Committee

FY22-23 Meeting Attendance

Consumer Attendee	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	TOTALS
*Committee Members	2022	2022	2022	2022	2022	2022	2022	2022	2022	2022	2022	2023	2022	Absences
*Jennifer Koster, Chair		Р		Р			Р	Р	Р	Р		Р	Р	0
*Bill Abramson	P	Р	Р	Р	P		Р	Р	Ab	Р		Р	Р	1
*Pam Aiona	P	Р	Р	Р	P		Р	Р	Р	Р		Р	Р	0
*Suzanne Paggi	P	Р	Р	Р	P		Р	Ab	Р	Р		Р	Р	1
*Cynthia Samano	P	Р	Р	Р	P		Р	Ab	Ab	Р		Ab	Ab	4
Susan Good	P		Р	Ab	Ab		Ab	Ab	Ab	Ab		Ab	Р	
Melinda Tannan							Р	Ab	Ab	Ab		Ab		
Lesly Forbes								P	Ab	Ab		Ab	Ab	
Destry Walker								Р	Ab	Р		Ab		
Alex Phuong								P	P	P		P	P	
Elena Tiffany									*P	Ab		P		
Desiree Boykin									*P	Ab		P	P	
Miguel Lugo												P		
Kristine Mosteiro												P		
												. IMINITINA NA MANTANIA NA		

No Meeting

Voluntarily Resigned

 $^{"}$ Ab = Absent

No Meeting

Membership: Consumers who attend 5 meetings in a 12-month period can become a CAC Member.

12-Month Attendance	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Oct-22	Nov-22	Dec-22	Jan-23	Total
Consumer Services Committee						Dark					Dark		Absences
Andrew Ramirez, Chair							*P	P	P	P			0
Cathy Blin	P	P	P	P	Р		Ab	P	P	P			1
Brian Gatus							*P	Ab	P	P			1
Sharmila Brunjes							*P	P	Ab	Р			1
Nicholas Abrahms	Р	P	P	P	Р		Р	P	P	P			0
Rocio Sigala	P	P	P	Ab	Р		P	P	P	Ab			2
George Alvarado (Bd Intern)							*P	P	P	P			0
Erica Beall (VAC Rep)							*P	P	P	P			0

P = Present Ab = Absent

Attendance Policy: In the event a Trustee shall be absent from three (3) consecutive regularly-scheduled Board meetings or from three (3) consecutive meetings of any one or more committees on which he or she may be serving, or shall be absent from five (5) regularly-scheduled Board meetings or from five (5) meetings of any one or more Committees on which he or she may be serving during any twelve (12) month period, then the Trustee shall, without any notice or further action required of the Board, be automatically deemed to have resigned from the Board effective immediately. The secretary of the Board shall mail notice of each Trustee's absences during the preceding twelve (12) month period to each Board member following each regularly-scheduled Board meeting. (policy adopted 2-10-99)

12-Month Attendance	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Total
Executive Committee						Dark						Dark		Absences
Leticia Garcia	P	P	P	P	Р		P	P	P	P	P		P	0
Lillian Martinez	P	P	P	P	P		P	P	P	P	P		P	0
Ana Quiles	P	P	P	P	Р		Р	P	P	P	P		P	0
David Coe							*P	P	P	P	P		P	0
Rocio Sigala							*P	P	P	Ab	P		P	1
Alma Rodriguez				·	·		*P	P	P	P	P		Ab	1

P = Present Ab = Absent

12-Month Attendance	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Aug-22	Oct-22	Nov-22	Dec-22	Jan-23	Total
Government & Community Relations Committee						Dark					Dark	Dark		Absences
Andrew Ramirez							*P	P	P	Р			Р	0
Cathy Blin	P	Р	Р	P	P		Ab	P	P	P			Р	1
Brian Gatus							*P	P	Ab	P			P	1
Nicholas Abrahms	P	P	P	P	Р		Р	P	P	Р			Р	0
Jordan Feinstock							*P	P	P	P			Р	0
Sharmila Brunjes							*P	P	P	Ab			Р	1
Sylvia Brooks Griffin	P	Ab	Ab	P	P		Р	Ab	P	P			Ab	4
George Alvarado			·	·			*P	Ab	Р	Р			Р	1

P = Present Ab = Absent

12-Month Attendance	Jan-22	Feb-22	Mar-22	4/1/2022	4/18/2022	May-22	Jun-22	Jul-22	Aug-22	9/7/2022	9/20/2022	Oct-22	Nov-22	Dec-22	Jan-23	Total
Nominating Committee						Dark	Dark	Dark	Dark					Dark	Dark	Absences
David Coe										P	Ab	Р	P			1
Lillian Martinez										P	P	P	P			0
Jennifer Koster										P	P	P	Ab			1
Ana Quiles		*P	P	P	Р					P	P	Р	P			0
Suad Bisogno										P	P	Р	P			0

P = Present Ab = Absent *= Joined Committee

12-Month Attendance	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Total
Post-Retirement Medical Trust		Dark	Dark		Absences									
Ana Quiles	P			P			P			Ab			P	1
Alma Rodriguez							*P			Ab			Ab	2
David Coe							*P			Р			P	0

P = Present Ab = Absent * = Joined Committee

12-Month Attendance	Jan-22	31-Jan	Feb-22	Mar-22	Apr-22	2-May	23-May	31-May	Jun-22	Jul-22	Aug-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-21	Jan-22	Total
Strategic Planning					Dark				Dark	Dark						Dark	Dark	Absences
Sharmila Brunjes													P	P	P			0
Lety Garcia	P	P	P	P		P	P	P			P	P	P	P	P			0
Brian Gatus													Ab	Ab	P			2
Lillian Martinez	P	P	P	P		P	P	P			P	P	P	P	P			0
Ana Quiles	P	P	P	P		P	P	P			P	P	P	P	P			0
Alma Rodriguez													P	P	P			0
VAC Rep (Open)																		0

P = Present Ab = Absent

12-Month Attendance	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Total
Vendor Advisory Committee											Dark			Absences
Suad Bisogno, Chair	P	Ab	P	P	P		P	P	P	P		P	P	1
Alex Kopilevich	P	P	P	P	P		P	P	P	P		P	P	0
Andrea Devers							* P	P	P	P		P	P	0
Bob Erio	P	P	P	P	P		P	P	P	P		P	P	0
Cal Enriquez	P	P	P	P	P		Ab	P	P	P		P	P	1
Catherine Carpenter	P	P	P	P	Ab		P	P	P	Ab		P	P	2
Dana Kalek	P	P	P	P	P		P	P	P	P		P	P	0
Daniel Ortiz	P	P	Ab	P	P		P	P	P	P		Ab	P	2
Don Lucas	P	Ab	P	P	P		P	Ab	P	P		P	P	2
Erica Beall	Ab	P	P	P	P		P	P	P	P		P	P	1
Jodie Agnew Navarro	P	P	P	Р	P		P	P	P	P		P	P	0
Lisa Williamsen							* P	P	P	P		P	P	0
Nick Vukotic	P	P	P	P	P		P	P	P	P		P	P	0
Rosalyn Daggs							* P	P	P	P		Ab	P	1

P = Present Ab = Absent

North Los Angeles County Regional Center FY 2021-22 Board of Trustees Board and Committee Time Report

Fiscal Year 2022-2023

(Rounded to the nearest quarter of an hour.)

		Ju	l-22			А	ug-22			Se	p-22	
Committee	Start	End	Total Time	Rounded	Start	End	Total Time	Rounded	Start	End	Total Time	Rounded
New Board Member Orientation	3:00 PM	5:15 PM	02:15	2:15								
Administrative Affairs	6:15 PM	8:31 PM	02:16	2:15	6:02 PM	8:00 PM	01:58	2:00	6:02 PM	7:41 PM	1:39	1:45
Board Meeting					6:30 PM	8:30 PM	02:00	2:00	6:30 PM	8:21 PM	1:51	1:45
Consumer Advisory					11:24 AM	12:42 PM	01:18	1:15	11:10 AM	1:03 PM	1:53	2:00
Consumer Services	6:05 PM	9:44 PM	03:39	3:45	6:01 PM	7:40 PM	01:39	1:45	7:42 PM	9:54 PM	2:12	2:15
Executive	8:32 PM	10:56 PM	02:24	2:30	8:01 PM	10:23 PM	02:22	2:15				
Government and Community Relations (*)					6:03 PM	8:48 PM	02:45	2:45				
Government and Community Relations	9:51 PM	9:59 PM	80:00	0:15	7:42 PM	9:28 PM	01:46	1:45				
Nominating									5:34 PM	7:18 PM	1:44	1:45
Nominating									5:33 PM	7:16 PM	1:43	1:45
Strategic Planning					6:02 PM	8:45 PM	02:43	2:45				
Strategic Planning					6:03 PM	7:33 PM	01:30	1:30	6:04 PM	8:11 PM	2:07	2:00
Post Retirement Medical Trust	5:30 PM	6:12 PM	00:42	0:45								
Vendor Advisory					9:30 AM	11:46 AM	02:16	2:15	9:31 AM	11:47 AM	2:16	2:15
Total Hours/Month			11:24	11:45		·	20:17	20:15			15:25	15:30

North Los Angeles County Regional Center FY 2021-22 Board of Trustees Board and Committee Time Report

Fiscal Year 2022-2023

(Rounded to the nearest quarter of an hour.)

(Rounded to the nearest quarter of an hour.)

		O	ct-22			No	v-22		Dec-22		Ja	n-23	
Committee	Start	End	Total Time	Rounded	Start	End	Total Time	Rounded	DARK	Start	End	Total Time	Rounded
New Board Member Orientation													
Administrative Affairs	6:17 PM	7:40 PM	01:23	1:30	6:00 PM	6:56 PM	00:56	1:00		6:15 PM	9:19 PM	03:04	3:00
Board Meeting	6:30 PM	8:22 PM	01:52	1:45	6:31 PM	8:17 PM	01:46	1:45		6:30 PM	9:07 PM	02:37	2:30
Consumer Advisory	3:10 PM	4:08 PM	00:58	1:00	3:05 PM	4:56 PM	01:51	1:45		3:08 PM	3:53 PM	00:45	0:45
Consumer Services	6:02 PM	7:42 PM	01:40	1:45	6:08 PM	7:18 PM	01:10	1:15					
Executive	7:41 PM	8:50 PM	01:09	1:15	7:30 PM	8:59 PM	01:29	1:30		9:24 PM	11:01 PM	01:37	1:30
Government and Community Relations (*)													
Government and Community Relations	7:43 PM	9:51 PM	02:08	2:15						6:02 PM	8:08 PM	02:06	2:00
Nominating	5:31 PM	7:17 PM	01:46	1:45									
Nominating													
Strategic Planning	6:02 PM	7:17 PM	01:15	1:15	6:00 PM	7:24 PM	01:24	1:30					
Strategic Planning													
Post Retirement Medical Trust	5:33 PM	6:15 PM	00:42	0:45						5:33 PM	6:00 PM	00:27	0:30
Vendor Advisory	9:39 AM	11:47 AM	02:08	2:15	9:34 AM	10:49 AM	01:15	1:15		9:30 AM	10:34 AM	01:04	1:00
Total Hours/Month			15:01	15:30			9:51	10:00				11:40	11:15

North Los Angeles County Regional Center FY 2021-22 Board of Trustees Board and Committee Time Report

Fiscal Year 2022-2023

		F	eb-23			1	Mar-23			-	Apr-23	
Committee	Start	End	Total Time	Rounded	Start	End	Total Time	Rounded	Start	End	Total Time	Rounded
New Board Member Orientation												
Administrative Affairs												
Board Meeting												
Consumer Advisory	3:02 PM	4:36 PM	01:34	1:30								
Consumer Services												
Executive												
Government and Community Relations (*)												
Government and Community Relations												
Nominating												
Nominating												
Strategic Planning												
Strategic Planning												
Post Retirement Medical Trust												
Vendor Advisory	9:31 AM	11:28 AM	01:57	2:00								
Total Hours/Month			3:31	3:30			•					

North Los Angeles County Regional Center

ALPHABET SOUP

AAIDD - American Association on Intellectual and Developmental Disabilities

AAP - Adoption Assistance Program

AB - Assembly Bill (State)

ABLE Act - The "Achieving a Better Life Experience" (ABLE) Act of 2014

ACRC - Alta California Regional Center
ADA - Americans with Disabilities Act
ADC - Adult Development Center
AFPF - Annual Family Program Fee
AIS - ARCA Information Systems

ARCA - Association of Regional Center Agencies

ARFPSHN - Adult Residential Facility for Persons with Specialized Healthcare Needs

BCBA - Board-Certified Behavior Analyst

CAC - Consumer Advisory Committee

CAL-ARF
 CAL-TASH
 CARF
 CARF
 California Association of Rehabilitation Facilities
 The Association for Persons with Severe Handicaps
 Commission on Accreditation of Rehabilitation Facilities

CASA - Community Advocacy Services Association

CASHPCR - California Association of State Hospitals-Parent Councils for

the Retarded

CCF - Community Care Facility
 CCL - Community Care Licensing
 CCR - California Code of Regulations

CCS - California Children's Services (State and County)CDCAN - California Disability Community Action Network

CDE
 CDER
 Client Development Evaluation Report
 CIE
 Competitive Integrated Employment

CMS - Centers for Medicare and Medicaid Services (formerly HCFA)

CMIS - Client Management Information System

COEC - Community Outreach and Education Committee (ARCA)

COLA - Cost of Living Adjustment

CP - Cerebral Palsy

CPES - Community Provider of Enrichment Services

CPP - Community Placement Plan

CRDP - Community Resource Development Plan

CSC - Consumer Service Coordinator

CSLA - Community Supported Living Arrangement

CVRC - Central Valley Regional Center

DAC - Day Activity Center

DCFS - Department of Children and Family Services (County)

DD - Developmental Disabilities

DD Council - State Council on Developmental Disabilities
DDS - Department of Developmental Services (State)

DHCS - Department of Health Care Services
DHS - Department of Health Services (State)

DOE - Department of Education (State and Federal)

DOF - Department of Finance DOH - Department of Health

DOR/DR - Department of Rehabilitation

DPSS - Department of Public Social Services (County)

DRC - Disability Rights California (formerly Protection & Advocacy, Inc.)

DSM - Diagnostic and Statistical Manual of Mental Disorders

DSP - Direct Support Professional

DSS - Department of Social Services (State)
DOR - Department of Rehabilitation (State)

DRC - Disability Rights California (formerly Protection & Advocacy)

DTT - Discrete Trial Training
DVU - Disability Voices United

EBSH - Enhanced Behavioral Support Home ECF - Exceptional Children's Foundation

EDD - Employment Development Department (State)
EDMS - Electronic Document Management System
ELARC - Eastern Los Angeles Regional Center

ELARC - Eastern Los Angeles Regional Center

EPSDT - Early and Periodic Screening, Diagnosis, and Treatment

FACT - Foundation for Advocacy, Conservatorship, and Trust of CA

FCPP - Family Cost Participation Program FDC - Fairview Developmental Center

FEMA - Federal Emergency Management Assistance FETA - Family Empowerment Team in Action

FHA - Family Home Agency

FMS - Financial Management Service
 FNRC - Far Northern Regional Center
 FSA - Flexible Spending Account

GGRC - Golden Gate Regional Center

HCBS - Home and Community Based Services (Waiver)

HCFA - Health Care Financing Administration (now called CMMS)

HIPAA - Health Insurance Portability and Accountability Act

HOPE - Home Ownership for Personal Empowerment

HRC - Harbor Regional Center

HUD - Housing and Urban Development (Federal)

ICB Model - Individualized Choice Budget Model **ICC** - Inter-agency Coordinating Council

ICC - Integrated Community Collaborative/Intregadoras

ICF - Intermediate Care Facility

- Intermediate Care Facility/Developmentally Disabled ICF/DD

- Intermediate Care Facility/Developmentally Disabled-Habilitative ICF/DD-H - Intermediate Care Facility/Developmentally Disabled-Nursing ICF/DD-N

ICF/SPA - Intermediate Care Facility/State Plan Amendment

IDEA - Individuals with Disabilities Education Act

IDEIA - Individuals with Disabilities Education Improvement Act

IDP - Individual Development Plan

IDT - Inter-disciplinary Team IEP - Individual Educational Plan **IFSP** - Individual Family Service Plan **IHP** - Individual Habilitation Plan **IHSS** - In-Home Supportive Services ILC- Independent Living Center ILS - Independent Living Services IMD - Institutes of Mental Disease Ibb - Individual Program Plan **IRC** - Inland Regional Center

KRC

ISP

LACHD - Los Angeles County Health Department

- Individual Service Plan

- Kern Regional Center

LACDMH - Los Angeles County Department of Mental Health LACTC - Los Angeles County Transportation Commission LADOT - Los Angeles Department of Transportation (City)

- Los Angeles Unified School District LAUSD

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LCSW - Licensed Clinical Social Worker LDC - Lanterman Developmental Center

LEA - Local Education Agency

LICA - Local Interagency Coordination Area

LRC - Lanterman Regional Center

MCH - Maternal and Child Health

MFCC - Marriage, Family and Child Counselor MHRC - Mental Health Rehabilitation Center

MMIS - Medicaid Management Information System

MSW - Masters in Social Work

NADD - National Association for the Dually Diagnosed

NASDDDS - National Association of State Directors of Developmental Disabilities

Services

NBRC - North Bay Regional Center

NLACRC - North Los Angeles County Regional Center

OAH - Office of Administrative Hearings OCRA - Office of Client Rights Advocacy

OPS - Operations funds (for Regional Centers)
OSEP - Office of Special Education Programs

OSERS - Office of Special Education and Rehabilitative Services

OSHA - Occupational Safety and Health Administration

OT - Occupational Therapy

PAI - Protection and Advocacy, Inc. (now called Disability Rights CA)

PDD - Pervasive Developmental Disorder
PDC - Porterville Developmental Center
PDF - Program Development Fund

PEP - Purchase of Service Expenditure Projection (formerly SOAR)

PEPRA - Public Employees' Pension Reform Act PERS - Public Employees' Retirement System

PET - Psychiatric Emergency Team PIP - Paid Internship Program

PL 94-142 - Public Law 94-142 (Right to Education Bill)

PMRT - Psychiatric Mobile Response Team

POLST - Physician Orders for Life-Sustaining Treatment POS - Purchase of Services funds (for Regional Centers)

PRMT - Post-Retirement Medical Trust

PRRS - Prevention Resources and Referral Services

PRUCOL - Permanently Residing in the U.S. Under Color of the Law

PT - Physical Therapy

QMRP - Qualified Mental Retardation Professional

RC - Regional Center

RCEB - Regional Center of the East Bay

RCFE - Residential Care Facility for the Elderly
 RCOC - Regional Center of Orange County
 RCRC - Redwood Coast Regional Center
 RDP - Resource Development Plan

RFP - Request for Proposals

RRDP - Regional Resource Development Project
RSST - Residential Service Specialist Training

SARC - San Andreas Regional Center

SB - Senate Bill (State)

SCDD - State Council on Developmental Disabilities

SCIHLP - Southern CA Integrated Health and Living Project

SCLARC - South Central Los Angeles Regional Center

SDRC - San Diego Regional Center SDC - Sonoma Developmental Center SDP - Self-Determination Program

SDS - Self-Directed Services

SEIU - Service Employees' International Union SELPA - Special Education Local Plan Area SG/PRC - San Gabriel/Pomona Regional Center

SLS - Supported Living Services

SMA - Schedule of Maximum Allowances (Medi-Cal)

SNF - Skilled Nursing Facility

SOAR - Sufficiency of Allocation Report (see PEP)
SOCCO - Society of Community Care Home Operators

SPA - State Plan Amendment

SRF - Specialized Residential Facility
SSA - Social Security Administration
SSDI - Social Security Disability Insurance
SSI - Supplemental Security Income
SSP - State Supplementary Program

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TASH - The Association for the Severely Handicapped

TCRC - Tri-Counties Regional Center

UAP
 University Affiliated Program
 UCI
 Unique Client Identifier
 UCP
 United Cerebral Palsy
 UFS
 Uniform Fiscal System

VAC - Vendor Advisory Committee

VIA - Valley Industry Association (Santa Clarita Valley)

VICA - Valley Industry & Commerce Association (San Fernando Valley)

VMRC - Valley Mountain Regional Center

WAP - Work Activity Program

WIOA - Workforce Innovation and Opportunity Act

[alphabetsoup] January 7, 2021

North Los Angeles County Regional Center Board of Trustees

Meeting Evaluation

me:					
mmen	ts:				
Di	d the meeting follow the agenda	a?		Yes	No
Di	d the meeting begin as schedule	ed?		Yes	No
Di	d the meeting end as scheduled	?		Yes	No
	d you receive written or verbal iout the issues on the agenda?	information		Yes	No
	d the information received enablished informed decisions?	ole you to		Yes	No
Di	d the issues concern:				
a.	Consumers?	Yes	No_		
b.	Board operations?	Yes	No_		
c.	Committee business?	Yes	No_		
d.	Center operations?	Yes	No_		
e.	None of the above? (please	e specify below)			
Di	d you feel prepared to participa	te in the meeting	g;	Yes	No
W	hat would you like more inform	ation about?			
_					

NLACRC Public Meeting Attendance FY2022-23

NLACRC											
Public Meetings	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	Total Attendees
Aprendiendo Entre Nos /											
Learning Amongst Us	60	No Mtg	172	No Mtg	15	No Mtg	97	No Mtg	99	No Mtg	443
Alienza de Hombres	73	No Mtg	45	37	43	26	28	40	29	11	332
Cafecito Entre Nos	104	72	96	95	126	108	50	62	108	22	843
Caseload Ratio Public Meeting	No Mtg	41	No Mtg	No Mtg	No Mtg	No Mtg	No Mtg	No Mtg	No Mtg	No Mtg	41
Virtual Town Halls	159	9	27	4	31	31	41	14	12	No Mtg	328
New Consumer Orientation -											
English (Qtrly)	31	No Mtg	No Mtg	No Mtg	25	No Mtg	No Mtg	25	No Mtg	No Mtg	81
New Consumer Orientation -											
Spanish (Qtrly)	4	No Mtg	No Mtg	No Mtg	6	No Mtg	No Mtg	3	No Mtg	No Mtg	13
New Consumer (ES) Orientation											
- English	No Mtg	No Mtg	No Mtg	No Mtg	17	No Mtg	No Mtg	5	No Mtg	No Mtg	22
New Consumer (ES) Orientation											
- Spanish	No Mtg	No Mtg	No Mtg	No Mtg	0	No Mtg	No Mtg	1	No Mtg	No Mtg	1
Performance Contract Public											
Meeting	No Mtg	66	No Mtg	No Mtg	No Mtg	No Mtg	66				
SDLVAC	No Mtg	32	24	No Mtg	28	31	30	29	No Mtg	32	206
SDP Informational Meeting -											
English	7	No Mtg	13	8	0	7	8	14	2	0	59
SDP Orientation Meeting -											
English	29	17	25	21	15	11	7	4	4	7	140
SDP Informational Meeting -											
Spanish	No Mtg	No Mtg	0	0	8	No Mtg	0	0	0	0	8
SDP Orientation Meeting -											
Spanish	No Mtg	4	No Mtg	No Mtg	6	No Mtg	No Mtg	7	No Mtg	0	17
Supported Living Servies (SLS)			_			_	_	_			
Orientation	30	19	8	10	9	8	3	3	No Mtg	4	94
Virtual Resource Fair	45	No Mtg	No Mtg	No Mtg	No Mtg	No Mtg	45				
Festival Educacional (annual											
event)	No Mtg	No Mtg	71	No Mtg	No Mtg	71					