



Board of Trustees Meeting

Wednesday, August 11, 2021
6:30 p.m.

Via Zoom Technology

Packet #2

North Los Angeles County Regional Center
Board Packet # 2
August 11, 2021
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North Los Angeles County Regional Center
Board of Trustees Meeting - *Via Zoom*
Wednesday, August 11, 2021
6:30 p.m.

~ **REVISED AGENDA** ~

1. **Call to Order & Welcome** – Lety Garcia, Board President
2. **Housekeeping**
 - A. Spanish Interpretation Available
 - B. Public Attendance (please note name in Chat)
3. **Board Member Attendance** – Liliana Windover, Executive Administrative Assistant
4. **Introductions** – Lety Garcia, Board President
5. **Public Input & Comments** (3 minutes)
6. **Consent Items**
 - A. Approval of Revised Agenda (*Packet 2, Page 3*)
 - B. Approval of June 9th Board Meeting Minutes (*Packet 1, Page 9*)
7. **Committee Action Items**
 - A. Administrative Affairs Committee – Ana Quiles
 1. Approval of Contracts
 - a. Maxim (PL1025-062) (*Packet 1, Page 21*)
 - b. Elwyn Quartz 2nd Amendment (HL0858-900, HL0859-901) (*Packet 1, Page 26*)
 - c. RSCR Laurel EBSH (HL0930-900, HL0955-901) (*Packet 1, Page 31*)
 - d. Master Board Resolution: Extension of COVID Subcodes (*Packet 1, Page 40*)
 - e. Master Board Resolution: Extension of COVID Contracts (*Packet 1, Page 43*)
 - B. Consumer Services Committee – Gabriela Herrera
 - a) AB 637 Proposal (*Packet 1, Page 46*)

- C. Executive Committee – Lety Garcia
 - a) Nomination of Cathy Blin
 - i. Vacated Board Seat

- D. Post Retirement Medical Trust Committee
 - a) Approval of FY2021-2022 Critical Calendar (*Packet 1, Page 59*)

- E. Strategic Planning Committee
 - a) Approval of New 3 Year Strategic Plan
 - b) Approval to Hire a Strategic Planning Consultant
 - i. Recommendation: Deirdre Maloney, Making Momentum

8. Additional Action Items

- A. Administrative Affairs Committee – Ana Quiles
 - 1. Approval of Contracts
 - a) Strategic Concepts ILS (HL0951-520) (*Packet 1, Page 60*)

9. National Core Indicators Child Family Survey FY18-19 Presentation

10. Association of Regional Center Agencies – Angelina Martinez

- A. Report on ARCA Meetings

11. Executive Director’s Report – Ruth Janka (*Packet 2, Page 7*)

12. Self-Determination Program (SDP) Report – Jesse Weller

13. Administrative Affairs Committee – Ana Quiles

- A. Minutes of the July 28th Meeting (*Packet 1, Page 64*)
- B. FY 2020-21 Financial Report (*Packet 1, Page 76*)
- C. FY 2020-21 Provider Relief Funds Financial Report (*Packet 1, Page 85*)
- D. Revised Contract Policy and Board Support Policy (*Packet 1, Page 86*)
- E. Human Resources Reports (*Packet 1, Page 93*)
 - 1. July 2021 Report
 - 2. 4th Quarter Report
- F. Request for Proposal for New CPA Firm (*Packet 1, Page 95*)

14. Consumer Advisory Committee – Caroline Mitchell

- A. Minutes of the June 2nd Meeting (*Packet 1, Page 98*)

- B. Minutes of the August 4th Meeting (*Packet 2, Page 65*)

- 15. Consumer Services Committee – Gabriela Herrera**
 - A. Minutes of the July 21st Meeting (*Packet 2, Page 67*)
 - B. 4th Quarter Exceptions/Exemptions Report (*Packet 1, Page 101*)
 - C. 4th Quarter Consumer Diagnostic Report (*Packet 1, Page 104*)
 - D. 4th Quarter Consumer Diagnostic Report by Age (*Packet 1, Page 109*)
 - E. 4th Quarter Appeals/Hearing Report (*Packet 1, Page 110*)
 - F. 4th Quarter NOA/Services Report (*Packet 1, Page 116*)

- 16. Executive Committee – Lety Garcia**
 - A. Minutes of the June 24th Special Meeting (*Packet 1, Page 125*)
 - B. Minutes of the July 28th Meeting (*Packet 2, Page 74*)
 - C. Whistleblower Policy and Acknowledgement (*Packet 2, Page 81*)

- 17. Government & Community Relations Committee – Jeremy Sunderland**
 - A. Minutes of the July 21st Meeting (*Packet 2, Page 88*)
 - B. Legucator Report - (*Addendum to Packet 2, Page 91a*)
 - C. Draft Legislative Platform Guiding Principles (*Packet 2, Page 92*)
 - D. Legislative Town Hall Update

- 18. Nominating Committee – Curtis Wang**

- 19. Post-Retirement Medical Trust Committee – Lety Garcia**
 - A. Minutes of the July 28th Meeting (*Packet 1, Page 128*)
 - B. Statement of Current PRMT Trust Value (*Packet 1, Page 132*)
 - C. Statement of Current CalPERS UAL Trust Value (*Packet 1, Page 139*)

- 20. Strategic Planning Committee – Marianne Davis**
 - A. Minutes of the August 2nd Meeting (*Packet 2, Page 93*)
 - B. 4th Quarter Report on CIE/PIP Activities (*Packet 2, Page 96*)
 - C. 4th Quarter Report on Program Closures (*Packet 2, Page 97*)
 - D. 4th Quarter Report on New Vendorizations (*Packet 2, Page 98*)
 - E. DEI Policy Steering Committee

- 21. Vendor Advisory Committee - Sharoll Jackson**
 - A. Minutes of the June 3rd Meeting (*Packet 2, Page 99*)
 - B. Minutes of the August 5th Meeting – *Defer*

22. Old Business/New Business

- A. Board and Committee Meeting Attendance Sheets
- B. Board and Committee Meetings Time Report
- C. Updated Acronyms Listing (*Packet 2, Page 110*)
- D. Meeting Evaluation (*Packet 2, Page 116*)

23. Announcements/Information/Public Input

- A. Next Town Hall: Thursday, August 19th at 1:30 p.m. via Zoom “Transition Age Services”
- B. Next Meeting: Thursday, September 9th at 6:30 p.m. at Chatsworth Office or Zoom

24. Executive Session

- A. Lease Update
- B. Personnel Update

25. Adjournment



North Los Angeles County Regional Center
Executive Director's Report
August 11, 2021

I. LEGISLATION

On August 16th the Legislature will reconvene, and September 3rd is the last day to amend bills on the floor. September 10th is the last day for each house to pass bills and an interim recess will begin at the end of this day's session. Our team is consulting with ARCA regarding the status of the high impact legislative bills.

II. STATE/LOCAL UPDATES

1. State FY 21-22 Budget

- Remote Electronic IFSP meetings and early intervention services
- Remote IPP meetings, if requested by consumer/parent
- Group Homes for Children Special Healthcare Needs
- Vendored Group Homes Placements for consumers in Fostercare and Probation
- Provisional Eligibility
- Enhanced Language Access and Cultural Competency Initiative
- Camping, Social Recreation, Education Services, and Alternative Nonmedical Therapies
- Caseload Ratio Public Meeting requirement
- Semi-Annual Reporting to DDS re: New CSC Hires (Oct 10 and Mar 10)
- Service Provider Rate Increases
- Out of State funding approval (extended timeframe)
- DDS Contractor to evaluate disparity efforts
- RC performance improvement indicators
- DSP Pay Differentials
- SDP – additional requirements
 - Establish an ombudsperson to monitor implementation of SDP, assist consumers to fully participate in SDP, and investigate complaints re the implementation of SDP
 - Additional review of independent budgets that meet a certain threshold to be set by DDS
 - Review of spending plans to verify generic agencies are being used to secure goods and services, when applicable
 - Training of fair hearing specialists in SDP principles and mechanics
 - Payment of FMS providers no less than twice per month
- CIE/PIP –
 - Internships cannot exceed 1,040 hours per year per individual
 - Payments include all employer related costs
 - Interns must be paid at or above min wage and equal to customary wage paid by employer for same or similar work performed by nondisabled EE
 - On or after July 1, 2021, \$750 payment to provider if individual is placed in PIP and remained in placement after 30 consecutive days.
 - Additional \$1,000 if individual remains in the paid internship for 60 consecutive days
 - Placements must be in competitive work environments and develop vocational skills that will facilitate paid work opportunities in the future.
 - Regional centers must increase aware of these internships to consumers outside of current employment programs through outreach once program is implemented as well as during IPP process.

- Annual DDS Reporting
- \$2,000 - 30 consecutive days of competitive employment
- Additional \$2,500 – 6 consecutive months of competitive employment
- Additional \$3,000 – 12 consecutive months of competitive integrated employment
- Annual DDS reporting
- Service providers who place individuals in PIP are not eligible for CIE incentive program payments until the individual is transitioned into a competitive integrated employment placement that is not funded as an internship.

2. Electronic Visit Verification

- Effective Jan 1, 2022 for RC Providers
- Includes Personal Care Services (incl. Respite, SLS, Homemaker and Personal Assistance) and
- Eff. January 1, 2023 - Home Health Care Services (incl. Home Health Aides, Speech Therapy, Occupational Therapy)
- Does not include Independent Living Skills
- Does include Personal CS and HHCS in Self Determination (service codes to be identified)
- Regional Centers expected to engage in outreach to providers re the requirement

III. COVID-19 RELATED UPDATES

1. Statistics

LA County Public Health COVID Update as of Monday, August 8, 2021

<http://publichealth.lacounty.gov>

- Current Hospitalizations: 1,437 with 22% in ICU as of July 28th. Positivity Rate: 6% (7-day average)
- As of July 28th, 62% of California and 61% of LA County residents are fully vaccinated; almost 70% of first doses administered in LA County and as of August 9th, 77% of eligible Californians have received their first dose. Statewide, hospitalizations are 5,973 with 1,325 in ICU. Majority of positivity, hospitalizations and deaths are among the unvaccinated population. Public Health has updated their guidance to require masks when indoors, regardless of vaccination status.

NLACRC COVID Update:

- NLACRC: 1,235 positive cases and 58 deaths.
- DDS Statewide Data as of July 29, 2021: 18,070 positive cases and 717 deaths.

2. Return to Workspace

- Due to the rise in COVID19 positivity, we have re-calibrated our staff schedules for onsite work. Effective August 9th, staff are working from their respective offices 1 day per week; onsite work increases to 2 days per week starting September 1, and 3 days per week effective October 1. In person intake and assessment is being conducted by appointment. The Center is adhering to our COVID Prevention Plan and will continue to monitor the public health orders and the metrics regarding positivity in implementing our return to workspace.

3. In Person Monitoring Visits and Meetings

- Case Management staff are conducting the required in-person visits for individuals living outside of the family home, including those living independently, in supported living settings and in licensed facilities such as skilled nursing (SNF) and intermediate care facilities (ICF). Community Services staff conducting in person monitoring reviews. All staff are assessing health status of the individual/s present at the location prior to conducting the meeting/review and following masking and social distancing protocols. Essential Protective Gear is provided.
- **California Department of Public Health** has issued a State Public Health Order requiring proof of full vaccination or verified documentation of a negative SARS-CoV-2 test (within 72 hours of the visit) for indoor visitation for general acute hospitals, SNFs and ICFs. CDPH has also issued a Public Health Order requiring full vaccination of all healthcare workers by September 30, 2021 working in health care facilities, which include hospitals, SNFs, ICFs, Adult Day Health Care Centers, and clinics.

4. DDS Guidance/Directives

- 07/29/2021 Directive (01-072921) Extension of Waivers, Modifications, and Directives due to COVID-19
Directive applies to multiple former directives that allow for remote, alternative service delivery, Executive Director authority to approve health and safety waiver exemptions, additional participant direct services (PA, ILS, SEP), extension of Early Start services, waiver of Half Day Billing Requirement, and waiver of SDP Budget Restrictions for Financial Management Services
 - “Early Start In-Person Meetings” waiver of in-person service coordination meeting requirements rescinded and Early Start Remote Services provision deleted due to provision in statute.
 - Lanterman In Person Meetings” waiver deleted due to provision in statute

- 07/22/2021 Guidance – Reimbursement for Transportation Services for Alternative Nonresidential Services

Notifies providers that effective August 1, transportation providers may submit billing for both alternative and traditional services and provides terms.

- 07/21/2021 Directive (01-072121) – Rescission of Directive Regarding Day Services for Consumers at High Risk for Serious Illness due to COVID-19

Directive establishes attendance at day services for people who have compromised immune systems should be determined by each individual and their planning team, taking into consideration overall health status and associated risks. Also reminds that day services must be provided in accordance with local county public health orders or recommendations issued by CDSS and/or CDPH.

- 06/29/2021 Directive:

Directive extends the provisions within several former directives into August. These directives waived requirements for in person meetings for both Early Start and Lanterman programs, and in person service delivery, allowed Executive Directors to authorize health and safety waiver exemptions, allowed virtual intake assessments and presumptive eligibility; provided additional

Participant Directed Services (Personal Assistance, Supported Employment Program, Independent Living Skills), extended Early Start services for consumers aging out and transitioning to special education preschool.

CENTER OPERATIONS (Non-COVID Related)

1. Technology Lending Library

Contractor identified to administer the project for the 7 Los Angeles County regional centers – EasterSeals of Southern California will manage the project for NLACRC’s catchment; other Centers may use a different contractor.

2. Community Engagement

The topic for this month’s Town Hall is “Transition Services” presented by NLACRC staff. The Town Hall is scheduled for Thursday, 8/19/2021 from 1:30 – 3:00 p.m. and will be recorded.

Cafecito Entre Nos and Alianza de Hombres continue to meet monthly. Additionally, the Family Focus Resource Center coordinates several support groups including Mamas Latinas Grupo de Apoyo, Parent Check-In and Chat, Santa Clarita Parent Chat, Filipino Support Group, Parents of Adult Consumer (PAC) Support Group, Cultivar y Crecer and Men's Round Table.

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 support groups.

3. Upcoming Educational Training Opportunities

“Different Learners, Different Thinkers” presented by the Learning Rights Law Center
“IEP 101 Workshop” and “Get Ready for Return to School!” (English and Spanish sessions) both presented by the Family Focus Resource Center

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 trainings and more.

4. Staff/ Staff Recruitment

As of 7/31/2021, NLACRC has hired 9 new staff, experienced 11 separations and has 69 vacant positions. 14 CSC positions and 8 non case management positions opened as of July 2021. Turn over rate is 17%. , We have completed the interviews for the position of Chief Financial Officer and moving through the process for securing that position. Two phone screens have been conducted for the Human Resources Director position with one candidate to complete the written assessment. Lastly, two Accounting Specialist positions are being filled.

5. Special Incident Reports

The Center received 102 special incident reports in June, 14 of which reflecting incidents that occurred in months prior to June. None of the incidents of death reported in June were COVID related. No significant increases or trends in data noted. The Center received 103 special incident reports in July, with 5 of those incidents occurring in months prior.

6. Quality Assurance

For the month of June, Community Services conducted 189 residential visits (Community Care Facilities, ICFs, and Family Home Agencies). Of the 189 monitoring visits, 156 were unannounced (155 in-person and 1 virtual). 14 Annual Reviews were conducted virtually, and 19 “Other” in-person visits were conducted including New Provider Orientation, 7 Day Visit, Special Incident Report Follow Up, and Corrective Action Plan Follow Up. There were no corrective action plans issued in the month of June. For the month of July, 102 residential monitoring visits were conducted, including 77 unannounced (in person); 8 Annual Review (virtual) and 17 “Other” in person (New Provider Orientation, 7 Day Visit, Special Incident Report/Complaint/Corrective Action Plan Follow Up). Two Corrective Action Plans were issued in July, related to compliance with the admission agreement, administration and staff qualifications and training, provision of services identified in an IPP, and special incident reporting.

7. Consumer Statistics

As of July 31, the Center served 29,311 consumers and applicants, including 4,322 in Early Start (169+), 791 in Intake (100+), and 23,939 (134+) in the Lanterman program. The Center’s San Fernando Valley Office serves a total of 18,517 individuals, Antelope Valley services 7,415 and the Santa Clarita Office serves 3,340.

Special Incident Reports in June 2021

Special Incidents	Children	Adults	Total
Other	1	76	77
Death	1	10	11
			88

Special Incident Reports From Prior Months & Reported in June 2021

Special Incidents	Children	Adults	Total
Other	0	11	11
Death	0	3	3
			14
TOTAL			102

Special Incident Types Report
April 2021 through June 2021 & June 2020

Reasonably Suspected Abuse	21-Jun	21-May	21-Apr	20-Jun
Physical Abuse/Exploitation	5	2	1	2
Sexual Abuse/Exploitation	0	1	0	1
Fiduciary Abuse/Exploitation	2	0	3	1
Emotional/Mental Abuse/Exploitation	2	1	2	1
Physical and/or Chemical Restraint	2	2	0	3
Total:	11	6	6	8
Neglect				
Failure to Provide Care to Elderly/Adult	1	3	1	1
Failure to Provide Medical Care	2	3	0	0
Failure to Prevent Malnutrition	0	0	0	0
Failure to Prevent Dehydration	0	0	0	0
Failure to Protect from H/S Hazards	6	3	5	0
Failure to Assist w/ Personal Hygiene	0	0	1	0
Failure to Provide Food/Cloth/Shelter	1	0	0	1
Total:	10	9	7	2
Serious Injuries/Accidents				
Lacerations	4	8	6	6
Puncture wounds	0	0	0	0
Fractures	6	7	5	8
Dislocations	1	0	0	1
Bites	1	0	0	0
Internal Bleeding	7	3	6	2
Medication Errors	11	12	12	11
Medication Reactions	0	1	1	0
Burns	0	0	0	0
Total:	30	31	30	28
Unplanned/Unscheduled Hospitalization				
Respiratory Illness	11	11	5	9
Seizure Related	5	0	1	1
Cardiac Related	5	4	0	6
Internal Infections	13	10	12	10
Diabetes	2	1	1	2
Wound/Skin Care	3	5	1	3
Nutritional Deficiencies	3	2	3	3
Involuntary Psych Admission	4	7	6	13
Total:	46	40	29	47
Victim of Crime				
Robbery	1	1	1	0
Aggravated Assault	6	7	10	3
Larceny	1	0	0	0
Burglary	0	0	0	0
Rape or Attempted Rape	3	1	1	0
Total:	11	9	12	3
Other				
Missing Person-Law Notified	1	5	3	4
Death	14	8	15	17
Total:	15	13	18	21
Total Incidents*	123	108	102	109

***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.**

Incidents of Death Children		Incidents from prior months and reported in June	
Age:			
Inc. Date:			

Incidents of Death Adults		Incidents from prior months and reported in June	
Age: 25 Inc. Date: 8/10/20	Consumer lived with family. Limited information input by CSC. Seizure and Pulmonary/Respiratory checked as type of death category. Per Sandis, he was in hospice care at the family home when he passed away.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	
Age: 33 Inc. Date: 5/27/21	Consumer lived with family. He developed a respiratory infection and required a ventilator. He was admitted to a sub-acute facility where he passed away.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	
Age: 57 Inc. Date: 5/28/21	Consumer received Independent Living services. He was in the hospital for treatment of liver and kidney cancer. He passed away due to organ failure and complications related to cancer.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	

Other Incidents Children		Incidents from prior months and reported in June	
Age:			

Inc. Date:			
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	Description	Action	Final Disposition
Other Incidents Adults		Incidents from prior months and reported in June	
Age: 23 Inc. Date: 5/31/21	Consumer receives Supported Living services. While away on a family vacation, she fell and hurt her shoulder. When she returned, staff took her to the ER. She was diagnosed with an arm fracture.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 31 Inc. Date: 5/7/21	Consumer receives Supported Living services. She was having stomach cramps and diarrhea. She was taken to the ER. Her vitamin D levels were found to be slightly elevated.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 37 Inc. Date: 5/30/21	Consumer receives Supported Living services. He became verbally and physically aggressive. Staff intervened with blocks and holds to calm him down.	CSC to follow up. NLACRC Community Services was notified of this incident.	
Age: 38 Inc. Date: 5/31/21	Consumer receives Supported Living services. She was bitten by a dog while away with family for a weekend. Her mother took her to urgent care for evaluation and treatment.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 42 Inc. Date: 3/30/21	Consumer receives Supported Living services. She fell to the floor as staff was assisting her from the shower to her wheelchair. She was taken to the ER. She had an x-ray, and was diagnosed with a bruised rib.	CSC to follow up. NLACRC Community Services was notified of this incident.	

	Description	Action	Final Disposition
Age: 53 Inc. Date: 5/5/21	Consumer resides in a Skilled Nursing facility. He was noted by doctor with wheezing and possible respiratory failure. He was taken to the ER, and admitted to the hospital for treatment of pneumonia and sepsis.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 54 Inc. Date: 1/13/21	Consumer resides in an ICF/DD-H. He was in his room shouting in the middle of the night. Staff noticed a gash in the back of his scalp. 911 was called. Paramedics took him to the ER. He received staples to close the wound.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 57 Inc. Date: 1/10/20	Consumer resides in an ICF-DD/N. He was experiencing blood in his urine. No abnormalities were found in a bladder biopsy. He was diagnosed with mild urothelial atypia with reactive urothelium.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 61 Inc. Date: 5/31/21	Consumer resides in an ICF-DD/N. His caregiver found him on the floor. He said that he got dizzy and hit his head on the floor. He had hip pain, and was taken to the hospital. He was diagnosed with a broken hip and scheduled for surgery.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 68 Inc. Date: 5/31/21	Consumer resides in an ICF/DD-H. He vomited and had high blood pressure with low oxygen saturation. Paramedics took him to the hospital. He was admitted for evaluation and treatment.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 71 Inc. Date: 5/26/21	Consumer receives Independent Living services. Her bank account was overdrawn by a previous worker. The bank informed her about multiple electronic transactions so she closed her account.	CSC to follow up. Law Enforcement and NLACRC Community Services were notified of this incident.	

	Description	Action	Final Disposition
Incidents of Death Children			
Age: 11 months Inc. Date: 6/11/21	Consumer lived with family. He had Charge Syndrome with cleft lip and palate. He had G-Tube and Trach, and underwent open-heart surgery. He coded, and was placed on life support. He passed away.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. Coroner and NLACRC Community Services were notified of this incident.	

	Description	Action	Final Disposition
Incidents of Death Adults			
Age: 31 Inc. Date: 6/21/21	Consumer lived with family. She was in the hospital for complications from congenital heart disease. She was unable to handle a transplant. The decision was made to take her off the oxygenation machine. She passed away.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	
Age: 36 Inc. Date: 6/16/21	Consumer lived in a skilled nursing facility. He was transferred to the hospital ICU. His mother reported that he passed away.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	

	Description	Action	Final Disposition
Age: 47 Inc. Date: 6/25/21	Consumer lived in a CCF. She was in the hospital due to weakness. A biopsy showed that cancer had spread to her liver. She passed away due to complications of stomach cancer with metastasis.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. Community Care Licensing and NLACRC Community Services were notified of this incident.	
Age: 56 Inc. Date: 6/24/21	Consumer lived in an ICF-DD/N. She had been in the hospital for treatment of sepsis and a urinary tract infection. She was scheduled to be discharged when she passed away, cause unknown.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. Department of Public Health and NLACRC Community Services were notified of this incident.	
Age: 61 Inc. Date: 6/24/21	Consumer lived in an ICF-DD/N. She had tested positive for COVID-19 virus in December, and was having low oxygen saturation. She passed away due to natural causes.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	
Age: 62 Inc. Date: 6/8/21	Consumer lived in a Skilled Nursing facility. His brother reported that his heart was beating too fast and gave out. He passed away.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. Coroner, Long Term Care Ombudsman and NLACRC Community Services were notified of this incident.	
Age: 62 Inc. Date: 6/18/21	Consumer lived in a CCF. He had recurrent aspiration pneumonia and had failed intubation three times with poor prognosis. He was placed in comfort care, and passed away in the hospital.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	
Age: 65 Inc. Date: 6/6/21	Consumer lived in a CCF. She was in hospice care due to stage four colon cancer. She began to have continuous	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality	

	Description	Action	Final Disposition
	oxygen desaturation. Hospice nurse noted several end-of-life symptoms. She passed away.	Review Committee for record review. Community Care Licensing and NLACRC Community Services were notified of this incident.	
Age: 65 Inc. Date: 6/9/21	Consumer lived with family. He was transferred from a skilled nursing facility to the hospital for elevated blood pressure. His sister reported that he passed away while in the hospital.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	
Age: 66 Inc. Date: 6/27/21	Consumer lived in an ICF/DD-H. He had recently been in the hospital for treatment of cellulitis, and was back in the hospital for treatment of hypernatremia. He was placed on comfort care, and passed away due to septic shock.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. Department of Public Health and NLACRC Community Services were notified of this incident.	

	Description	Action	Final Disposition
Other Incidents Children			
Age: 16 Inc. Date: 6/16/21	Consumer lives with family. He became physically aggressive, and then locked himself in the bathroom. 911 was called. He was taken to the ER, and admitted to the hospital for a psychiatric hold.	CSC to follow up. Law Enforcement, NLACRC Community Services and Psychiatry Consultant were notified of this incident.	

	Description	Action	Final Disposition
Other Incidents Adults			
Age: 21 Inc. Date: 6/25/21	She was having upper respiratory secretions and congestion. Staff took her to the ER. She was admitted to the hospital for treatment of pneumonia.	CSC to follow up. Community Care Licensing, Department of Public Health, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 22 Inc. Date: 6/17/21	Consumer resides in a CCF. She reported that a man had pushed her into his car and raped her.	CSC to follow up. Law Enforcement and NLACRC Community Services were notified of this incident.	
Age: 23 Inc. Date: 6/7/21	Consumer lives with family. She had two seizure episodes. She was taken to the ER, and admitted to the hospital for evaluation and treatment.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 23 Inc. Date: 6/15/21	Consumer lives with family. Her boyfriend was refusing to allow staff to enter the bedroom, as they were arguing inside. She let staff in. Staff told the boyfriend that police would be called if he refused to leave so he left.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 25 Inc. Date: 6/15/21	Consumer lives with family. He reported that he was in a physical altercation with his neighbor because he felt like the neighbor was threatening his aunt.	CSC to follow up. Law Enforcement and NLACRC Community Services were notified of this incident.	
Age: 25 Inc. Date: 6/21/21	Consumer resides in a CCF. He received a smaller dose of insulin because there was no more available. The medication had been ordered but not delivered.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 26 Inc. Date: 6/6/21	Consumer resides in a CCF. Staff went to pick him up at a designated time and location after he stayed at a friend's house overnight. He was not there and did not answer his phone. Police were contacted.	CSC to follow up. Community Care Licensing, Law Enforcement and NLACRC Community Services were notified of this incident.	
Age: 26	Consumer lives with family. His mother	CSC to follow up. Law Enforcement,	

	Description	Action	Final Disposition
Inc. Date: 6/21/21	reported that he became verbally aggressive and destructive of property. 911 was called. He was taken to the hospital, and admitted for a psychiatric hold.	NLACRC Community Services and Psychiatry Consultant were notified of this incident.	
Age: 27 Inc. Date: 6/9/21	Consumer resides in a CCF. His blood sugar level was high. Staff called 911. Paramedics took him to the hospital. He was admitted for evaluation and treatment.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 27 Inc. Date: 6/19/21	Consumer resides in a State hospital. He told his doctor that he was having chest pain. He had an abnormal EKG reading. He was taken to the ER for lab work. He had inflammation of the heart, and was admitted to the hospital for treatment.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 27 Inc. Date: 6/24/21	Consumer resides in a State hospital. When his evening medication was being given, staff noticed that his afternoon medication had not been given.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 28 Inc. Date: 6/19/21	Consumer receives Supported Living services. She had a seizure, and was taken to the hospital. She was admitted to the ICU for evaluation and treatment.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 28 Inc. Date: 6/25/21	Consumer receives Independent Living services. At a wound care appointment, the doctor reported that he had fresh cuts on his arm and forehead. Self-injury was suspected.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 30 Inc. Date: 6/5/21	Consumer resides in a CCF. She was on a community outing when she showed signs of having a seizure. Staff called 911. She was taken to the hospital and admitted for evaluation and treatment.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 30 Inc. Date: 6/7/21	Consumer resides in a CCF. The transportation company dropped him off at the wrong facility, which was	CSC to follow up. NLACRC Community Services was notified of this incident.	

	Description	Action	Final Disposition
	being renovated. He was unable to use the restroom there and had an incontinence incident.		
Age: 30 Inc. Date: 6/22/21	Consumer lives with family. He injured his foot at the gym and re-injured it at work. He went to the ER and had x-rays done. He was diagnosed with a fracture in the foot, and received a brace and crutches.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 30 Inc. Date: 6/24/21	Consumer resides in a CCF. A staff member reported that he saw the facility manager sprinkle water on him to wake him up.	CSC to follow up. Community Care Licensing and NLACRC Community Services were notified of this incident.	
Age: 30 Inc. Date: 6/29/21	Consumer resides in a CCF. He became verbally and physically aggressive with another resident. Staff performed a physical restraint to prevent property destruction and keep him from eloping. He got lacerations on his lip and hand.	CSC to follow up. Community Care Licensing, Adult Protective Services, Long Term Care Ombudsman, and NLACRC Community Services were notified of this incident.	
Age: 31 Inc. Date: 6/1/21	Consumer receives Independent Living services. He was stabbed in the arm and leg by a former boyfriend. Police were contacted, but he did not want to seek medical attention.	CSC to follow up. Law Enforcement and NLACRC Community Services were notified of this incident.	
Age: 31 Inc. Date: 6/13/21	Consumer receives Supported Living services. During a scheduled court appearance, she reported that she had been sexually assaulted the previous day. Police were contacted, and she was taken to the hospital for an exam.	CSC to follow up. Law Enforcement and NLACRC Community Services were notified of this incident.	
Age: 31 Inc. Date: 6/24/21	Consumer receives Supported Living services. She was not home at her scheduled medication time so she missed her morning medications.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 34 Inc. Date: 6/28/21	Consumer resides in an ICF-DD/N. He was having stomach pain and did not want to eat, but had vomited.	CSC to follow up. Department of Public Health, NLACRC Community Services and Nurse Consultant were	

	Description	Action	Final Disposition
	Paramedics took him to the ER. He was admitted to the hospital for treatment of a possible urinary tract infection.	notified of this incident.	
Age: 36 Inc. Date: 6/19/21	Consumer receives Supported Living services. His leg was swollen and had not been improving. His doctor recommended him for an ultrasound. He was taken to the hospital, and admitted into the ICU due to retaining liquid in his legs and around his heart.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 37 Inc. Date: 6/12/21	Consumer resides in an ICF/DD-H. Staff reported that one of his morning medications was mistakenly not given, as the pill was found still in the bubble pack.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 37 Inc. Date: 6/18/21	Consumer resides in an ICF/DD-H. A staff member reported that another staff member yells at him and sends him to his room.	CSC to follow up. Department of Health Services, Long Term Care Ombudsman and NLACRC Community Services were notified of this incident.	
Age: 38 Inc. Date: 6/1/21	Consumer receives Independent Living services. She felt dizzy and light-headed. Her doctor reported that she had low blood count levels, and advised to go to the ER. She was admitted to the hospital for treatment of anemia.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 39 Inc. Date: 6/7/21	Consumer receives Supported Living services. While shopping at a store, he had a seizure and fell forward onto his chest. He sustained some bruising. His mother took him to urgent care. He was diagnosed with a fractured rib.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 39 Inc. Date: 6/17/21	Consumer receives Independent Living services. His neighbor broke down his door and a verbal altercation took place. 911 was called and the neighbor was arrested.	CSC to follow up. Community Care Licensing, Adult Protective Services, Law Enforcement and NLACRC Community Services were notified of this incident.	

	Description	Action	Final Disposition
Age: 42 Inc. Date: 6/19/21	Consumer lives with family. He was walking with an acquaintance when they got into an argument. The acquaintance pushed him to the ground and stabbed him several times, and then ran off. 911 was called. He was taken to the ER, and received stitches to close the wounds.	CSC to follow up. Law Enforcement and NLACRC Community Services were notified of this incident.	
Age: 43 Inc. Date: 6/4/21	Consumer resides in a CCF. He was taken to the ER due to a wound on lower extremity not healing. He was admitted to the hospital for evaluation and treatment.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 44 Inc. Date: 6/18/21	Consumer resides in a CCF. She had several seizures. 911 was called. Ambulance took her to the hospital. She tested positive for a urinary tract infection, and was admitted for treatment.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 47 Inc. Date: 6/7/21	Consumer resides in a CCF. She has been eating and drinking minimal amounts for the last couple of weeks due to decreased appetite. She appeared weak, and was taken to the hospital. She was admitted for evaluation and treatment.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 50 Inc. Date: 6/9/21	Consumer resides in a CCF. He told his mother that a staff member threw him to the floor.	CSC to follow up. Community Care Licensing, Adult Protective Services, Long Term Care Ombudsman, and NLACRC Community Services were notified of this incident.	
Age: 50 Inc. Date: 6/9/21	Consumer receives Supported Living services. He was coughing a lot, and had excessive secretions. Nurse called 911. He was taken to the hospital, and admitted for treatment of aspiration pneumonia.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	

	Description	Action	Final Disposition
Age: 50 Inc. Date: 6/13/21	Consumer receives Supported Living services. He had coffee ground emesis, which is considered to be an emergency. 911 was called. He was taken to the hospital, and admitted for evaluation and treatment.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 50 Inc. Date: 6/17/21	Consumer receives Supported Living services. He was having episodes of decreased oxygen saturation with excessive secretions. He was taken to the hospital, and admitted for evaluation and treatment.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 50 Inc. Date: 6/17/21	Consumer resides in an ICF-DD/N. He was agitated and had an elevated heart rate. Staff called 911. Paramedics took him to the hospital. He was admitted for treatment of sepsis.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 50 Inc. Date: 6/18/21	Consumer receives Supported Living services. He reported that a staff member punched him in the face, knocking a crown off of his tooth.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 50 Inc. Date: 6/22/21	Consumer receives Supported Living services. Staff reported that an evening medication was found still in the bubble pack.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 51 Inc. Date: 6/28/21	Consumer receives Independent Living services. She was seen by dialysis facility for scheduled care, and transferred to the hospital to reduce fluid overload.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 52 Inc. Date: 6/6/21	Consumer receives Supported Living services. He reported that a staff member hit him on his back twice with a broom handle. He had visible bruises. Staff took him to the ER for evaluation.	CSC to follow up. Adult Protective Services, Law Enforcement, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 52 Inc. Date: 6/10/21	Consumer resides in an ICF/DD-H. Her nighttime medications were discovered in the morning as not given, because	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were	

	Description	Action	Final Disposition
	they were still in the medication cart.	notified of this incident.	
Age: 53 Inc. Date: 6/6/21	Consumer receives Supported Living services. He had fallen getting out of bed, and sustained a laceration. He was taken to the hospital. Tests showed that he had sepsis and pneumonia. He was admitted for treatment.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 53 Inc. Date: 6/8/21	Consumer lives with family. Her room was unclean, and she was unkempt. She had a groin rash. 911 was called. Paramedics requested that she be tested for sexual assault because a neighbor had reported a concern.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 54 Inc. Date: 6/17/21	Consumer resides in a CCF. While on a family visit, his parents took him to the ER due to rectal bleeding and vomiting. He was admitted to the hospital for evaluation and treatment.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 54 Inc. Date: 6/24/21	Consumer receives Supported Living services. Staff noticed that her cash balance was off by one hundred dollars.	CSC to follow up. NLACRC Community Services was notified of this incident.	
Age: 55 Inc. Date: 6/2/21	Consumer receives Supported Living services. His arm was swollen and yellow in color. He was taken to the ER, and admitted to the hospital for treatment of cellulitis.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 55 Inc. Date: 6/7/21	Consumer resides in a CCF. She was observed to be tired and lethargic. She was taken to the ER. She was admitted to the hospital for treatment of pneumonia.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 57 Inc. Date: 6/29/21	Consumer resides in an ICF-DD/N. She was pale and shivering, had vomited, and had diarrhea as well as dark urine. Her temperature was high. She was taken to the ER, and admitted to the hospital for treatment of sepsis.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	

	Description	Action	Final Disposition
Age: 58 Inc. Date: 6/4/21	Consumer resides in a CCF. He fell while using the bathroom. He complained of pain in his hand and lower back. He was taken to the ER, and admitted for treatment of an infection.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 58 Inc. Date: 6/10/21	Consumer resides in a CCF. She reported having suicidal ideations, as well as a racing heart, shaky hands, and a tightness in her chest. She asked staff to take her to the hospital. Staff was heard telling her to stop asking and go away.	CSC to follow up. Adult Protective Services, Law Enforcement and NLACRC Community Services were notified of this incident.	
Age: 58 Inc. Date: 6/12/21	Consumer resides in a CCF. He was having body chills and difficulty breathing. His oxygen level was low. Staff called 911. He was taken to the hospital, and admitted for treatment of respiratory distress with hypoxemia, sepsis, and congestive heart failure.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 59 Inc. Date: 6/23/21	Consumer receives Independent Living services. She reported that she was mugged outside her apartment complex and her personal belongings were taken.	CSC to follow up. Community Care Licensing and NLACRC Community Services were notified of this incident.	
Age: 59 Inc. Date: 6/28/21	Consumer resides in an ICF/DD-H. When staff went to his room, he was not there. He was found outside, walking down the street.	CSC to follow up. NLACRC Community Services was notified of this incident.	
Age: 60 Inc. Date: 6/24/21	Consumer resides in an ICF/DD-H. He became verbally and physically aggressive. 911 was called. Paramedics took him to the hospital. He was admitted for a psychiatric hold.	CSC to follow up. Department of Health Services, NLACRC Community Services and Psychiatry Consultant were notified of this incident.	
Age: 61 Inc. Date: 6/5/21	Consumer resides in an ICF/DD-H. She had low oxygen saturation, and a low grade temperature. 911 was called. She was taken to the hospital, and admitted for treatment of pneumonia.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	

	Description	Action	Final Disposition
Age: 62 Inc. Date: 6/6/21	Consumer resides in an ICF-DD/N. While staff members were transferring him from the shower to bed, the lift tilted and his leg became pinned under him. 911 was called. He was taken to the hospital, and admitted for treatment of a leg fracture.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 64 Inc. Date: 6/3/21	Consumer resides in a CCF (RCFE). Caregiver noticed blood on her rectum when she was being changed. 911 was called. She was taken to the hospital, and admitted for evaluation and treatment.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 64 Inc. Date: 6/19/21	Consumer receives Independent Living services. Staff found two evening medications on the table and notified case manager that they may have been missed on the previous day.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 65 Inc. Date: 6/6/21	Consumer receives Supported Living services. She was taken to the ER due to complaints of shortness of breath. While there, she had a behavioral episode, and was admitted to the hospital for a psychiatric hold.	CSC to follow up. NLACRC Community Services and Psychiatry Consultant were notified of this incident.	
Age: 65 Inc. Date: 6/24/21	Consumer receives Supported Living services. She complained of chest pressure. Staff called 911. She was taken to the hospital, and admitted for treatment of a urinary tract infection and dehydration.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 65 Inc. Date: 6/25/21	Consumer receives Supported Living services. She reported that the agency has been neglecting her, and that she did not eat due to neglect. Staff reported that she had refused to eat.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 67	Consumer resides in an ICF-DD/N. Her shirt got stuck in her wheelchair control,	CSC to follow up. Department of Public Health, NLACRC Community	

	Description	Action	Final Disposition
Inc. Date: 6/21/21	and she fell to the floor. 911 was called. She was taken to the hospital, diagnosed with a dislocated shoulder, and given an arm sling.	Services and Nurse Consultant were notified of this incident.	
Age: 68 Inc. Date: 6/11/21	Consumer receives Independent Living services. Her sister-in-law reported that she had taken an extra dose of a medication and skipped a dose of another medication. Her personal assistant was reported to be present.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 68 Inc. Date: 6/14/21	Consumer resides in an ICF-DD/N. He had not urinated in over sixteen hours. He was taken to the ER, and admitted to the hospital for treatment of a bladder infection.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 69 Inc. Date: 6/14/21	Consumer resides in an ICF/DD-H. She was coughing and appeared to be choking on some food. She continued to cough and began to pass loose stools. Her color came back soon after and she was able to say that she was ok.	CSC to follow up. Department of Health Services and NLACRC Community Services were notified of this incident.	
Age: 69 Inc. Date: 6/15/21	Consumer resides in an ICF/DD-H. He had a cough, elevated temperature, high pulse rate and high blood pressure. He was taken to the ER, and admitted to the hospital for treatment of a urinary tract infection and possible pneumonia.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 72 Inc. Date: 6/28/21	Consumer receives Independent Living services. There were no more refills of her medication so the doctor's office had to be contacted to renew the prescription with the pharmacy. This caused her to miss a morning dose of the medication.	CSC to follow up. NLACRC Community Services was notified of this incident.	
Age: 73 Inc. Date: 6/15/21	Consumer resides in a CCF. She fell and called for help from her room. Her ankle was turned at an odd angle. 911 was	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were	

	Description	Action	Final Disposition
	called. She was taken to the hospital, diagnosed with a compound fracture, and was scheduled for surgery.	notified of this incident.	
Age: 75 Inc. Date: 6/28/21	Consumer receives Supported Living services. Her doctor reduced the dose of a medication, but she took the former higher dose for a week because she did not have a pill cutter.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 76 Inc. Date: 6/7/21	Consumer resides in a CCF. She fell while using her walker, and hit her face on the floor. Staff noticed a laceration above her eyebrow. She was taken to the ER, where she received stitches to close the wound.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 77 Inc. Date: 6/18/21	Consumer resides in a CCF. During a weekly telephone check-in, staff reported that he was admitted to the hospital due to COVID-19 related symptoms.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 81 Inc. Date: 6/24/21	Consumer resides in a CCF. She fell in the bathroom while using the toilet. She was taken to the hospital, and received stitches in her head.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 82 Inc. Date: 6/17/21	Consumer resides in an ICF/DD-H. She had an elevated blood pressure reading followed by a seizure. She was taken to the ER, and admitted to the hospital for evaluation and treatment.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 82 Inc. Date: 6/21/21	Consumer resides in an ICF/DD-H. She was unresponsive and had labored breathing. Her oxygen saturation was low. 911 was called. Ambulance took her to the hospital. She was admitted for treatment of pleural effusion.	CSC to follow up. Department of Health Services, Department of Public Health, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 83 Inc. Date: 6/7/21	Consumer receives Supported Living services. He had low oxygen levels and high blood pressure. He was transferred	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this	

	Description	Action	Final Disposition
	from a skilled nursing facility to the hospital. He was admitted to the ICU, and was placed on a ventilator.	incident.	

Special Incident Reports in July 2021

Special Incidents	Children	Adults	Total
Other	9	78	87
Death	0	11	11
			98

Special Incident Reports From Prior Months & Reported in July 2021

Special Incidents	Children	Adults	Total
Other	0	2	2
Death	0	3	3
			5
TOTAL			103

Special Incident Types Report
May 2021 through July 2021 & July 2020

Reasonably Suspected Abuse	21-Jul	21-Jun	21-May	20-Jul
Physical Abuse/Exploitation	3	5	2	2
Sexual Abuse/Exploitation	2	0	1	1
Fiduciary Abuse/Exploitation	0	2	0	1
Emotional/Mental Abuse/Exploitation	6	2	1	2
Physical and/or Chemical Restraint	5	2	2	0
Total:	16	11	6	6
Neglect				
Failure to Provide Care to Elderly/Adult	4	1	3	2
Failure to Provide Medical Care	0	2	3	0
Failure to Prevent Malnutrition	0	0	0	0
Failure to Prevent Dehydration	0	0	0	0
Failure to Protect from H/S Hazards	5	6	3	2
Failure to Assist w/ Personal Hygiene	0	0	0	1
Failure to Provide Food/Cloth/Shelter	0	1	0	0
Total:	9	10	9	5
Serious Injuries/Accidents				
Lacerations	9	4	8	7
Puncture wounds	0	0	0	0
Fractures	4	6	7	7
Dislocations	0	1	0	0
Bites	0	1	0	0
Internal Bleeding	4	7	3	1
Medication Errors	15	11	12	10
Medication Reactions	1	0	1	1
Burns	0	0	0	1
Total:	33	30	31	27
Unplanned/Unscheduled Hospitalization				
Respiratory Illness	9	11	11	6
Seizure Related	4	5	0	1
Cardiac Related	0	5	4	0
Internal Infections	13	13	10	11
Diabetes	1	2	1	1
Wound/Skin Care	3	3	5	2
Nutritional Deficiencies	3	3	2	1
Involuntary Psych Admission	7	4	7	17
Total:	40	46	40	39
Victim of Crime				
Robbery	0	1	1	0
Aggravated Assault	5	6	7	1
Larceny	0	1	0	3
Burglary	0	0	0	0
Rape or Attempted Rape	1	3	1	0
Total:	6	11	9	4
Other				
Missing Person-Law Notified	6	1	5	5
Death	14	14	8	12
Total:	20	15	13	17
Total Incidents*	124	123	108	98

***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.**

Incidents of Death Children		Incidents from prior months and reported in July	
Age:			
Inc. Date:			

Incidents of Death Adults		Incidents from prior months and reported in July	
Age: 44 Inc. Date: 6/24/21	Consumer lived in a Skilled Nursing facility. He was placed on hospice care due to issues with malnutrition. He was admitted to the hospital for coughing blood. He passed away due to complications from pneumonia, and a blood infection.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	
Age: 50 Inc. Date: 11/5/20	Consumer lived with family. She suffered an appendix collapse which caused a general failure in her immune system. The hospital did not want to perform surgery. Per her sister, she presented with acute pain and collapsed. She passed away.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	
Age: 72 Inc. Date: 12/7/20	Consumer lived with family. She was not receiving regional center services. Her niece reported that she had a G-tube, and had been battling pneumonia for a few years. She passed away.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	

Other Incidents Children		Incidents from prior months and reported in July	
Age:			

Inc. Date:			
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	Description	Action	Final Disposition
Other Incidents Adults		Incidents from prior months and reported in July	
Age: 29 Inc. Date: 4/19/21	Consumer lives with family. She reported to her educator that she had been hit by her adoptive mother before, and that she is afraid of her.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 29 Inc. Date: 6/26/21	Consumer lives with family. He engaged in property destruction and self-injurious behavior. He also attempted to bite parent and hit staff. Staff intervened with response block and CPI. Parent administered an additional half dose of medication.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	

	Description	Action	Final Disposition
Incidents of Death Children			
Age: Inc. Date:			

	Description	Action	Final Disposition
Incidents of Death Adults			
Age: 20 Inc. Date: 7/24/21	Consumer lived with family. CSS was notified that she passed away in the hospital. No further information was given.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	
Age: 26 Inc. Date: 7/27/21	Consumer lived in a CCF. The officer assigned to his missing person's case reported that he was found in a park, deceased. The cause of death was drug overdose.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. Community Care Licensing, Law Enforcement, and NLACRC Community Services were notified of this incident.	
Age: 37 Inc. Date: 7/10/21	Consumer lived with family. His AV fistula for dialysis erupted and began to bleed. Mother called 911. Paramedics took him to the hospital. Mother reported that he lost a significant amount of blood on the way to the hospital. At the hospital he went into cardiac arrest, and passed away.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	
Age: 48 Inc. Date: 7/15/21	Consumer received Supported Living services. She was in the hospital ICU for treatment of pneumonia. She had been placed on a ventilator and was taken off	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record	

	Description	Action	Final Disposition
	of it as she improved. Later, her body began to shut down. She passed away.	review. NLACRC Community Services was notified of this incident.	
Age: 55 Inc. Date: 7/9/21	Consumer lived in a CCF. She was in her bed sleeping when night shift arrived. She felt cold but her oxygen saturation was normal so staff placed a blanket on her. A short time later, her pulse was faint, so staff called 911. Staff performed CPR until Paramedics arrived. Paramedics pronounced her deceased.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. Community Care Licensing, Department of Health Services, Law Enforcement, Coroner, and NLACRC Community Services were notified of this incident.	
Age: 57 Inc. Date: 7/23/21	Consumer lived in an ICF-DD/N. She was transferred to the hospital due to low blood pressure and low oxygen. She passed away.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	
Age: 60 Inc. Date: 7/15/21	Consumer lived in an ICF/DD-H. For over a month, he had been refusing food and fluids. He was placed in hospice care and continued to refuse food and fluids. He passed away due to cardiopulmonary arrest secondary to end stage dementia.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. Department of Health Services and NLACRC Community Services were notified of this incident.	
Age: 60 Inc. Date: 7/24/21	Consumer lived in a CCF. He was transferred from a rehab center to the hospital ICU for treatment of septic shock. He had multiple organ failures and was placed on a ventilator. He passed away.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	
Age: 61 Inc. Date: 7/3/21	Consumer lived with family. His father reported that he passed away. No further information was given.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. Community Care Licensing,	

	Description	Action	Final Disposition
		and NLACRC Community Services were notified of this incident.	
Age: 64 Inc. Date: 7/22/21	Consumer received Independent Living services. She had been diagnosed with advanced metastatic cancer and renal failure. She was placed in hospice care and passed away.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. NLACRC Community Services was notified of this incident.	
Age: 65 Inc. Date: 7/23/21	Consumer received Independent Living services. He took a nap on the couch, but staff was unable to wake him. 911 was called. Staff started CPR until paramedics arrived. They were unable to revive him. He passed away.	CSC to follow up and request a copy of the death certificate. This case will be forwarded to the Mortality Review Committee for record review. Law Enforcement and NLACRC Community Services were notified of this incident.	

	Description	Action	Final Disposition
Other Incidents Children			
Age: 13 Inc. Date: 7/3/21	Consumer lives with family. She became physically aggressive with her mother. 911 was called. She was taken to the hospital, and admitted for a psychiatric hold.	CSC to follow up. Law Enforcement, NLACRC Community Services and Psychiatry Consultant were notified of this incident.	
Age: 14 Inc. Date: 7/3/21	Consumer resides in a CCF. He became destructive of property, and physically aggressive with staff. Police were called.	CSC to follow up. Community Care Licensing, Law Enforcement, NLACRC Community Services and	

	Description	Action	Final Disposition
	He told them that he wanted to hurt himself. He was taken to the hospital, and admitted for a psychiatric hold.	Psychiatry Consultant were notified of this incident.	
Age: 14 Inc. Date: 7/8/21	Consumer resides in a CCF. He started banging on the walls and yelling, and told staff he wanted to kill himself. Police were called. He was taken to the hospital, and admitted for a psychiatric hold.	CSC to follow up. Community Care Licensing, Law Enforcement, NLACRC Community Services and Psychiatry Consultant were notified of this incident.	
Age: 14 Inc. Date: 7/23/21	Consumer resides in a CCF. He was at a doctor appointment. Nurse noticed signs of self-harm on his arms. He expressed that he hears voices telling him to hurt himself. He began to act out in front of the nurse. He was sent to the hospital, and admitted for a psychiatric hold.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Psychiatry Consultant were notified of this incident.	
Age: 16 Inc. Date: 7/21/21	Consumer resides in a CCF. He ran out the front door in the middle of the night and got into a car that was waiting for him. Staff contacted police. He returned later in the evening in a stupor from drugs and alcohol.	CSC to follow up. Community Care Licensing, Law Enforcement, and NLACRC Community Services were notified of this incident.	
Age: 16 Inc. Date: 7/25/21	Consumer resides in a CCF. In the evening, he ran out the front door with staff trying to stop him from leaving. He got into a waiting car. Staff contacted police. He came back in the middle of the night under the influence of drugs and alcohol.	CSC to follow up. Community Care Licensing, Law Enforcement, and NLACRC Community Services were notified of this incident.	
Age: 16 Inc. Date: 7/28/21	Consumer resides in a CCF. In the evening, he was being defiant and verbally aggressive toward staff. He ran out the door and got into a car that was waiting for him. Staff contacted police. He came back in the middle of the night.	CSC to follow up. Community Care Licensing, Law Enforcement, and NLACRC Community Services were notified of this incident.	
Age: 16 Inc. Date: 7/29/21	Consumer resides in a CCF. At night, he was in the living room when he suddenly darted toward the front door. Staff tried to stop him but he forced his way out and	CSC to follow up. Community Care Licensing, Law Enforcement, and NLACRC Community Services were notified of this incident.	

	Description	Action	Final Disposition
	got into a car that was waiting for him down the street. Staff contacted police.		
Age: 17 Inc. Date: 7/16/21	Consumer resides in a Foster Home. She became verbally and physically aggressive, as well as self-injurious. Police and ambulance came, and she was taken to the hospital for a psychiatric hold.	CSC to follow up. Child Protective Services, Law Enforcement, NLACRC Community Services and Psychiatry Consultant were notified of this incident.	

	Description	Action	Final Disposition
Other Incidents			
Adults			
Age: 19 Inc. Date: 7/1/21	Consumer lives with family. A staff member became verbally and physically aggressive with him. His mother was on the phone at the time and heard the interaction.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 19 Inc. Date: 7/12/21	Consumer resides in a CCF. Staff noticed that her noon medication had not been placed in her backpack. School nurse stated that the medication was given in the morning.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 21 Inc. Date: 7/28/21	Consumer lives with family. She experienced a grand mal seizure, followed by clusters of seizures. 911 was called. Paramedics took her to the hospital. She was admitted for evaluation and treatment.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 25 Inc. Date: 7/7/21	Consumer lives with family. She became physically aggressive toward staff. Staff utilized blocks and holds to calm her behavioral episodes.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	

	Description	Action	Final Disposition
Age: 25 Inc. Date: 7/8/21	Consumer lives with family. She engaged in self-injurious behavior, and physical aggression toward staff. Staff utilized CPI holds to calm her behavioral episodes.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 25 Inc. Date: 7/9/21	Consumer resides in an ICF/DD-H. He was using his tablet when he thrust his head forward and hit the edge of the tablet. His forehead was bleeding. He was taken to the ER, and received stitches to close the wound.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 25 Inc. Date: 7/10/21	Consumer resides in a CCF. He got into a verbal altercation with another resident. The resident hit him in the back of the head with a picture frame. Police were called. The resident was arrested.	CSC to follow up. Law Enforcement and NLACRC Community Services were notified of this incident.	
Age: 25 Inc. Date: 7/13/21	Consumer lives with family. He went outside unattended while staff was watching tv. When he returned, he was bleeding and had lacerations on his hand. He was taken to the hospital and received stitches to close the wound.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 25 Inc. Date: 7/21/21	Consumer resides in a Community Treatment facility. She became verbally and physically aggressive. She broke a soap dispenser and attempted to drink the soap. Staff implemented escorts and restraints for safety.	CSC to follow up. NLACRC Community Services was notified of this incident.	
Age: 27 Inc. Date: 7/9/21	Consumer resides in a CCF. Evening medications were given early, outside of the two hour window, causing confusion for evening staff as to whether to dispense or not.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 27 Inc. Date: 7/22/21	Consumer resides in an ICF-DD/N. She had labored breathing, with crackling sounds in her lungs. Her oxygen level was fluctuating. 911 was called. Paramedics took her to the ER. She was	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	

	Description	Action	Final Disposition
	admitted to the hospital for evaluation and treatment.		
Age: 28 Inc. Date: 7/4/21	Consumer receives Supported Living services. She had a long, unusual seizure. Staff called 911. She was taken to the hospital, and admitted for evaluation and treatment.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 30 Inc. Date: 7/15/21	Consumer resides in a Sub-Acute facility. She was receiving antibiotics to treat cellulitis but not responding to treatment. She was transferred to the hospital, and admitted for further treatment.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 30 Inc. Date: 7/19/21	Consumer resides in a Community Treatment facility. He reported that the car he was riding in had been shot at on the freeway. This caused the car to go off the road, but he and the driver were not injured. Police were contacted.	CSC to follow up. Law Enforcement and NLACRC Community Services were notified of this incident.	
Age: 31 Inc. Date: 7/16/21	Consumer receives Supported Living services. She fell in the bathroom. She was taken to urgent care, and diagnosed with a fracture in her ankle. She was fitted with a boot initially, and later received a half cast.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 32 Inc. Date: 7/10/21	Consumer resides in a CCF (RCFE). He sent an email to the administrator saying that he had been sexually assaulted in the home. After he was interviewed, a deputy determined that no criminal activity had taken place.	CSC to follow up. Community Care Licensing, Adult Protective Services, Law Enforcement, and NLACRC Community Services were notified of this incident.	
Age: 33 Inc. Date: 7/21/21	She got upset about not accumulating enough points for an activity, so she called 911. Police came and she became physically aggressive with staff. She was taken to the hospital for a psychiatric hold.	CSC to follow up. Community Care Licensing, Law Enforcement, NLACRC Community Services and Psychiatry Consultant were notified of this incident.	

	Description	Action	Final Disposition
Age: 34 Inc. Date: 7/18/21	Consumer resides in a CCF. While cleaning at his parent's house, he slipped and hit his head on a doorframe. He had a cut near his eyebrow that was bleeding profusely. Staff called 911. Paramedics took him to the ER, and he received stitches to close the wound.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 34 Inc. Date: 7/27/21	Consumer resides in Continuous Nursing. While staff was transferring her from bed to shower chair, the sling was not secured properly. She fell, hitting her head, and got a scalp laceration. 911 was called. She was taken to the ER for evaluation and treatment.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 35 Inc. Date: 7/6/21	Consumer resides in a CCF. He got out of bed without assistance, and fell to the floor. Staff noticed that he was bleeding, and had a deep gash over his eye. 911 was called. He was taken to the ER, and received staples to close the wound.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 35 Inc. Date: 7/9/21	Consumer resides in a CCF. Evening medications were given early, outside of the two hour window, causing confusion for evening staff as to whether to dispense or not.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 37 Inc. Date: 7/2/21	Consumer resides in a CCF. She fell while hurrying down the stairs. She said she felt slight pain in her leg. She was taken to urgent care for evaluation.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 37 Inc. Date: 7/20/21	Consumer lives with family. She reported that her boyfriend aggressively took her cell phone from her hand and hurt her finger. She does not feel safe to stay in the apartment with him.	CSC to follow up. Adult Protective Services, Law Enforcement, and NLACRC Community Services were notified of this incident.	
Age: 39 Inc. Date: 7/12/21	Consumer resides in a CCF. He told staff that he was leaving for a couple of hours, but he did not come back until	CSC to follow up. Community Care Licensing, NLACRC Community	

	Description	Action	Final Disposition
	after midnight. This caused him to miss his evening medications.	Services and Nurse Consultant were notified of this incident.	
Age: 39 Inc. Date: 7/18/21	Consumer resides in a CCF. He signed himself out, but did not come back in time for his evening medications.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 39 Inc. Date: 7/26/21	Consumer resides in a CCF. He became verbally aggressive with staff, and stated that he was leaving the facility for a few days. He left without signing himself out. Police were contacted.	CSC to follow up. Community Care Licensing, Law Enforcement, and NLACRC Community Services were notified of this incident.	
Age: 42 Inc. Date: 7/18/21	Consumer receives Supported Living services. He left his staff because he was not interacting with him during his shift; instead the staff was operating a food truck. Another staff member assisted in getting him home.	CSC to follow up. NLACRC Community Services was notified of this incident.	
Age: 42 Inc. Date: 7/23/21	Consumer resides in a CCF. She stumbled while coming down the stairs and fell, hitting the back of her head. She had a scalp laceration. Staff called 911. Paramedics took her to the ER. She received staples to close the wound.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 42 Inc. Date: 7/29/21	Consumer resides in a CCF. He was weak and sluggish. Staff took him to the ER. He was admitted to the hospital for treatment of low sodium level.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 43 Inc. Date: 7/5/21	Consumer receives Independent Living services. Staff mistakenly administered the wrong nighttime medication.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 43 Inc. Date: 7/29/21	Consumer resides in an ICF-DD/N. Med tech reported that noon medication from the previous day had not been given. It was found still in the bubble pack.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	

	Description	Action	Final Disposition
Age: 44 Inc. Date: 7/2/21	Consumer resides in a CCF. She had continual seizure activity. 911 was called. Paramedics took her to the ER. She was admitted to the hospital for treatment of a suspected urinary tract infection.	CSC to follow up. Community Care Licensing, Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 45 Inc. Date: 7/31/21	Consumer lives with family. His cousin, who is also his IHSS worker, became physically aggressive and threatening toward him. Police were called but the cousin was not arrested. Consumer went in his room to calm down and relax.	CSC to follow up. Adult Protective Services, Law Enforcement, and NLACRC Community Services were notified of this incident.	
Age: 46 Inc. Date: 7/7/21	Consumer resides in a CCF. She was in a store parking lot when strangers in a vehicle assaulted her by throwing a full soda can at her head, and then exited the vehicle, threw the can again at her face, and punched her in the arm.	CSC to follow up. Community Care Licensing, Law Enforcement, and NLACRC Community Services were notified of this incident.	
Age: 46 Inc. Date: 7/22/21	Consumer resides in a CCF. He was not eating well, and expressed wanting to go to the hospital. His mother took him to the ER. He was admitted to the hospital for treatment of pneumonia.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 47 Inc. Date: 7/14/21	Consumer lives with family. He told staff that he wanted to kill himself, and that he had scratched several cars in a parking lot with his keys. Per staff recommendation, his brother called 911 for him to be evaluated. Police took him to the hospital for a psychiatric hold.	CSC to follow up. Law Enforcement, NLACRC Community Services and Psychiatry Consultant were notified of this incident.	
Age: 49 Inc. Date: 7/9/21	Consumer resides in a CCF. Evening medications were given early, outside of the two hour window, causing confusion for evening staff as to whether to dispense or not.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 50	Consumer resides in an ICF-DD/N. Staff notified nurse of irregular appearance of	CSC to follow up. Department of Public Health, NLACRC Community	

	Description	Action	Final Disposition
Inc. Date: 7/4/21	the GT stoma. He was taken to the ER, and admitted to the hospital for treatment of a GT infection.	Services and Nurse Consultant were notified of this incident.	
Age: 50 Inc. Date: 7/13/21	Consumer resides in a CCF. She was weak, and had a fever with sore throat. She was taken to the ER, and admitted to the hospital for treatment of pneumonia.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 50 Inc. Date: 7/16/21	Consumer resides in a CCF. He was weak, and had an elevated temperature. Staff was instructed to call 911. He was taken to the ER, and admitted to the hospital for treatment of pneumonia. He tested positive for COVID-19 virus.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 50 Inc. Date: 7/18/21	Consumer receives Supported Living services. He had been coughing and showed symptoms of aspiration. He vomited a dark brown color. Paramedics were called. He was taken to the hospital, and admitted for treatment of pneumonia and urinary tract infection.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 50 Inc. Date: 7/19/21	Consumer resides in an ICF/DD-H. She fell off of her bed and hit her head on the dresser. She got a laceration on her eyebrow. Staff took her to the ER for evaluation and treatment.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 50 Inc. Date: 7/25/21	Consumer resides in a CCF. She became verbally aggressive with a staff member. The staff grabbed her by the arm, took her to her bedroom, yelled at her, and would not let her leave her room.	CSC to follow up. Community Care Licensing and NLACRC Community Services were notified of this incident.	
Age: 50 Inc. Date: 7/27/21	Consumer resides in a CCF. He told his mother that, when he was attempting to run out of the facility, a staff member threw him down.	CSC to follow up. Community Care Licensing and NLACRC Community Services were notified of this incident.	
Age: 51	Consumer resides in an ICF-DD/N. She complained of chest pain, and had an	CSC to follow up. Department of Health Services, NLACRC Community	

	Description	Action	Final Disposition
Inc. Date: 7/12/21	elevated heart rate. 911 was called. She was taken to the ER, and admitted to the hospital for treatment of sepsis, urinary tract infection, and pleural effusion.	Services and Nurse Consultant were notified of this incident.	
Age: 51 Inc. Date: 7/26/21	Consumer receives Supported Living services. While changing her clothes, she fell backward and hit her head. Paramedics were called. She was taken to the ER, and received staples to close the wound.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 52 Inc. Date: 7/8/21	Consumer resides in a CCF. His doctor ordered tests for his progressive shortness of breath. He had a low grade fever and was sent to the ER. He was admitted to the hospital for treatment of possible pneumonia.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 53 Inc. Date: 7/11/21	Consumer resides in a CCF. His family took him out for lunch and said that he would be back in time for his afternoon medications. He came back three hours late, causing him to miss that medication distribution.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 54 Inc. Date: 7/5/21	Consumer resides in an ICF/DD-H. Med tech reported that her medication was empty and had not been replenished. This cause her to miss a morning dose of that medication.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 54 Inc. Date: 7/24/21	Consumer resides in an ICF-DD/N. She threw up several times throughout the day. She was taken to the ER, and admitted to the hospital for treatment of dehydration and a urinary tract infection.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 57 Inc. Date: 7/13/21	Consumer receives Supported Living services. Staff reported that he went missing during an outing at a mall. Police	CSC to follow up. Law Enforcement and NLACRC Community Services were notified of this incident.	

	Description	Action	Final Disposition
	were contacted, and they found find him nearby.		
Age: 58 Inc. Date: 7/9/21	Consumer resides in an ICF/DD-H. Her knees buckled and she fell down onto her thigh. Staff noticed a large bruise on the thigh. She was taken to the hospital, and diagnosed with a fracture in the leg.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 58 Inc. Date: 7/12/21	Consumer resides in an ICF/DD-H. She told her care provider that an overnight staff member had hit her on the knee with a closed fist the previous night. The care provider performed a body check and did not find any injuries.	CSC to follow up. Department of Health Services, Long Term Care Ombudsman, and NLACRC Community Services were notified of this incident.	
Age: 59 Inc. Date: 7/17/21	Consumer receives Supported Living services. She fell out of her wheelchair at the nursing facility and was diagnosed with a clavicle fracture.	CSC to follow up. Community Care Licensing, Long Term Care Ombudsman, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 59 Inc. Date: 7/22/21	Consumer receives Supported Living services. She reported that a nurse touched her inappropriately while changing and cleaning her. She was taken to the ER for evaluation. Police were contacted.	CSC to follow up. Adult Protective Services, Long Term Care Ombudsman, Law Enforcement, and NLACRC Community Services were notified of this incident.	
Age: 59 Inc. Date: 7/22/21	Consumer receives Supported Living services. She had an appointment with her doctor due to concerns of weight loss. Her doctor recommended her to go to the hospital. She was admitted for treatment of a urinary tract infection.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 59 Inc. Date: 7/25/21	Consumer resides in a CCF. He vomited, and then had multiple seizures. Nurse called 911. He was taken to the hospital, and admitted for evaluation, as well as treatment of a urinary tract infection.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 60	Consumer resides in a CCF. Staff discovered that one medication had not	CSC to follow up. Community Care Licensing, NLACRC Community	

	Description	Action	Final Disposition
Inc. Date: 7/29/21	been given. It was found still in the bubble pack.	Services and Nurse Consultant were notified of this incident.	
Age: 61 Inc. Date: 7/8/21	Consumer resides in an ICF/DD-H. She had a slow heart rate and low oxygen saturation. 911 was called. She was taken to the hospital, and admitted for treatment of sepsis, pneumonia, and urinary tract infection.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 62 Inc. Date: 7/14/21	Consumer resides in a CCF. She was transported from a Skilled Nursing facility to a doctor appointment for wound care treatment on her foot. Doctor instructed that she needed to be admitted to the hospital for treatment of a worsening infection on the foot.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 62 Inc. Date: 7/16/21	Consumer receives Supported Living services. Conservator noticed bruises on her arm. Staff had assisted her when she fell with an improper hold. She was taken to urgent care. An x-ray showed a fracture in the arm.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 62 Inc. Date: 7/22/21	Consumer resides in a CCF. She had repeated episodes of emesis, and an elevated temperature. She was taken to the ER, and admitted to the hospital for treatment of pneumonia and a urinary tract infection.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 64 Inc. Date: 7/7/21	Nurse administered a medication as ordered by her doctor. Her hands began to turn red within minutes of administration. The medication was discontinued due to allergic reaction.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 64 Inc. Date: 7/20/21	Consumer receives Supported Living services. She had an infected finger. She was taken to urgent care, then transferred to the ER. She was admitted to the hospital for treatment.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	

	Description	Action	Final Disposition
Age: 65 Inc. Date: 7/11/21	Consumer resides in a CCF. Staff heard a noise, and found that she had tripped and fallen. She had a lacerated lip and bruised chest. Staff called 911. Paramedics took her to the ER. She received stitches to close the wound.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 66 Inc. Date: 7/10/21	Consumer resides in an ICF/DD-H. A staff member reported that the administrator was being overly assertive and forceful in hesitantly assisting her from the floor to the table.	CSC to follow up. Department of Health Services, Law Enforcement, and NLACRC Community Services were notified of this incident.	
Age: 66 Inc. Date: 7/10/21	Consumer resides in an ICF-DD/N. She developed a pressure wound on her buttocks due to immobility from being wheelchair bound.	CSC to follow up. NLACRC Community Services was notified of this incident.	
Age: 66 Inc. Date: 7/14/21	Consumer receives Supported Living services. She reported that she accidentally took a discontinued medication instead of a prescribed medication for four days. She had run out of the prescribed medication.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 67 Inc. Date: 7/20/21	Consumer receives Supported Living services. He rolled off of his bed and was moaning in pain. Staff called 911. Paramedics assessed that his blood sugar was low. He was taken to the ER, and admitted to the hospital for treatment.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 68 Inc. Date: 7/13/21	Consumer receives Independent Living services. Her sister-in-law reported that she thought staff did not deliver full medication. She gave the medication as directed but thought the second halved pill was a duplicate and only gave one.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 68 Inc. Date: 7/20/21	Consumer receives Supported Living services. He was dizzy and having trouble breathing. 911 was called.	CSC to follow up. NLACRC Community Services and Nurse	

	Description	Action	Final Disposition
	Paramedics took him to the ER. He had discolored stools which indicated blood loss. He was admitted to the hospital for evaluation and treatment.	Consultant were notified of this incident.	
Age: 71 Inc. Date: 7/6/21	Consumer receives Independent Living services. He was instructed to use a patch with medication, but he put the patch on without the medication. This caused his blood pressure to go high.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 71 Inc. Date: 7/5/21	Consumer receives Supported Living services. She reported that a staff member is verbally mean to her, and that she had been punched in the stomach on different occasions.	CSC to follow up. Adult Protective Services, Law Enforcement, and NLACRC Community Services were notified of this incident.	
Age: 75 Inc. Date: 7/3/21	Consumer resides in an ICF/DD-H. She tripped and fell to her knees. Her cane bounced, hitting her in the forehead. She was taken to the ER for evaluation, and admitted to the hospital for treatment of low potassium.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 75 Inc. Date: 7/23/21	Consumer receives Independent Living services. He complained of lower back pain, and appeared shaky and pale. 911 was called. Ambulance took him to the ER. He was admitted to the hospital for treatment of an infection.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 76 Inc. Date: 7/28/21	Consumer receives Independent Living services. Evening staff reported that she had not passed any urine since lunchtime. 911 was called. She was taken to the hospital, and admitted for treatment of a urinary tract infection.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 78 Inc. Date: 7/1/21	Consumer resides in an ICF/DD-H. He fell in the shower while staff was bathing him. He did not complain of any pain.	CSC to follow up. Department of Health Services and NLACRC Community Services were notified of this incident.	

	Description	Action	Final Disposition
Age: 84 Inc. Date: 7/7/21	Consumer resides in an ICF-DD/N. Staff found her on the floor shortly after transferring her to bed. She had back and hip pain. Staff called 911. She was taken to the hospital, and admitted for treatment of low potassium.	CSC to follow up. Department of Public Health, NLACRC Community Services and Nurse Consultant were notified of this incident.	

Residential and Day Program Quality Assurance Monitoring Activities
January 2021 - December 2021

Month	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Totals
# of Res'l & Day QA Staff	7	7	8	8	8	7							
# Annual Facility Monitoring Visits	0	24	25	28	20	14							111
# Unannounced Visits	24	92	84	66	63	156							485
# Corrective Action Plans Issued	1	0	1	3	0	0							5
*Substantial Inadequacies Cited:													
1.Threat to Health or Safety													
2.Provision of fewer staff hours than req'd				1									
3.Violations of Rights				1									
4.Failure to implement consumer's IPP			1	1									
5.Failure to comply with Admission Agreement	1			5									
6.Deficiencies handling consumers' cash resources													
7.Failure to comply with staff training reqs			1										
8.L4 fails to use methods per program design													
9.L4 fails to measure consumer progress													
10.Failure to take action per CAP													
11.Failure to use rate increase for purposes authorized													
12.Failure to ensure staff completes DSP requirements.													
13.Failure to submit Special Incident Report	1			1									
*per Title 17 §56054(a)	2	0	2	9	0								

Residential and Day Program Quality Assurance Monitoring Activities
January 2021 - December 2021

Month	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Totals
# of Res'l & Day QA Staff	7	7	8	8	8	7	7						
# Annual Facility Monitoring Visits	0	24	25	28	20	14	8						119
# Unannounced Visits	24	92	84	66	63	156	77						562
# Corrective Action Plans Issued	1	0	1	3	0	0	2						7
*Substantial Inadequacies Cited:													
1.Threat to Health or Safety													
2.Provision of fewer staff hours than req'd				1									
3.Violations of Rights				1									
4.Failure to implement consumer's IPP			1	1			1						
5.Failure to comply with Admission Agreement	1			5			2						
6.Deficiencies handling consumers' cash resources													
7.Failure to comply with staff training reqs			1				1						
8.L4 fails to use methods per program design													
9.L4 fails to measure consumer progress													
10.Failure to take action per CAP													
11.Failure to use rate increase for purposes authorized													
12.Failure to ensure staff completes DSP requirements.													
13.Failure to submit Special Incident Report	1			1			1						
*per Title 17 §56054(a)	2	0	2	9	0	0	5						

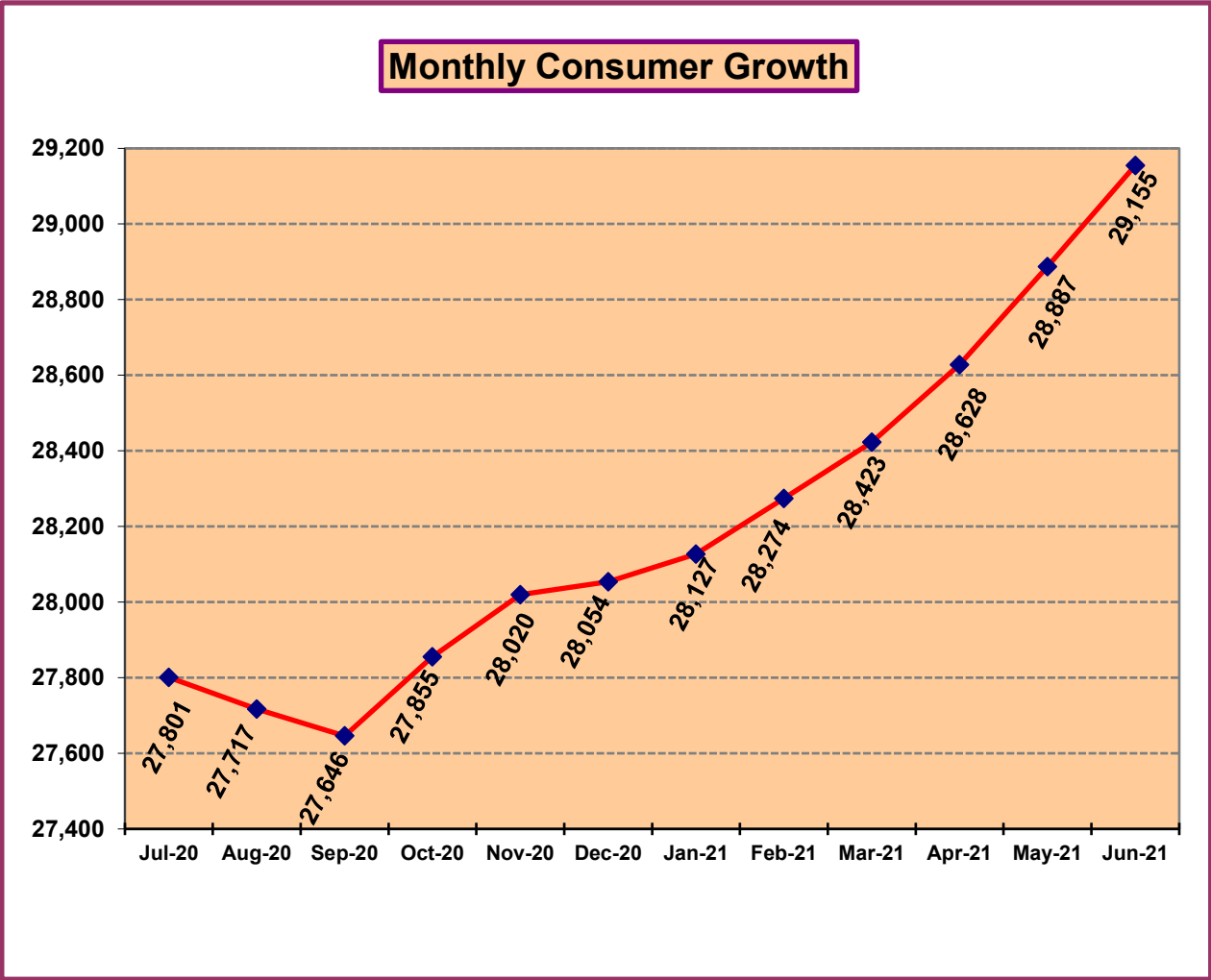
**NORTH LOS ANGELES COUNTY REGIONAL CENTER
MONTHLY STATISTICS RECAP
As of June 2021**

	July 2020 Total	June 2021 Total	Increase/ Decrease	% Change
ALL VALLEYS				
Total Non-Early Start	23,273	23,857	584	2.51%
Total Early Start	3,806	4,299	493	12.95%
Unit Supervisor Cases (*)	62	76	14	22.58%
Self Determination Specialist (*)	15	59	44	293.33%
Prenatal Services	0	0	0	#DIV/0!
Development Center	17	13	-4	-23.53%
Enhanced Case Mgmt	31	27	-4	-12.90%
Specialized 1:25 Caseloads	0	10	10	#DIV/0!
Pending Transfer	35	66	31	88.57%
Intake Services	562	748	186	33.10%
TOTAL ALL VALLEYS	27,801	29,155	1,354	4.87%
SAN FERNANDO VALLEY				
Adult Services	6,072	6,145	73	1.20%
Adult Unit Supervisor (*)	2	9	7	350.00%
Transition Services	2,905	2,960	55	1.89%
Transition Unit Supervisor (*)	10	18	8	80.00%
School Age Services	5,651	5,865	214	3.79%
School Age Unit Supervisor (*)	42	26	-16	-38.10%
Early Start Services	2,560	2,763	203	7.93%
Early Start Unit Supervisor (*)	0	2	2	#DIV/0!
Early Start Intake Unit Supervisor (*)	2	0	-2	-100.00%
Prenatal Services	0	0	0	#DIV/0!
Development Center	17	13	-4	-23.53%
Enhanced Case Mgmt	31	27	-4	-12.90%
Specialized 1:25 Caseloads	0	10	10	#DIV/0!
Pending Transfer	35	66	31	88.57%
Intake Services	313	481	168	53.67%
Self Determination Specialist (*)	1	30	29	2900.00%
TOTAL	17,584	18,415	774	4.40%
ANTELOPE VALLEY				
Self Determination Specialist (*)	0	15	15	#DIV/0!
Adult Services	2,276	2,309	33	1.45%
Adult Unit Supervisor (*)	1	6	5	500.00%
Transition Unit	1,677	1,851	174	10.38%
Transition Unit Supervisor (*)	4	7	3	75.00%
School Age Services	2,038	1,989	-49	-2.40%
School Age Unit Supervisor (*)	1	8	7	700.00%
Early Start Services	765	954	189	24.71%
Intake Services	249	267	18	7.23%
TOTAL	7,005	7,370	380	5.42%
SANTA CLARITA VALLEY				
Self Determination Specialist (*)	14	14	0	0.00%
Adult Services	870	895	25	2.87%
Transition Services	534	636	102	19.10%
School Age Services	1,250	1,207	-43	-3.44%
Early Start Services	481	582	101	21.00%
TOTAL	3,135	3,320	185	5.90%

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

NLACRC TOTAL (ALL SERVICES) MONTHLY CONSUMER GROWTH ALL VALLEYS

Month	Consumers	Growth	% Change
Jul-20	27,801	-84	-0.30%
Aug-20	27,717	-71	-0.26%
Sep-20	27,646	209	0.76%
Oct-20	27,855	165	0.59%
Nov-20	28,020	34	0.12%
Dec-20	28,054	73	0.26%
Jan-21	28,127	147	0.52%
Feb-21	28,274	149	0.53%
Mar-21	28,423	205	0.72%
Apr-21	28,628	259	0.90%
May-21	28,887	268	0.93%
Jun-21	29,155		
Total		1,354	
Average		123	
Percent Chg		4.87%	



July 2021 CSC Caseload Ratio

San Fernando Valley								
Adult Services	Consumers	Ser. Coord.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Adult Unit I	1,014	11	92.2	1				
Adult Unit II	1,014	11	92.2	1		1		
Adult Unit III	18							
Adult Unit IV	1,084	13	83.4					
Adult Unit V	1,014	12	84.5				1	
Adult Unit VI	994	10	99.4	2				
Adult Unit VII	1003	11	91.2	1				
Adult Unit Supervisor*	14							
Total	6,141	68	90.3	5		1	1	
Transition Services	Consumers	Ser. Coord.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Transition Unit I	922	9	102.4	2		1		
Transition Unit II	975	11	88.6				1	
Transition Unit III	1,086	11	98.7	1				
Transition Unit Supervisor*	21							
Total	2,983	31	96.2	3		1	1	
School Age Services	Consumers	Ser. Coord.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
School Age III	1,101	12	91.8					
School Age IV	1,057	12	88.1				1	
School Age V	1,075	12	89.6					
School Age VI	1,033	11	93.9	1				
School Age VII	941	11	85.5	1				
School Age VIII	666	8	83.3	1				
School Age Unit Supervisor*	31							
Total	5,873	66	89.0	3			1	
Early Start Services	Consumers	Ser. Coord.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Early Start 1 (Status 1 & 2)	671							
Early Start 1 Intake	97							
Early Start 1 Total	768	11	69.8					3
Early Start 2 (Status 1 & 2)	653							
Early Start 2 Intake	126							
Early Start 2 Total	779	11	70.8					
Early Start 3 (Status 1 & 2)	457							
Early Start 3 Intake	78							
Early Start 3 Total	535	9	59.4	2		1		
Early Start 4 (Status 1 & 2)	606							
Early Start 4 Intake	104							
Early Start 4 Total	710	10	71.0	1				
Status 1 Over 36 mo.	18							
Early Start Unit Supervisor*	6							
Early Start Intake Unit Supervisor*								
Total	2,792	41	68.1	3		1		3
Total Non-Early Start	14,997	165	90.9	11		2	3	
Total Early Start	2,792	41	68.1	3		1		3
Total	17,789	206	86.4	14		3	3	
SFV Self Determination Specialist*	31	2						
Total	508	5	101.6					1
Intake Services	Consumers	Ser. Coord.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Antelope Valley								
AV Self Determination Specialist*	15	1						
Adult Unit I	970	9	107.8	2				
Adult Unit II	993	9	110.3	3				
Adult Unit III	369	4	92.3					
Total	2,332	22	106.0	5				
AV Adult Unit Supervisor*	2							
Transition Unit I	1,076	10	107.6	2			1	
Transition Unit II	790	8	98.8	1				
Total	1,866	18	103.7	3			1	
AV Transition Supervisor*	2							
School Age I	1,022	13	78.6			2		
School Age II	977	12	81.4				1	
Total	1,999	25	80.0			2	1	
AV School Age Supervisor*	6							
Early Start (Status 1 & 2)	713							
Early Start Intake	222							
Early Start Total	935	11	85.0	4				
Status 1 Over 36 mo.	33							
Total Non-Early Start	6,197	65	95.3	8		2	2	
Total Early Start	935	11	85.0	4				
Total	7,132	76	93.8	12		2	2	
Intake Services	283	3	94.3					1
Santa Clarita Valley								
SCV Self Determination Specialist*	14	1						
Adult Unit	903	11	82.1					
Transition Unit I	145	2	72.5					
Transition Unit II	484	5	96.8					
Total	629	7	89.9					
School Age Unit I	930	11	84.5					
School Age Unit II	283	3	94.3	1				
Total	1,213	14	86.6	1				
Early Start (status 1 & 2)	499							
Early Start Intake	96							
Early Start Total	595	9	66.1			1		
Status 1 Over 36 mo.	5							
Total Non-Early Start	2,745	32	85.8	1				
Total Early Start	595	9	66.1			1		
Total	3,340	41	81.5	1		1		

July 2021 CSC Caseload Ratio								
All Valleys	Consumers	Ser. Coord.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Total Non-Early Start	23,939	262	91.4	20		4	5	
Total Early Start	4,322	61	70.9	7		2		3
Total Early Start (Status 1 & 2)	3,599							
Total Early Start Intake	723							
*Self Determination Specialist	60	4						
*Total Non Early Start Supervisor	76							
*Total Early Start Supervisor Status 1&2	6							
*Total Early Start Supervisor Intake								
Total Status 1 Over 36 mo.	56							
Sub-total	28,261	327	86.4	27		6	5	
Intake Services	791	8	98.9					2
Prenatal Services								
Provisional Eligibility	0	0	#DIV/0!	3				
Development Center	14							
Enhanced Case Management	26	1						
Specialized 1:25 Caseloads	16	2		1				
Pending Transfer	61							
Shared-in	8							
Shared-out	25							
Medicaid Waiver	10,013							
Total	29,311	338	86.7	31		6	5	5
Total	=	380	365					

* Numbers not part of ratio count, but counted on Total Summary section

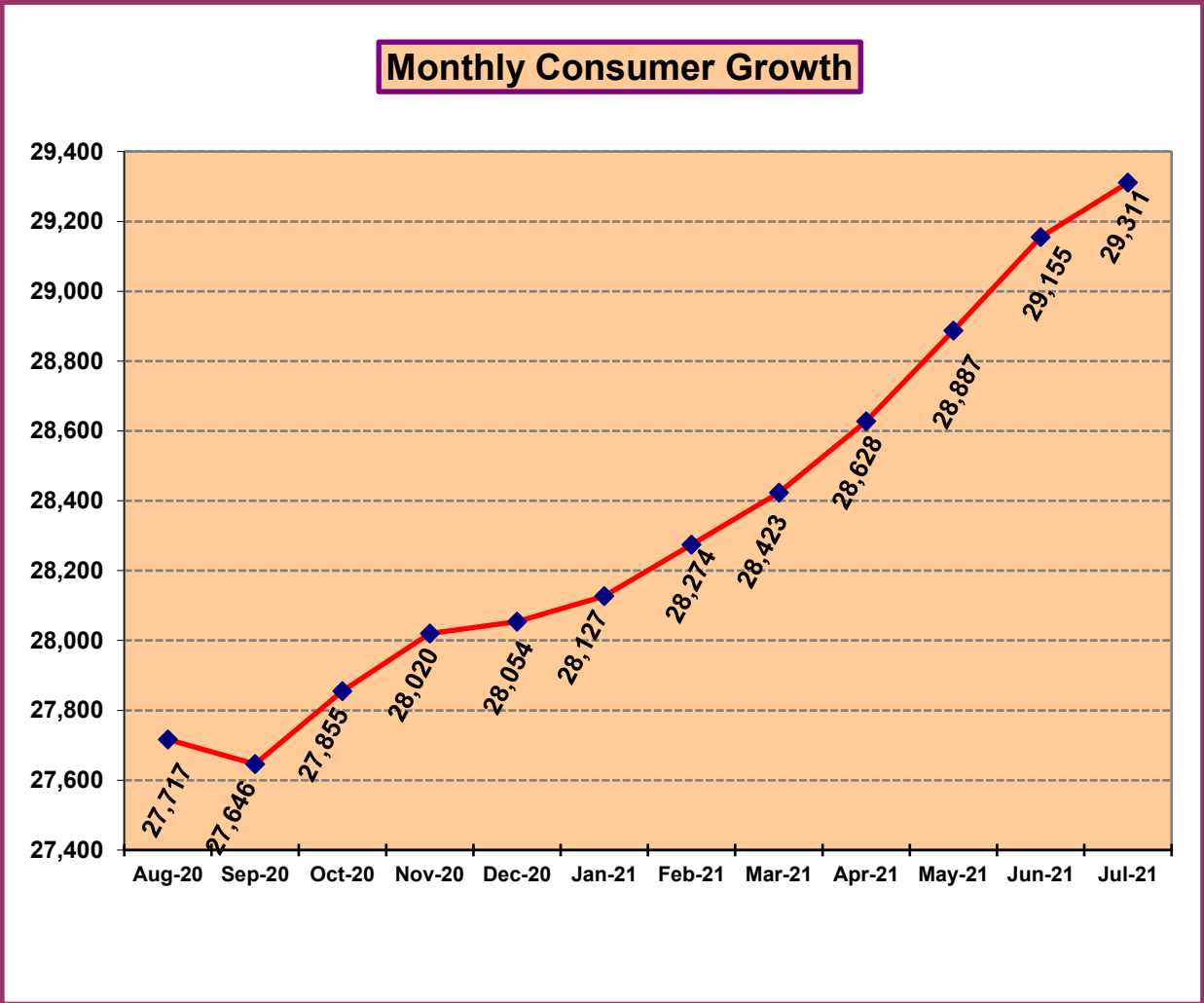
NORTH LOS ANGELES COUNTY REGIONAL CENTER
MONTHLY STATISTICS RECAP
As of July 2021

	August 2020 Total	July 2021 Total	Increase/ Decrease	% Change
ALL VALLEYS				
Total Non-Early Start	23,353	23,939	586	2.51%
Total Early Start	3,706	4,322	616	16.62%
Unit Supervisor Cases (*)	78	82	4	5.13%
Self Determination Specialist (*)	19	60	41	215.79%
Prenatal Services	0	0	0	#DIV/0!
Development Center	17	14	-3	-17.65%
Enhanced Case Mgmt	31	26	-5	-16.13%
Specialized 1:25 Caseloads	0	16	16	#DIV/0!
Pending Transfer	37	61	24	64.86%
Intake Services	476	791	315	66.18%
TOTAL ALL VALLEYS	27,717	29,311	1,594	5.75%
SAN FERNANDO VALLEY				
Adult Services	6,081	6,141	60	0.99%
Adult Unit Supervisor (*)	3	14	11	366.67%
Transition Services	2,908	2,983	75	2.58%
Transition Unit Supervisor (*)	11	21	10	90.91%
School Age Services	5,705	5,873	168	2.94%
School Age Unit Supervisor (*)	33	31	-2	-6.06%
Early Start Services	2,442	2,792	350	14.33%
Early Start Unit Supervisor (*)	2	6	4	200.00%
Early Start Intake Unit Supervisor (*)	1	0	-1	-100.00%
Prenatal Services	0	0	0	#DIV/0!
Development Center	17	14	-3	-17.65%
Enhanced Case Mgmt	31	26	-5	-16.13%
Specialized 1:25 Caseloads	0	16	16	#DIV/0!
Pending Transfer	37	61	24	64.86%
Intake Services	250	508	258	103.20%
Self Determination Specialist (*)	2	31	29	1450.00%
TOTAL	17,471	18,517	994	5.69%
ANTELOPE VALLEY				
Self Determination Specialist (*)	0	15	15	#DIV/0!
Adult Services	2,283	2,332	49	2.15%
Adult Unit Supervisor (*)	4	2	-2	-50.00%
Transition Unit	1,664	1,866	202	12.14%
Transition Unit Supervisor (*)	11	2	-9	-81.82%
School Age Services	2,050	1,999	-51	-2.49%
School Age Unit Supervisor (*)	13	6	-7	-53.85%
Early Start Services	787	935	148	18.81%
Intake Services	226	283	57	25.22%
TOTAL	7,010	7,415	387	5.52%
SANTA CLARITA VALLEY				
Self Determination Specialist (*)	17	14	-3	-17.65%
Adult Services	871	903	32	3.67%
Transition Services	539	629	90	16.70%
School Age Services	1,252	1,213	-39	-3.12%
Early Start Services	477	595	118	24.74%
TOTAL	3,139	3,340	201	6.40%

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

NLACRC TOTAL (ALL SERVICES) MONTHLY CONSUMER GROWTH ALL VALLEYS

Month	Consumers	Growth	% Change
Aug-20	27,717	-71	-0.26%
Sep-20	27,646	209	0.76%
Oct-20	27,855	165	0.59%
Nov-20	28,020	34	0.12%
Dec-20	28,054	73	0.26%
Jan-21	28,127	147	0.52%
Feb-21	28,274	149	0.53%
Mar-21	28,423	205	0.72%
Apr-21	28,628	259	0.90%
May-21	28,887	268	0.93%
Jun-21	29,155	156	0.54%
Jul-21	29,311		
Total		1,594	
Average		145	
Percent Chg		5.75%	



July 2021 CSC Caseload Ratio

San Fernando Valley								
Adult Services	Consumers	Ser. Coord.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Adult Unit I	1,014	11	92.2	1				
Adult Unit II	1,014	11	92.2	1		1		
Adult Unit III	18							
Adult Unit IV	1,084	13	83.4					
Adult Unit V	1,014	12	84.5				1	
Adult Unit VI	994	10	99.4	2				
Adult Unit VII	1003	11	91.2	1				
Adult Unit Supervisor*	14							
Total	6,141	68	90.3	5		1	1	
Transition Services	Consumers	Ser. Coord.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Transition Unit I	922	9	102.4	2		1		
Transition Unit II	975	11	88.6				1	
Transition Unit III	1,086	11	98.7	1				
Transition Unit Supervisor*	21							
Total	2,983	31	96.2	3		1	1	
School Age Services	Consumers	Ser. Coord.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
School Age III	1,101	12	91.8					
School Age IV	1,057	12	88.1				1	
School Age V	1,075	12	89.6					
School Age VI	1,033	11	93.9	1				
School Age VII	941	11	85.5	1				
School Age VIII	666	8	83.3	1				
School Age Unit Supervisor*	31							
Total	5,873	66	89.0	3			1	
Early Start Services	Consumers	Ser. Coord.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Early Start 1 (Status 1 & 2)	671							
Early Start 1 Intake	97							
Early Start 1 Total	768	11	69.8					3
Early Start 2 (Status 1 & 2)	653							
Early Start 2 Intake	126							
Early Start 2 Total	779	11	70.8					
Early Start 3 (Status 1 & 2)	457							
Early Start 3 Intake	78							
Early Start 3 Total	535	9	59.4	2		1		
Early Start 4 (Status 1 & 2)	606							
Early Start 4 Intake	104							
Early Start 4 Total	710	10	71.0	1				
Status 1 Over 36 mo.	18							
Early Start Unit Supervisor*	6							
Early Start Intake Unit Supervisor*								
Total	2,792	41	68.1	3		1		3
Total Non-Early Start	14,997	165	90.9	11		2	3	
Total Early Start	7,132	41	72.8	3		1		3
Total	14,997	206	83.3	14		3	3	
SFV Self Determination Specialist*	31	2						
Intake Services	508	5	101.6					1
Antelope Valley								
AV Self Determination Specialist*	Consumers	Ser. Coord.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
AV Self Determination Specialist*	15	1						
Adult Unit I	970	9	107.8	2				
Adult Unit II	993	9	110.3	3				
Adult Unit III	369	4	92.3					
Total	2,332	22	106.0	5				
AV Adult Unit Supervisor*	2							
Transition Unit I	1,076	10	107.6	2			1	
Transition Unit II	790	8	98.8	1				
Total	1,866	18	103.7	3			1	
AV Transition Supervisor*	2							
School Age I	1,022	13	78.6	1		2		
School Age II	977	12	81.4				1	
Total	1,999	25	80.0	1		2	1	
AV School Age Supervisor*	6							
Early Start Intake	713							
Early Start Intake	222							
Early Start Total	935	11	85.0	4				
Status 1 Over 36 mo.	33							
Total Non-Early Start	6,197	65	95.3	9		2	2	
Total Early Start	935	11	85.0	4				
Total	7,132	76	93.8	13		2	2	
Intake Services	283	3	94.3					1
Santa Clarita Valley								
SCV Self Determination Specialist*	Consumers	Ser. Coord.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
SCV Self Determination Specialist*	14	1						
Adult Unit	903	11	82.1					
Transition Unit I	145	2	72.5					
Transition Unit II	484	5	96.8					
Total	629	7	89.9					
School Age Unit I	930	11	84.5					
School Age Unit II	283	3	94.3	1				
Total	1,213	14	86.6	1				
Early Start (status 1 & 2)	499							
Early Start Intake	96							
Early Start Total	595	9	66.1			1		
Status 1 Over 36 mo.	5							
Total Non-Early Start	2,745	32	85.8	1				
Total Early Start	595	9	66.1			1		
Total	3,340	41	81.5	1		1		

July 2021 CSC Caseload Ratio								
All Valleys	Consumers	Ser. Coord.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Total Non-Early Start	23,939	262	91.4	21		4	5	
Total Early Start	1,530	61	25.1	7		2		3
Total Early Start (Status 1 & 2)	3,599							
Total Early Start Intake	723							
*Self Determination Specialist	60	4						
*Total Non Early Start Supervisor	76							
*Total Early Start Supervisor Status 1&2	6							
*Total Early Start Supervisor Intake								
Total Status 1 Over 36 mo.	56							
Sub-total	25,469	327	77.9	28		6	5	
Intake Services	791	8	98.9					2
Prenatal Services								
Provisional Eligibility	0	0	#DIV/0!	2				
Development Center	14							
Enhanced Case Management	26	1						
Specialized 1:25 Caseloads	16	2		1				
Pending Transfer	61							
Shared-in	8							
Shared-out	25							
Medicaid Waiver	10,013							
Total	26,519	338	78.5	31		6	5	5
	Total =	380	366					
* Numbers not part of ratio count, but counted on Total Summary section								

North Los Angeles County Regional Center
Consumer Advisory Committee Meeting Minutes (Via Zoom)
August 4, 2021

Present: Pam Aiona, Bill Abramson, Lesly Forbes, Suzanne Paggi, Cynthia Samano, Destry Walker, – Committee Members
Mary Hylan, Claudia Sicairos Beltran, Jennifer Koster/Board Member, Lety Garcia/Board President - Guests

Silvia Bonilla, Sara Iwahashi, Juan Hernandez, Jose Rodriguez, and Ana Maria Parthenis-Rivas – Staff

Absent: Caroline Mitchell, Chair; Nicholas Abrahms, Vice Chair

1. Call to Order & Introductions

In the absence of the chair and vice chair, L. Forbes, former chair, called the meeting to order at 11:08 am and introductions were made.

2. Consent Items

A. Approval of Agenda

M/S/C (M. Hyland/D. Walker) To approve the agenda as modified.

B. Approval of Minutes from the June 2nd Meeting

M/S/C (D. Walker/C. Samano) To approve the minutes as modified.

3. Committee Business

A. Presentation

L. Garcia gave an overview of the board functions and invited committee members to apply to the board.

Action: Provide the Board application in larger print for consumers.

B. CAC Orientation

J. Rodriguez presented an overview of the Committee's Goals; Basic Meeting Protocols; and Policies & Procedures.

M/S/C (J. Koster/D. Walker) to leave the CAC meeting open to all consumers.

Action: Review possible modifications to the committee's Policies & Procedures related to nominations and screening. J. Rodriguez will provide a copy of the Policies & Procedures with highlights of the referenced proposed

modifications.

C. Training/Presentation Calendar

Action: Recommendation to have a COVID update for September or October.

D. Legislative Town Hall Survey

E. DDS Wellness and Health Bulletin

F. DDS standardized information packet focus group and survey.

Action: S. Iwahashi will forward this information to J. Rodriguez to be shared with committee.

4. Identify Agenda Items for the Next Board Meeting

The CAC identified the following items for their section of the August 11th board meeting agenda:

A. Minutes from the August 4, 2021 Meeting

5. Announcement / Information / Public Input

A. Updated CAC Meeting Attendance Sheet

B. Next Meeting: September 1, 2021 at 11:00 a.m.

Public Input

L. Forbes and Cynthia asked about Section 8 housing.

Action: J. Rodriguez will look into having someone come to present on this topic.

6. Adjournment

L. Forbes adjourned the meeting at 12:13 pm.

Submitted by,



First Name, Last Name

Executive Assistant

[camin_aug5_2021]



North Los Angeles County Regional Center
Consumer Services Committee Meeting Minutes

July 21, 2021

Present: Nicholas Abrahms, Christina Cannarella, Gabriela Herrera, Jennifer Koster, Sylvia Brooks Griffin, David Coe, Alma Rodriguez, Rocio Sigala, Jennifer Siguenza, Deshawn Turner – Committee Members.

Sharoll Jackson – Vendor Advisory Committee Representative

Jeremy Sunderland, Leticia Garcia, Angelina Martinez, Alma Rodriguez, Erica Beall, Ana Quiles, Suad Bisogno, Michelle Heid -Guests

Emmanuel Gutierrez, Evan Ingber, Sara Iwahashi, Ruth Janka, Michele Marra, Ana Maria Parthenis-Rivas, Cristina Preuss, Kim Rolfes, Dr. Jesse Weller, Jennifer Williamson, Jazmin Zinnerman, Dr. Michael Fernandez, Gabriela Eshrati, Evelyn McOmie, Sandra Rizo, Ana Maria Parthenis-Rivas, Betania Luques – Staff Members

I. Call to Order & Introductions

The Executive Director called the meeting to order at 6:03 p.m. in absence of a chair, and introductions were made.

II. Public Input

- No public input

III. Consent Items

A. Approval of Agenda

M/S/C (J. Siguenza/G. Herrera) To approve the agenda as presented.

B. Approval of Minutes of May 19th Meeting

M/S/C (New Committee Members; Abstention: N. Abrahms/G. Herrera) To approve the minutes as presented.

IV. Committee Business

A. Annual Committee Orientation

Board Members were informed of the Annual Orientation/Training which will be held on Saturday, July 24th from 10:00 am to 1:00 pm via Zoom. A training manual with all the materials needed for the orientation was sent via overnight mail to each board member on July 21, 2021.

1. Policies & Procedures

Executive Director reviewed the basics of the Consumer Services Committee, and informed members that this committee meets once a month, on the third Wednesday at 6 p.m. This committee selects its own chair and achieves a quorum with 50% participation. It was also explained that this committee could review our Service Standards, the Community Placement Plan, and request analysis/data on areas of service planning. This committee can similarly recommend training to the board and review our mission statement and philosophy.

Committee members were informed that policies can be re-evaluated and changed, and that they will be receiving a training manual with Board bylaws and policies, Robert's Rules of Order, Lanterman Act, etc. Additional information regarding the "drop box" will also be provided. The drop box will be used to store many committee documents e.g., committee policies, etc.

2. Bylaws Statement

The committee was given a summary of the committee bylaws.

3. Board Audit

The Board audit helps committee members understand and have knowledge, of the Lanterman Act, applicable contract provisions, implications of legislation enacted during the fiscal year, how our budget has a negative effect on consumer services, our Service Standards, and the appeals & hearing process. Committee members also acquire skills on conducting effective meetings, developing policies and agenda, public hearings, etc. Additionally, members will recognize the dangers of ignoring statutory and contractual requirements, deferring difficult decisions, etc.

4. Core Values for Policy Development

Executive Director reviewed the purpose of this committee and its core values,

which will guide policy development. These policies are also supported by legislature.

A question was asked as to what goes into proven state of the art services? and response was to ensure services are proven and effective. These policies are included in the board manual committee members will be receiving.

B. FY2021-22 Consumer Service Committee Meeting Schedules

1. Committee members were asked to reference page 10 of the meeting packet to view the FY 2021-22 committee calendar of scheduled meetings for this fiscal year. This committee does not meet in June and December. For now, all meetings are held virtually via zoom.

C. Volunteer to Serve as Committee Chair

G. Herrera was the previous Fiscal Year Committee Chair and volunteered to be re-elected as the chair of this committee for the new Fiscal Year 2021-22.

M/S/C (C. Cannarella/D. Coe) To approve the re-election of Gabriela Herrera as the chair of the CAC for new fiscal year.

D. 637 Proposal

The Community Services (CS) Director shared a PowerPoint presentation on the AB 637 proposal to change the Rate Model for Adult Residential Facilities for Persons with Special Healthcare Needs known as ARFPSHN, which needs to be taken to the Board for approval.

CS director explained what ARFPSHNs are, their history, why we need ARFPSHN services, the qualifying personal care/special health care needs, the service provider selection, who are the residents of ARFPSHNs, the challenges, examples of fiscal impact, and provided a solution and next steps.

A board member asked if for medical fragile consumers we are proposing that if there are two consumers in a facility, are we still going to pay for five consumers. Response was that we carve out the cost. If we reduce the consumers, we will continue to fund the facility cost to maintain staff, but not the cost for consumers that are not living in the facility. An ARFPSHN consumer requires 24 hr. nursing care.

Another question was if a consumer has 24 hr. care needs, are they required to go to ARFPSHNs? Response was that the ARFPSHN model was designed for Developmental Center (DC) individuals. These homes meet the needs of DC individuals, and they are designed to be forever homes for consumers.

M/S/C (C. Cannarella/D. Coe) To bring AB 637 proposal to the Board for approval.

E. Participant Direct Services and Parent Conversion Services

1. Presentation on the Rate Difference between Participant Direct In-Home Respite and In-Home Respite Agency.

The Deputy Director-CFO and the Chief of Program Services partnered to present on the differences between these two services and their rates. The information was also included in the committee packet on page 50.

2. Plan/information on timing of assessment for reaching out to individuals regarding Participant Directed Services (PDS)

The committee was informed that the rates are set by DDS for both the In-Home Respite and Participant Directed Services. A Town Hall meeting was held explaining Participant Directed Services (PDS). We will also advertise on our various media outlets regarding PDS and will ensure that Service Coordinators are clear on the difference between PDS and the Parent Conversion Services, and that they understand the rates for these two options.

A question was asked if parents could be provided a list of FMSs that are providing services under PDS? The response was that we will check our website to ensure that the names of FMSs are available on our web page.

F. 4th Quarter Exceptions/Exemptions Report

The Chief of Program Services explained the differences between exceptions and exemptions and reviewed with committee members various exception reports e.g., by diagnosis, age, etc. for FY 2020-21. Committee members were informed that some of the numbers for personal assistance exceptions are lower due to families not requesting exceptions during the pandemic. There were no exemptions to report. These reports were included in the committee packet on pages 13-20.

G. 4th Quarter Consumer Diagnostic Report

The Chief of Program Services reviewed with committee members the 4th quarter consumer diagnostic report which shows the percentage change for this quarter for FY 2020-21 vs. 1st quarter FY 2018-19.

H. 4th Quarter Consumer Diagnostic Report by Age

The Chief of Program Services presented the 4th quarter consumer diagnostic report by age, which shows the percentage total by diagnosis and age group.

I. 4th Quarter Appeals/Hearing Report

The Chief of Program Services presented the 4th quarter appeals/hearing report, which shows the total number of Notice of Actions sent (694) and the total number of appeals filed (28). This report is included in the committee packet on pages 22-27.

J. 4th Quarter NOA/Services Report

The Chief of Program Services reviewed with committee members the 4th quarter NOA/Services Report, which shows a summary of the notice of proposed actions by ethnicity and services.

There was concern by some board members with regards to the high number of NOAs for Spanish/Latin ethnicity. We will follow-up on reasons why this number of NOAs for this group is elevated. It could be that we were unable to contact consumer/family, as many families move or change phone numbers, and do not inform the regional center. Our process is to call the primary, secondary and emergency contacts on file, if no response, then a letter is sent. If no reply from letter, then an NOA is sent. We are looking at having service coordinators verify contact information at initial contact to ensure contact information is still current.

A question was asked as to how NOA letters are generated. We will follow-up on this process and circle back with a response.

It was recommended that the Spanish/Latin be corrected on the Notice of Proposed Action reports as this is not the proper reference under ethnicity for this group.

K. Mo. Community Resource Development Plan (CRDP) Report

The Community Development Report as of July 2021 was reviewed with committee members, and we are very excited to have more resources in our catchment area.

L. Self Determination Program (SDP) Report

The Chief of Program Services reported on the various SDP areas: Number of participants that opted out of SDP (79), Number of orientations (twice/month), Allocations for implementing SDP, Entities selected/awarded contracts for RFP process, NLACRC SDP statistics, etc.

M. Aging Adult Services and Supports Update

We are currently recruiting for this position and hope to have a candidate soon for master plan on aging.

V. Chief of Program Services Report (Jesse Weller)

Chief of Program Services gave his report which touched on topics for upcoming Town Hall meetings (Vaccine equity & Hesitancy – July 21, 2021, Transition Age Services – August 19, 2021), the Different Thinkers, Different Learners training series upcoming dates, various orientations, update on vaccinations, Diversity, Equity and Inclusion (will be presented at Strategic Planning Committee on August 2nd), and monthly groups.

VI. Board Meeting Agenda Items

The following items were identified for the committee's section of the August 11, 2021 board meeting agenda:

- A. Minutes of the July 21st Meeting
- B. 4th Quarter Exceptions/Exemptions Report
- C. 4th Quarter Consumer Diagnosis Report

VII. Announcements / Information Items / Public Input

- A. Proposed Agenda Items for next meeting:

1. Propose to extend time for Consumer Services Committee Meeting
2. Info. on how NLACRC is preparing for reinstatement of Social Rec./Camp
3. Ask DDS for an increase for Participant Directed Services community-based day services - no FMSs that will provide services due to low reimbursement rate

B. Next Meeting: Wednesday, August 18, 2021 at 6:00 p.m. (via Zoom).

VIII. Adjournment

Committee Chair adjourned the meeting at 8:05 p.m.

Submitted by:

Sandra Rizo

Executive Admin. Assistant



North Los Angeles County Regional Center
Executive Committee Meeting Minutes
July 28, 2021

Draft

Present: Leticia Garcia, Angelina Martinez, Lillian Martinez, Ana Quiles, and Jeremy Sunderland – Committee Members

Absent: Marianne Davis

Ruth Janka, Michele Marra, Kim Rolfes, Jesse Weller, Liliana Windover, Cheryl Blizin and Betania Luques– Staff Members

I. Call to Order

Lety Garcia, President, called the meeting to order at 9:07 p.m.

II. Public Input

No public input

III. Consent Items

A. Approval of Agenda – (*Packet 2, Page 59*)

The Executive Director Evaluation and Executive Director Recruitment policies were included in the Administrative Affairs agenda; however, it was recommended to include these policies under the Executive Committee agenda. These policies will be discussed under Section IV.6 of the agenda.

M/S/C (A. Martinez/J. Sunderland) To approve the agenda as modified.

B. Approval of Minutes from the May 26th and June 24th Meetings (*Packet 1, Page 3 and Packet 2, Page 60*)

M/S/C (J. Sunderland/A. Martinez) To approve the minutes as presented.

IV. Committee Business

A. Annual Committee Orientation

1. Policies & Procedures – (*Packet 1, Page 13*)

The committee reviewed the Executive Committee Policies and Procedures as presented.

2. The committee reviewed the following Officer Policy Statements as presented – *(Packet 1, Page 15)*

- Board of Trustees Policy Statement – President
- Board of Trustees Policy Statement – First Vice President
- Board of Trustees Policy Statement – Second Vice President
- Board of Trustees Policy Statement – Treasurer
- Board of Trustees Policy Statement – Secretary
- ARCA Delegate and Alternate Policy Statement

3. Executive Committee Critical Calendar for FY 2021-22 – *(Packet 1, Page 21)*

The committee reviewed the Executive Committee Critical Calendar for FY 2021-22.

4. Board Audit Section – *(Packet 1, Page 24)*

The committee reviewed the Board Audit Section as presented.

5. Meeting Schedule – *(Packet 1, Page 25)*

The committee was presented with the Meeting schedule for FY 2021-22. The meeting in November 2021 will be held on Tuesday, November 23rd due to the Thanksgiving Holiday.

6. Board Policies for Review by Executive Committee – (Packet 1, Page 26-53)

The following Board Member policies were reviewed as presented:

- Board of Trustees Code of Conduct
- Board Member Conflict of Interest Resolution Process
- Board Internship Policy
- Board Member Responsibilities Policy

- Board Research Review Committee Policy
- Board of Trustees Sponsorship Policy
- Board of Trustees Staff Interaction Policy
- Board of Trustees Transparency and Public Information Policy
- Board of Trustees Zero Tolerance Policy for Consumer Abuse of Neglect

ACTION: It was recommended to review and revise the following policies prior to the next Executive Committee meeting for board consideration:

- Board of Trustees Staff Interaction Policy - (Jeremy & Ruth)
- Board Member Responsibilities Policy - (Lety & Ruth)
- Board of Trustees Transparency and Public Information Policy - (Kim & Ana)
- Executive Director Evaluation Policy - (Lety & Michele)
- Executive Director Recruitment Policy - (Lety & Michele)

7. Public Input & Public Participation during Committee Business

It was recommended that non-committee board members be allowed to participate in committee discussions, however, not be allowed to vote. It was also recommended to limit their public input to 3 minutes.

M/S/C (A. Quiles/J. Sunderland) To recommend a uniform practice that allows non-committee board members to participate during committee business, in particular during the Consumer Services Committee, Government Community Relations Committee, and Board Meetings.

8. Timeline and Hardcopy Preferences for Committee Packets

It has been established that we have a uniform timeline for all packets for all committees. Hard copy packets will be going to Lety Garcia, Ana Quiles, Angelina Martinez and Lillian Martinez with the exception of Jeremy Sunderland who does not wish to have a hard copy.

ACTION: To identify timeline and hardcopy preference for Board of Trustees.

B. Annual Board Training Plan – (*Packet 1, Page 54*)

A draft of the Board of Trustees Presentation/Training Schedule for FY 2021-22 was reviewed with this committee. The following presentations/trainings were recommended by this committee:

1. Legislative Training
2. Regional Center POS & OPS Contracting Process
3. Lanterman Developmental Disability Services Act Overview
4. Audits, Financial Statement, Tax Returns, and financial focus for Board Members
5. Vendorization, Resources Development and Quality Assurance Training
6. Transparency Policy
7. Cultural Competency Training
8. Implicit Bias Training
9. Strategic Planning Training

It was recommended to record all training and Town Halls being conducted by staff members to make them available to Board Members.

ACTION: The annual board training plan will be updated and reviewed at the Executive Committee meeting scheduled on August 25th.

C. Medi-Cal Provider Supplemental Change Form – New board member reporting requirements

The center received notice from the Department of Developmental Services (DDS) requiring the regional centers to revalidate their Medi-Cal enrollment and since board members are considered officers, revalidation is required every five years or any time there is a cumulative 50% change in board membership. This situation occurred over the last year, which means we will have to complete the medical supplemental forms to ensure we continue the Center's enrollment as a Med-Cal provider. Information provided to DDS is highly sensitive and it is kept secure. Forms will be sent out to Board members, and then they will be submitted to DDS.

D. Conflict of Interest Forms (COI)

DDS requires the submission of updated COI forms from board members by August 1st of each year. Currently, there are 7 board members who have not yet submitted their COI forms.

ACTION: Lety will contact board members who have not submitted their COI forms.

E. DS 1891 Status -Board Members and Executive Director

All board members provided their legal names which is a requirement for board members and the Executive Director. Information was submitted to OIG; everyone was cleared.

F. FY 2020-21 Board Budget vs Expenditures (*Packet 1, Page 57*)

Kim presented the FY 2020-2021 Board Budget vs. Expenditure report to the Committee. Due to the pandemic, the board did not expend the usual amount of funds in FY2020-21, resulting in a proposed revision to the budget from \$101,500.00 to \$52,050.00. The expenditures include board member support, respite support, translation services and a board training. The year-to-date expenditures for FY 2020-21 are \$31,380.49, with a remaining budget of \$20,669.51.

M/S/C (A. Quiles/J. Sunderland) To authorize the budget change to be presented to the board.

G. Finalize Agenda for August 11th Board Meeting

The committee finalized the agenda for the August 11th board meeting.

V. **Center Operations**

A. COVID

As of June 25, 2021, NLACRC has 1,222 positive cases, 6 currently hospitalized and 55 deaths. Statewide, there are 17,820 positive cases, 475 currently hospitalized and 631 deaths. We are starting to see an increase in the positive

cases due to the Delta variant which has resulted in the local public health department issuing new guidance such as masking requirements regardless of vaccination status.

NLACRC is still planning to reopen its offices on September 1, 2021 with staff returning to the office twice a week as of August 1, 2021, and three days a week starting September 1, 2021. However, we will continue to monitor the public health orders.

B. DDS Directives

The following directives recently issued by DDS were reviewed:

1. 07/21/21 - Rescission of Directive Regarding Day Services for Consumers at High Risk for Serious Illness due to COVID-19
2. 07/22/21 – Guidance regarding Reimbursement for Transportation Services for Alternative Non-Residential Services.
3. 07/29/21 -Extension of Waivers, Modifications and Directives due to COVID-19.

4. Trailer Bill Language (TBL)

A summary of this year's TBL (SB 136) was provided to the members of this committee.

5. Self-Determination Program (SDP)

1. We are increasing the participation on this program. We currently have 55 certified budgets, 54 IPPs and 53 spending plans/fully transitioned, 3 IPPs and 2 spending plans in progress
2. We are in the early stage of developing the contracts for the entities who will support this program.

6. Community Engagement

1. The Town Hall for this month took place on July 22nd. Topic: Vaccine Equity. Information was provided by a nurse, member of John Hopkins

Medicine.

2. August Town Hall will be regarding Transition Services.
3. A National Core Indicators presentation will take place at the next Board Meeting on August 11th.
4. We are also putting together the schedule regarding the public meetings to discuss our Performance Contract.

VI. Board Meeting Agenda Items

- A. Minutes of the July 28th Meeting

VII. Announcements / Information Items

Ana Quiles received notification that the school district will allow independent study. They are looking at the rest of the school districts doing the same.

In regards to SDP, Ana informed this committee that there is an orientation and informational meeting. The orientation meeting is required in order to start the SDP process.

- A. Next Meeting: Wednesday, August 25th at 7:00 pm

VIII. Adjournment

Lety adjourned the meeting at 11:08 pm


Submitted by,

Liliana Windover

Liliana Windover
Executive Administrative Assistant

[ecmin_jul28_2021]



	WHISTLEBLOWER – NLACRC EMPLOYEES AND BOARD MEMBERS		
	POLICY & PROCEDURE		
Category: ORG-MISC	Effective Date: August 29, 2009	Version No.: 4	Revision Date: September 3, 2020

REGIONAL CENTER WHISTLEBLOWER POLICY FOR NLACRC EMPLOYEES AND BOARD MEMBERS

This policy is adopted to comply with the Department of Developmental Services (DDS) Regional Center/Employee and Board Member Complaint Process Filing and Contact Information Guidelines. Accordingly, NLACRC has adopted this policy for complaints by Employees and Board Members.

1. General

This policy is to provide a guide and structure to assist any NLACRC employee or board member who wishes to report any perceived improper regional center activity and/or improper vendor/contractor activity and be protected from retaliation when doing so. As set forth herein, a whistleblower is an employee or a member of the Board of Trustees of the Center (hereinafter referred to as the “trustee”), who in good faith¹ reports any “improper regional center activity” and/or “improper vendor/contractor activity” committed by an employee, a trustee, or a vendor/contractor.

Whistleblower complaints, for purposes of this policy, are defined as the reporting of an “improper regional center or vendor/contractor activity.”

An “improper regional center activity” means an activity by a regional center, or an employee, officer or board member of a regional center, in the conduct of regional center business, that is a violation of state or federal law or regulation; violation of contract provisions; fraud or fiscal malfeasance; misuse of governmental property or constitutes gross misconduct, incompetency, or inefficiency.

An “improper vendor/contractor activity” means an activity by a vendor/contractor, or an employee, officer, or board member of a vendor/contractor, in the provision of State funded services, that is a violation of a state or federal law or regulation; violation of contract provisions; fraud or fiscal malfeasance; misuse of government property; or constitutes gross misconduct, incompetency, or inefficiency.

¹ Here, the term “good faith” shall be deemed to contain the same meaning as California Labor Code §1102.5, which protects employees who disclose reasonably based suspicions of illegal activity.

<p align="center">WHISTLEBLOWER – NLACRC EMPLOYEES AND BOARD MEMBERS (cont'd)</p>	<p align="center">Version No. 4</p>	<p align="center">Revision Date: September 3, 2020</p>
<p align="center">Category: ORG-MISC</p>		

NLACRC’s Whistleblower policy protects employees and the trustees from any form of retaliation for the good faith reporting of perceived improper activity committed by employees, the trustees or any other person. In short no adverse action will be taken against the person filing the complaint simply because a complaint has been filed. Employees and the trustees are expected to adhere to the highest standards of business and personal ethics in discharging their duties and responsibilities. As employees and representatives of NLACRC, we are obligated to comply with all applicable laws and regulations with honesty and integrity.

2. Persons Permitted to File Complaints

This policy applies to reports of improper activity by all NLACRC trustees and NLACRC employees, including employees in the San Fernando Valley, Antelope Valley, and Santa Clarita Valley offices.

3. Responsibility and Obligation to Comply with Policy

It is the responsibility of all employees and all trustees to comply with this policy and to report perceived improper activity to the Center’s Compliance Officer.

4. Procedure For Filing a Complaint

4.1 To make a complaint, contact the Compliance Officer. The Compliance Officer is either the Chief Organizational Development Officer, or, if the complaint involves the Chief Organizational Development Officer, then the Executive Director. Also, as a separate option, a complaint may be made directly to DDS, the Board of Trustees or the Board’s Executive Committee. The Compliance Officer or the Board of Trustees will notify the sender and acknowledge receipt of the complaint within five (5) business days. All reports will be promptly investigated and appropriate corrective action will be taken by NLACRC if warranted by the investigation.

<p align="center">WHISTLEBLOWER – NLACRC EMPLOYEES AND BOARD MEMBERS (cont'd)</p>	<p align="center">Version No. 4</p>	<p align="center">Revision Date: September 3, 2020</p>
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a. **North Los Angeles County Regional Center**

An individual who wishes to file a complaint with Human Resources may contact:

- Chief Organizational Development Officer
Phone: (818) 756-6206
Fax: (818) 756-6440
Email: whistleblower@nlacrc.org

9200 Oakdale Avenue, Suite 100
Chatsworth, CA 91311

b. **Board of Trustees, Executive Committee or Specific Officer of the Board**

To make a complaint to the Board of Trustees, the Board's Executive Committee, or to a specific officer of the board (President, Immediate Past President, 1st Vice-President, 2nd Vice President, Treasurer, or Secretary), the contact information is as follows:

- Board of Trustees or Board of Trustees Executive Committee
(Please specify what officer of the Board of Trustees you wish to send your complaint to, if applicable.)
Phone: (818) 756-6118
Fax: (818) 756-6140

9200 Oakdale Ave, Suite 100
Chatsworth, CA 91311

<p align="center">WHISTLEBLOWER – NLACRC EMPLOYEES AND BOARD MEMBERS (cont'd)</p>	<p align="center">Version No. 4</p>	<p align="center">Revision Date: September 3, 2020</p>
<p align="center">Category: ORG-MISC</p>		

c. **Department of Developmental Services (DDS)**

A complaint may be filed with DDS by contacting:

- Community Services Division
Phone: (916) 651-6309
Fax: (916) 654- 3641

1600 9th Street, Room 340 (MS 3-9)
Sacramento, CA 95814

4.2 NLACRC requires a clear and concise statement of the alleged improper activity and any evidence you have to support the allegation. NLACRC encourages employees and board members to notify the Compliance Officer in good faith when they have reason to believe that any “improper regional center activity” and/or “improper vendor/contractor activity,” as those terms are defined in part 1 of this policy, has occurred.

If you do not provide a name or other information (witnesses or documents) that clearly identifies the person you are alleging has engaged in improper activity, and the regional center where that person works or is a board member, we may not have sufficient information to investigate. Copies of documents, rather than originals, should be submitted as they cannot be returned.

Although complaints may be filed anonymously, it is extremely difficult and often impossible to investigate if insufficient information is provided and we have no means to contact you to gather basic facts. In such cases, NLACRC may not be able to effectively investigate the allegations.

4.3 The Compliance Officer shall immediately notify the Executive Committee of any such complaint and work with the committee until the matter is resolved. The Executive Committee shall address all reported complaints of improper activity or suspected improper activity as outlined in the above policy.

4.4 The Executive Committee has the authority to seek an appropriate impartial party (such action should be coordinated with the center’s corporate counsel), to investigate any suspected improper activity and to make recommendations to the Executive Committee relative to appropriate corrective action. For the

<p align="center">WHISTLEBLOWER – NLACRC EMPLOYEES AND BOARD MEMBERS (cont'd)</p>	<p align="center">Version No. 4</p>	<p align="center">Revision Date: September 3, 2020</p>
<p align="center">Category: ORG-MISC</p>		

purpose of this policy, an impartial party is defined to include an arbitrator, organizational ombudsman, investigator, or mediator.

5. **Policy When Complaints Are Filed**

- 5.1 For this policy, the Compliance Officer is the Chief Organizational Development Officer. The Executive Director will serve as the Compliance Officer in the event the alleged or suspected improper activity involves the Chief Organizational Development Officer. Also, as a separate option, a complaint may be made directly to the Board of Trustees or the Board’s Executive Committee.

- 5.2 The center encourages employees and trustees to notify the Compliance Officer in good faith when they have reason to believe that any “improper vendor/contractor activity” or “improper regional center activity,” as those terms are defined in part 1 of this Policy, has occurred.

- 5.3 No employee or trustee who in good faith reports improper activity shall suffer harassment, retaliation, or adverse employment consequence. In short no adverse action will be taken against a person filing a complaint, simply because a complaint has been filed. This Whistleblower Policy is intended to encourage and enable employees and trustees to raise serious concerns with the NLACRC, to permit NLACRC to address the concerns prior to seeking resolution outside the center.

- 5.4 Improper activity violations or suspected violations may be submitted on a confidential basis by the complainant or may be submitted anonymously. In accordance with Section 7 below, reports of violations or suspected violations will be kept confidential to the extent possible, consistent with the need to conduct an adequate investigation, or to comply with other laws and obligations.

- 5.5 The Compliance Officer responsible for investigating and resolving all reported whistleblower complaints, shall advise the Executive Director and the Board of Trustee’s Executive Committee of each complaint that is filed, and the ongoing progress of the investigation. The Compliance Officer is required to report to the Executive Committee at least annually on compliance activity. In addition, the Compliance Officer or the Board of Trustees will notify the sender and acknowledge receipt of the complaint within five (5) business days. All reports will

<p style="text-align: center;">WHISTLEBLOWER – NLACRC EMPLOYEES AND BOARD MEMBERS (cont'd)</p>	<p style="text-align: center;">Version No. 4</p>	<p style="text-align: center;">Revision Date: September 3, 2020</p>
<p style="text-align: center;">Category: ORG-MISC</p>		

be promptly investigated and appropriate corrective action will be taken by NLACRC if warranted by the investigation. The Compliance Officer responsible for investigating and resolving all reported whistleblower complaints shall advise the Executive Director and Board of Trustee’s Executive Committee of each complaint that is filed, and ongoing progress of the investigation. The Compliance Officer is required to report to the Executive Committee at least annually on compliance activity.

6. This Policy is Consistent with the State’s Directive Entitled “Department of Developmental Services Whistleblower Complaint Process,” dated July 28, 2010

To comply with the DDS Directive dated July 28, 2010, this policy will:

- 6.1 Allow for multiple employees within the regional center to be available to accept complaints. More specifically, the Compliance Officer is the Chief Organizational Development Officer, except that if the complaint involves the Chief Organizational Development Officer, the Compliance Officer is the Executive Director. Also, complaints may be made directly to the Board of Trustees President, or to DDS.
- 6.2 As noted in 6.1 above, allow direct access to the Board of Trustees President for the purpose of filing complaints.
- 6.3 Protect any person making a complaint from retaliation. More specifically, the regional center will not retaliate against any complainant.
- 6.4 Follow the Regional Center procedure set forth in part 5 above to investigate and take appropriate action on complaints, including complaints of retaliation.
- 6.5 Ensure complainant confidentiality as provided in Section 7 of this Policy, consistent with the State’s Whistleblower Policy, including consumer health and safety.
- 6.6 Provide for the notification of employees, board members, consumers/families, and vendors community of the existence of both the regional center and the State’s Whistleblower policy within thirty (30) days of the effective date of the regional center’s policy and annually thereafter.

<p align="center">WHISTLEBLOWER – NLACRC EMPLOYEES AND BOARD MEMBERS (cont'd)</p>	<p align="center">Version No. 4</p>	<p align="center">Revision Date: September 3, 2020</p>
<p align="center">Category: ORG-MISC</p>		

In addition, NLACRC will ensure that this Whistleblower Policy will be posted on the regional center’s website within thirty (30) days after being adopted.

7. Confidentiality

NLACRC will do everything possible to maintain the confidentiality of a complainant making a whistleblower complaint. However, in the rare circumstances where NLACRC is unable to maintain confidentiality due to its statutory responsibilities (including ensuring the health and safety of consumers and regional center contract compliance), or due to its need to address the improper activity, NLACRC will attempt to inform the complainant of its need to disclose information prior to releasing identifying information. Additionally, the identity of the complainant may be revealed to appropriate law enforcement agencies conducting a criminal investigation.

8. Notification and Dissemination of Policy

NLACRC will provide for the notification of employees and board members, of the existence of this policy within thirty (30) days of the effective date of the policy, and annually thereafter.

In addition, NLACRC will ensure that the regional center’s Whistleblower Policies are posted on the regional center’s website within thirty (30) days after being adopted.

ACKNOWLEDGMENT AND AGREEMENT TO COMPLY

By signing below, I acknowledge that I have read and understand the Whistleblower – NLACRC Employees and Board Members Policy and Procedure. I agree to comply with the standards and rules outlined in this document, and understand that compliance with this policy and procedure is a condition of employment and Board Membership at NLACRC.

Employee or
Board Member Signature: _____ Date: _____

Printed Name: _____ Location (For
Employees Only): _____

North Los Angeles County Regional Center
Government & Community Relations Committee Meeting Minutes
July 21, 2021

Draft

Present: Nicholas Abrahms, Christina Cannarella, Leticia Garcia, Gabriela Herrera, Sharoll Jackson, Jennifer Koster, Jeremy Sunderland, Alma Rodriguez and David Coe – Committee Members
Angelina Martinez, Jennifer Siguenza – Guest Board Member
Orli Almog – Vendor Advisory Committee Representative
Michelle Heid – Legislative Educator
Ruth Janka, Michele Marra, Kim Rolfes, and Jesse Weller, Jennifer Williamson, Sara Iwahashi, Sandra Rizo, and Ana Maria Parthenis-Rivas – Staff Members

Absent:

I. Call to Order & Introductions

Michele Marra, called the meeting to order at 8:06 p.m. and introductions were made.

II. Public Input

Angelina Martinez – Shared information about the American Rescue Plan.

III. Consent Items

A. Approval of Agenda

M/S/C (A. Martinez/C. Cannarella) To approve the agenda as modified. Modification: Section IV, Committee Business B.6., change FY21-22 Legislative Priorities Board Approved and add C.1. Disability Community Organization, Service Provider, and Elected Representative Visit Policy.

B. Approval of Minutes from the May 19, 2021 Meeting

M/S/C (N. Abrahms/G. Herrera) To approve the minutes as presented.

IV. Committee Business

A. Volunteer to Serve as Committee Chair
J. Sunderland volunteered.

M/S/C (G. Herrera/C. Cannarella) for Jeremy Sunderland to serve as Committee Chair.

B. Annual Committee Orientation

M. Marra provided an overview of the following topics:

1. Policies & Procedures
2. Legislative Platform Guiding Principles
 - a. **Action:** Add “consumers” to the sentence which states: “promote a system in which [consumers and] family supports” to the Legislative Platform Guiding Principles. This revision will be brought before the board.
3. Board Recognition Policy & Application
4. Board Audit Section
5. Critical Calendar FY 2021-22
6. Board Approved Legislative Priorities for FY21-22

C. Review Board’s Disability Community Organization, Service Provider, and Elected Representative Visit Policy Framework for Strategy and Implementation

M. Marra provided an overview of the Board’s Disability Community Organization, Service Provider, and Elected Representative Visit Policy.

Action: Include more expansive reference to building relationships.

D. Legislative Update

S. Iwahashi and M. Heid provided updates on the below topics.

1. Legislative Town Hall
 - a. **Action:** Resend the Legislative Town Hall survey to our community, with the understanding that it will be in topic specific email blasts, announced at our upcoming Town Hall and advertised in our English and Spanish Facebook pages.
2. Legislative Academy
3. Legislative Bills
4. Legucator Report
5. Grassroots visits

E. Social Media

1. Human Interest Stories

J. Williamson provided an overview of the Human Interest Stories.

Documents drafted with copyright and HIPAA attorneys will be shared at next committee meeting.

Action: J. Williamson will check with attorneys the example “I have autism, I work as an animator at Disney”, can be used and not violate any HIPAA or privacy laws

2. Facebook Analytics

a. Facebook Live Broadcast update

S. Iwahashi provided an update on Facebook Live.

A recommendation was made to use information on our Facebook and Twitter accounts on our LinkedIn account.

F. NLACRC Consumer and Family Guide Update

S. Iwahashi provided an update on the Consumer and Family Guide.

G. Business Organizations

S. Iwahashi provided an update on business organizations. At the last committee meeting, the committee recommended approving membership to the Antelope Valley Hispanic Chamber of Commerce.

Action: This recommendation will be brought to the Board.

It was briefed that we have not had any response from the Latino Business Alliance and the African American/Black Chamber of Commerce. Ruth shared that she has a contact at the Latino Business Alliance and will reach out. M. Marra recommended that we touch bases with Theresa Quarry (FFRC) to identify any African American/Black business organizations and their contact information.

H. Calendar of Events

Sara shared a list of possible online agencies and websites to share NLACRC's calendar (including, but not limited to, Peach Jar and other sites used by school districts). It was identified that this would not reduce the digital divide, since these sites are online.

Action: Public Information will develop proposal to share physical calendars of events/event flyers with the community in an effort to reduce the digital divide.

This proposal will be shared with the committee at the next committee meeting

I. Cultural awareness/appreciation posts

M. Marra briefed the cultural awareness/appreciation plan with the calendar of days/months

Action: M. Marra to add Cesar Chavez March holiday.

J. ARCA Grassroots Day training survey

The survey results were reviewed and overall the consensus was everyone found the training helpful.

V. Board Meeting Agenda Items

A. Minutes of the July 21st Meeting

VI. Announcements / Information / Public Input

- A. Next Meeting: Wednesday, August 18th at 7:00 p.m.
- B. C. Cannarella asked about saved chat

VII. Adjournment

The meeting was adjourned at 10:30 pm.

Submitted by:



Ana Maria Parthenis-Rivas
Executive Assistant

[gcrmin_jul21_2021]



Community and Legislative Educator Report 7/2021

Highlights of the 2021/2022 State Budget

The budget process for the 2021/2022 budget year has been different than in previous years for a variety of reasons including the winding down of the public health emergency, unexpected budget surplus, and the recall effort. The Legislature met its constitutional deadline of passing a budget bill by midnight on June 15th by passing a barebones budget lacking many of the details that were still being negotiated between the Legislature and the Governor.

Negotiations have continued through July with some of the budget trailer bills being discussed in Senate and Assembly committee hearings. Budget trailer bills have continued to be released by the legislature into July providing details of the budget negotiations of the budget deal reached by the Governor and Democratic legislative leaders on June 25th. Budget trailer bills (often referred to as trailer bill language or TBL), trail the main budget bill and provide the legislative changes needed to implement the budget. The Governor signed the main budget bill on June 28th and is expected to sign all of the trailer bills related to the budget that was finalized on June 25th.

The Legislature advocated for many of the changes the developmental disability community has sought over the past 10+ years, some of which were results of the cuts made due to the 2008 recession. The highlights include a 5-year phase in of the provider rate study, restoration of social recreation and camping services, provisional eligibility for Lanterman Act services for some children ages 3 and 4, continuation of the provider supplemental rates, and elimination of the Uniform Holiday Schedule.

- **Full Funding for Service Coordination** - \$61.8 million to fully fund service coordination across the state and bring caseload ratios down to meet federal requirements.
- **Developmental Services Provider Rate Study** - Phases in an ongoing \$1.2 billion to fully phase in the rate study provider increases over a five-year period. Implementation of rate increases, based on rate models that were included in the rate study submitted to DDS with the inclusion of a quality incentive program to improve consumer outcomes, service provider performance, and the quality of services. States the intent of the Legislature that, effective July 1, 2025, rates will be uniform within service categories and adjusted for geographic cost differentials, including differentials in wages, the cost of travel, and the cost of real estate. The 2021 Budget Act provides \$89.8 million in 2021-22, \$346.1 million in 2022-23, \$678.7 million in 2023-24, \$706.1 million in 2024-25, and \$1.233 billion (all General Fund) in 2025-26 for this investment.
- **Continued Provider Supplemental Rates and Elimination of the Uniform Holiday Schedule** - Repeals the suspensions that applied to (a) DDS supplemental rate increases provided in the 2019 and 2020 Budgets and (b) to the non-operation of the Uniform Holiday Schedule. The 2021 Budget Act includes \$173.7 million General Fund in 2022-23 and \$309.6 million General Fund on-going for these suspension eliminations.

- **Restoration of Social Recreation and Camping** - Repeals the suspension of regional centers' authority to contract for camping services, social recreation services, educational services for children 3 to 17 years of age, inclusive, and nonmedical therapies. The 2021 Budget Act provides \$19 million General Fund in 2021-22, \$31.6 million in 2022-23, and \$36.8 million General Fund in 2023-24 and on-going for this restoration of services.
- **Lanterman Act Provisional Eligibility Ages 3 and 4** - Expands the definition of developmental disability to include a child who is three or four years of age who does not have one of the developmental disabilities in the current definition, but has significant functional limitations in at least two of the specified categories of major life activity, as determined by a regional center and as appropriate to the age of the child. Requires that a child who is provisionally eligible be reassessed for continued eligibility for regional center services at least 90 days before turning five years of age. The 2021 Budget Act includes \$23.8 million ongoing General Fund to provide children aging out of Early Start provisional Lanterman service eligibility up to age five.
- **Community Navigator Program** - establishes a community navigator program to promote the utilization of generic and regional center services. Requires a family resource center that receives funding pursuant to those provisions to report to DDS and for DDS to post those reports on its internet website by November 1, 2022. The 2021 Budget Act includes \$3.2 million General Fund for this effort.
- **Direct Service Professional Training and Certification** - Requires DDS to develop and implement enhanced direct service professional training that promotes services that are person centered and culturally and linguistically sensitive, and that improves outcomes for individuals with intellectual and developmental disabilities. The 2021 Budget Act includes \$2.9 million General Fund in 2021-22 to establish a training and certification program for direct service professionals tied to wage differentials. The program aims to reduce staff wage inequity, stabilize service access, and professionalize and diversify the workforce. Beginning in 2023-24, ongoing costs increase to \$51 million General Fund.
- **Implicit Bias Training** - Requires that the 21 Regional Centers implement ongoing implicit bias training toward enhancing service access and equity in the developmental services system. Requires all the regional center personnel to comply with the implicit bias training requirements, and additionally applies this requirement to regional center contractors involved in intake and assessment and eligibility determinations. The 2021 Budget Act provides \$5.6 million General Fund in 2021-22 and on-going for the implicit bias training.
- **Enhanced Language Access and Cultural Competency Initiative** - The 2021 Budget Act provides \$10 million General Fund in 2021- 22 and on-going to support and promote language access and cultural competency across the Regional Center system, specifically funding multi-language orientations, culturally sensitive outreach efforts, and translation services for persons served and their families who are non-English speaking.
- **Wage Differential for Bilingual for DSPs** - Requires DDS to establish and implement a system that promotes equity in access to services for regional center consumers by providing a pay differential to direct service professionals who can communicate in a language or medium other than English as part of their regular job duties. Specifies the various conditions for a direct service professional to meet in order to be eligible for the bilingual or multilingual differential. The 2021 Budget Act includes \$2.2 million General Fund in 2021-22 to create a differential for bilingual service provider staff. Beginning in 2023-24, ongoing costs increase to \$6.5 million General Fund.

- **Office of the Self-Determination Program Ombudsperson** - The 2021 Budget Act includes \$1 million General Fund in 2021-22 and on-going to establish an Office of the Ombudsperson for the Self-Determination Program.
- **Paid Internship Program Modifications** - Modifies the paid internship program by replacing the \$10,400 earnings cap with a 1,040 hours cap per year, and establishes incentive payments for regional center service providers who place individuals in paid internship opportunities. Additionally, doubles the incentive payments to service providers for placing an individual into competitive integrated employment if the individual maintains employment for specified milestones, effective July 1, 2021, until June 30, 2025.
- **Increase Competitive Integrated Employment** - Requires DDS with the Department of Rehabilitation (DOR) to establish a program to increase pathways to competitive integrated employment that meets specified requirements.
- **Medi-Cal at 50+, Regardless of Immigration Status** - Provides ongoing funding growing to \$1.3 billion to expand Medi-Cal eligibility to all income eligible Californians 50-plus years of age, regardless of immigration status.
- **SSI/SSP Legacy Cut Restoration** - Provides \$225 million in 2021-22 and \$450 million in 2022-23 to restore 50 percent of the remaining 2009 SSI/SSP grant cut, and anticipates the remaining 50 percent of the cut will be restored in the 2023-24 budget year. This restoration (combined with Governor's May Revision proposal) will increase the SSP grant by approximately \$36 per month for individuals and \$92 per month for couples.
- **Permanent Restoration of IHSS 7% Hours Cut.** Finally ends the legacy of 7% cut in in-home care services to elderly and disabled Californians. While the cut was restored in prior years, the threat of the cut remained by it being added to the list of program "suspensions" that would have automatically taken effect in future years.
- **Early Start Remote Services/Meetings** - Requires until June 30, 2022, if requested by the parent or legal guardian, an individualized family service plan meeting to be held by remote electronic communications and would include remote electronic communications as a method of delivering services.
- **Remote Meetings Regarding Provision of Services** - Requires, until June 30, 2022, and if requested by the consumer or, if appropriate, if requested by the consumer's parents, legal guardian, conservator, or authorized representative, a meeting regarding the provision of services and supports by the regional center to be held by remote electronic communications.
- **Quality Incentive Program** - Requires DDS to implement a quality incentive program in order to improve consumer outcomes, service provider performance, and quality of services.
- **Navigator Program** - Requires DDS to establish a community navigator program and allocate funding for that program to promote the utilization of generic and regional center services. Requires DDS to consult stakeholders by August 31, 2021, and issue funding guidelines regarding the selection of community navigator programs. Requires a family resource center that receives funding pursuant to those provisions to report to the DDS, as specified, and for the DDS to post those reports on its internet website by November 1, 2022. The 2021 Budget Act includes \$3.2 million General Fund for this effort.

Electronic Visit Verification (EVV)

AB 133 is expected to be approved by the Legislature and signed by the Governor and makes the following changes to EVV.

- Authorizes DHCS to partner and contract with specified governmental entities, including the Department of Social Services, in order to comply with federal requirements on EVV.
- Requires Medi-Cal providers, who render services that are subject to EVV, to comply with requirements on EVV and authorizes DHCS and its partners to take prescribed action, such as a corrective action plan, against a provider's noncompliance with these requirements.
- Authorizes DHCS and its partners to enter into contracts to implement these provisions, and to implement these provisions by various means, including provider bulletins.

Legislative Calendar

June 15th – Budget bill passed by Legislature

July 14th - Second House Policy Committee Deadline

July 16th-August 16th – Summer Recess

August 27th - Second House Fiscal Bill Deadline

September 10th – Last Day of Session

October 10th – Last day for Governor to act on bills passed by the Legislature

January 3rd, 2022 – Legislature reconvenes (2nd year of the legislative session)

DS Task Force

<https://www.dds.ca.gov/initiatives/ds-task-force/>

The DS Task Force provides guidance on the delivery of services to Californians who have intellectual and developmental disabilities. 42 individuals serve on the full DS Task Force while an additional 115 serve on the 5 Task Force Workgroups. Meeting information is available as well as the recording of the meeting at the website above.

Upcoming DS Task Force Meetings

DS Task Force Monthly Check-In

August 5th, 2021 9:00-10:30am

This meeting was previously planned for July 7th and was postponed

Register at: https://cal-dds.zoom.us/webinar/register/WN_KKJSxBEPRxuSDojvH4LoSg

After registering, you will receive an email with your link to join the webinar.

Summary of Recent DS Task Force Meetings

On May 19th, 2021 the DS Task Force & Community Stakeholder Budget Briefing was held to review the state budget process, highlight the proposed updates to the Governor's budget through the May revision, and provide updates on regional center funding and caseload information, and Self-Determination.

- Between January 2020 and January 2021 there was a significant decrease in regional center intake and assessment, primarily in Early Start cases (Birth to 35 months, down 13%). As of May 2021, all but 4 regional centers are back on pre-Covid trend with intake and assessment rates. Priority will be on child-find efforts and additional outreach to identify children who may be eligible for regional center services but may not have entered the system due to Covid-19, with a projection of an overall increase of 10% in total community caseload.

- It was noted that the Governor's January budget focused more on Covid-19 response, while the May revise is shifting toward a plan for recovery.
- Four key pillars of focus for DDS and the May revise included:
 - System capacity and enhancements, including supporting the DSP workforce with a career path, training and certifications leading to increased salary potential
 - Service access and equity, building upon the positive outcomes in the Disparity Grant program with additional efforts to disrupt inequities in service access with policy decisions
 - Safety net
 - Public health crisis response
- The Self-Determination services 3-year phase in period has come to an end, and there is an investment in the May revise to offer this to individuals statewide. The trailer bill language was not available at the time of this May 19th briefing. A separate briefing will be scheduled to go over the plan when it is released.
- There are currently 550 participants in the Self Determination program, 400 of those were brought through the process in the last 14 months. There has been a lot of evaluation and feedback as to how to better support individuals in getting and spending their plans. There is still a disparity of spending between our communities of color and families of consumers who are white. The May revise proposal has funds identified for transition supports for individuals having a hard time moving through the process.
- There is additional funding proposed for 60 Participant Choice Specialists in the state, to be trained by DDS to ensure standardized information sharing.

On June 4th, 2021 DDS held a presentation outlining the Home and Community Based Services (HCBS) Spending Plan which includes substantial investment to programs that serve California's most vulnerable including 35 initiatives in 5 categories across multiple departments.

- Workforce: Retaining & Building Network of Direct Care Workers - includes recruitment and retention for Direct Service Professionals (\$200 million), Employee Assistance for all DSPs (\$15 million), and Community Navigator/Implicit Bias Training (\$75 million one-time and \$11 million ongoing).
- HCBS Navigation - Individuals with Developmental Disabilities Resource Navigation Portal (\$7 million one-time and \$500 thousand ongoing)
- HCBS Transitions - Affordable Housing for Individuals with I/DD (\$100 million) and Rental Assistance to I/DD Consumers (\$50 million)
- Services: Enhancing HCBS Capacity & Models of Care - Family Home Agency (\$61.7 million), Coordinated Family Support Service (\$125 million and \$25 million ongoing), Reimagine Work Activity Programs (\$15 million), Enhanced Community Integration for Children and Adolescents (\$50 million), and Capacity Expansion for Deaf Community (\$15 million).
- HCBS Infrastructure and Support - System Improvement (\$256 million) and Ombudsperson Office and Restructure (\$20 million one-time and \$1.5 million ongoing).

For more information:

California's HCBS Spending Plan:

<https://www.chhs.ca.gov/wp-content/uploads/2021/06/HCBS-Spending-Plan-June-2021.pdf>

CHHS California Comeback Plan Fact Sheet

<https://cdn-west-prod-chhs-01.dsh.ca.gov/chhs/uploads/2021/05/CHHS-Californias-Comeback-Plan.pdf>

Disability Thrive

<https://scdd.ca.gov/iddthrive/>

An initiative launched by DDS, to provide statewide training, support and resources on how to deliver and access alternative services for Californians with developmental disabilities during the COVID-19 pandemic. The goal of the initiative is to promote best practices in the delivery of services, and maximize opportunities for the IDD community to safely access and engage with their communities with a model that is responsive and adaptable to the changing pandemic environment and individual needs. Support topics for individuals with IDD and their families have included working with their service provider to get the alternative services needed, accessing available resources, and using self-determination for alternative services. Examples of support topics for providers, staff, and regional centers have included community reengagement and hybrid programming, informed decision-making, and innovating existing programs. The online resource library has access to internal and external resources.

Disability Thrive statewide webinar, Wed. May 26, 2021 “Strengthening Mental Health Through Empathy and Understanding” - Between the COVID-19 pandemic, economic recession, isolation and the loss of loved ones; feelings of anxiety, depression, distress and lack of sleep can sometimes be unavoidable. Supporting mental health is essential to disability services during this challenging and constantly changing times. Learn tools to recognize and support your mental health or that of an individual with developmental disabilities who your support. Discover the importance of taking time to nurture healing within ourselves and our communities through empathy and understanding. Guest speakers from UCP at the Inland Empire and Project Connect will share tools and resources to support mental health in our communities. Members of the disability community will also share personal experiences.

Past and Upcoming Webinars are available at: <https://scdd.ca.gov/iddthrive/>

CalABLE Accounts

CalABLE is a savings and investment plan offered by the state of California to individuals with disabilities. Eligible individuals, family, friends and employers can contribute up to \$15,000 a year without affecting the account beneficiary's public disability benefits. CalABLE account owners who work can contribute even more to their accounts. Best of all, earnings on qualified withdrawals from a CalABLE account are federal and California state tax-free.

As California legislation authorized another stimulus payment for SSI and SSDI recipients, the importance of CalABLE accounts for the disability community is even more evident. While the stimulus payments are not counted as income and do not affect benefit amounts, there is a limit on the amount of assets beneficiaries are allowed to hold (\$2,000 per individual, \$3,000 per couple). For the first 12 months, stimulus money is not counted as a resource. After 12 months, any remaining funds will be counted and could result in a suspension of one's SSI benefits. Depositing into a CalABLE account, however, will prevent monies up to \$100,00 from being counted against benefits.

Telehealth

During the public health emergency health plans have allowed increased use of telehealth for both commercial plans and Medi-Cal MCPs to provide services for the I/DD community. Trailer bill language (TBL) and several bills have been introduced that would continue these expansions for Medi-Cal beyond the public health emergency (PHE). The main telehealth bill is

[**AB 32 \(Aguiar-Curry\)**](#) which continues many of the expansions provided during the PHE and is the vehicle most likely to be passed as it has support of many legislators and expands telehealth further than TBL proposed by the Governor. Many in the I/DD community continue to advocate for access to telehealth. There has been wide support for continued access to telehealth services and demonstrated effectiveness for many individuals and families through the current health crisis.

2021 Recall of Governor Newsom

On September 14th, Governor Gavin Newsom will face a recall election to determine whether he shall be recalled and if so, to select a successor. Organizers of the recall campaign submitted 2.1 million signatures by the March 17, 2021, filing deadline. Secretary of State Shirley Weber's office found 1,719,943 signatures to be valid - more than the 1,495,970 necessary to trigger a recall election.

Voters will see two questions on their ballot. The first will ask whether Newsom should be removed and the second question will ask voters to choose a replacement in the event Newsom is removed from a list of candidates who have qualified for the ballot. The candidate list includes, former San Diego Mayor Kevin Faulconer, former Republican Congressman Doug Ose, reality TV star Caitlyn Jenner and John Cox, the 2018 Republican candidate for governor. Newsom himself is barred from being listed among the candidates who can be considered if the recall passes.

A majority vote is required on the first question for the governor to be recalled. The candidate with the most votes on the second question would win the election, no majority required. Should Governor Newsom survive the recall effort, he will face re-election in a statewide primary election in June 2022 followed by the general election in November 2022.

https://ltg.ca.gov/wp-content/uploads/sites/247/2021/07/Recall-Proclamation-LG-Eleni-Kounalakis_Certified.pdf

<https://www.latimes.com/california/story/2021-07-01/california-governor-newsom-recall-election-set-for-september>

American Recovery Plan Act (HR 525) and HCBS

American Rescue Plan Act (ARPA) of 2021 – Increased Home and Community-Based Services (HCBS) Spending Plan

On March 11, President Biden signed into law [ARPA](#), a COVID-19 relief package that includes a provision ([Section 9817](#)) to temporarily increase Medicaid's Federal Medical Assistance Percentage (FMAP) by 10 percent for spending on HCBS. The increased FMAP provides additional support for HCBS during the COVID-19 emergency.

On May 13, CMS provided [additional clarification and guidance](#) to assist states with implementing ARPA's HCBS section. CMS clarified that states may use the enhanced funding on spending for both HCBS and HCBS-related administrative activities. States have until March 31, 2024, to expend the enhanced FMAP funding. In order to receive the enhanced FMAP funds, CMS requires states to submit an initial HCBS spending plan and narrative, as well as quarterly updates. The ARPA HCBS spending plan was posted on the California Health & Human Services Agency [website](#) on June 3 for additional stakeholder feedback due on June 7 before submission to CMS by June 12.

The enhanced federal funding provides California with an opportunity to make substantial investments in the programs that serve our most vulnerable Californians, including populations that are aging, disabled, homeless, and those with severe behavioral health needs.

The proposed HCBS Spending Plan, includes 35 initiatives, totaling approximately \$3B in enhanced federal funding for the following categories of services:

- Workforce: Retaining and Building Network of HCBS Direct Care Workers
 - IHSS Specialized Upskilling Pilots
 - Direct Care (Non-IHSS) Workforce - Training and Stipends
 - IHSS HCBS Care Economy Payments
 - Non-IHSS HCBS Care Economy Payments
 - Increasing Home and Community-Based Clinical Workforce
 - Providing Access and Transforming Health (PATH) funds for Homeless and HBCS Direct Care Providers
 - Medicare Partnerships and Shared Savings on Supplemental HCBS Benefit Services
 - Traumatic Brain Injury (TBI) Program
 - Developmental Services Workforce Investment
 - Community Navigator/Implicit Bias Training
- HCBS Navigation
 - No Wrong Door System/Aging and Disability Resource Connections (ADRCs)
 - Dementia Aware and Geriatric/Dementia Continuing Education
 - Caregiver Resource Centers
 - Individuals with Developmental Disabilities Resource Navigation Portal
 - Emergency Department HCBS Connections Toolkit
 - Mental Health First Aid in Schools and Back-to-School Toolkit
- HCBS Transitions
 - Community Based Residential Continuum Pilots for Vulnerable, Aging, and Disabled Populations
 - Eliminating the Assisted Living Waiver Waitlist
 - Expanding Capacity of Independent Living Centers
 - Housing and Homelessness Incentive Program
 - Affordable Housing for Individuals who have IDD
- Services: Enhancing HCBS Capacity and Models of Care
 - Nursing Home Recovery & Innovation
 - Alzheimer's Day Care and Resource Centers
 - Adult Family Homes for Older Adults
 - Family Home Agency
 - Coordinated Family Support Service
 - Reimagine Work Activity Programs
 - Enhanced Community Integration for Children and Adolescents
 - Capacity Expansion for Deaf Community
 - Contingency Management
- HCBS Infrastructure and Support
 - Long-Term Services and Supports Data Transparency
 - Addressing Digital Divide for Adults with HCBS
 - System Improvements, Ombudsperson Office, and Restructure

The full plan can be found at the following link:

<https://www.chhs.ca.gov/wp-content/uploads/2021/06/HCBS-Spending-Plan-June-2021.pdf>

On June 11th, 2021 DDS sent an email to the community stating, they “do not plan to submit the spending plan for federal review and approval” by the June 12th deadline and instead requested an extension “to allow for additional conversation with our Legislative colleagues on the budget.” As of July 12th, there appears to be no additional information available regarding the status of the spending plan.

The Better Care Jobs Act

A new bill introduced in Congress is a pivotal and exciting step forward for disability service delivery systems that will help millions of people with disabilities and their families. The Better Care Better Jobs Act, if signed into law, would put into motion the proposals that were included in President Biden’s American Jobs Plan, including funding enhancements to states that focus on improving and expanding their disability service delivery systems. The bill would provide funding to expand access to vital services for people who are currently on waiting lists and create more and better direct care jobs for the paid workforce that provides these services.

<https://www.aging.senate.gov/imo/media/doc/Better%20Care%20Better%20Jobs%20Act%20One%20Pager%20SBS%2006223.pdf>

<https://homehealthcarenews.com/2021/06/better-care-better-jobs-act-seeks-permanent-fmap-bump-higher-wages-for-hcbs-workers/>

North Los Angeles County Regional Center
Government & Community Relations Committee

Legislative Platform Guiding Principles

“Persons with developmental disabilities have the same legal rights and responsibilities guaranteed all other individuals by the United States Constitution and laws and the Constitution and laws of the State of California” (Lanterman Developmental Disabilities Services Act, Section 4502).

The North Los Angeles County Regional Center is committed to supporting legislation that promotes and protects the spirit and intent of the Lanterman Act. As such, the center’s Government & Community Relations Committee will apply the following guiding principles to decide its position on new legislation.

Legislation must:

- Ensure equal protection, preserve service entitlement and promote access to service systems with appropriate and sufficient resources.
- Ensure inclusion into the community, including access to housing, education, employment, transportation and all public services.
- Promote a system in which [consumer and](#) family supports are individualized, family focused, family driven and in which families’ decision making for their children is respected and fostered.
- Promote locally determined, orderly development of needed supports and services that reflects an equitable distribution of resources among services and supports for persons with developmental disabilities.
- Promote quality community-based services and supports for persons with developmental disabilities and their family members.
- Promote and enable persons with developmental disabilities and their families to exercise self-determination, empowerment and choices.
- Promote and protect the rights of persons with developmental disabilities and their families.

[policy.gcr.princs] Adopted [August 19, 1998](#)[August 11, 2021](#)

North Los Angeles County Regional Center
Strategic Planning Committee Meeting Minutes
August 2, 2021

Draft

Present: Orli Almog (VAC), Marianne Davis, Michael Fernandez, Lety Garcia, Sara Iwahashi, Ruth Janka, Michele Marra, Lillian Martinez, Ana Quiles, Kim Rolfes, Curtis Wang, and Jesse Weller - Committee Members
Cheryl Blizin, Arsho Garlanian, Jennifer Williamson, and Ana Maria Parthenis-Rivas– Staff Members

Absent: Sharoll Jackson

I. Call to Order & Introductions

Marianne Davis, chair, called the meeting to order at 6:03 p.m. Introductions were made.

II. Public Input – There was no public input.

III. Consent Items

- A. Approval of Agenda
M/S/C (L. Garcia/C. Wang) To approve the agenda as modified.
- B. Approval of Minutes of May 3rd Meeting
M/S/C (A. Quiles/C. Wang) To approve the minutes as presented.

IV. Committee Business

- A. Annual Committee Orientation
 - 1. Committee Policies & Procedures
 - 2. Review Committee Critical Calendar
 - 3. FY 2021-22 Meeting Schedule
 - 4. Board Policy – Employment First**Action:** A. Quiles to send a draft of language for committee review.
- B. Volunteer to Serve as FY 2021-22 Committee Chair
M. Davis – Volunteered all in favor.
- C. Public Input and Public Participation during Committee Business
Defer to the Board to decide for all committees.

D. Performance Contract Updates

1. Draft 2022 Performance Contract with Data

R. Janka provided an overview of the Draft 2022 Performance Contract.

2. DDS Mid-Year Performance Contract Report

E. Community Integrated Employment/Paid Internship Program (CIE/PIP)

1. 4th Quarter CIE and PIP Activities
2. Statewide DDS CIE/PIP Summary Reports

F. 4th Quarter Report on Program Closures

G. 4th Quarter Report on New Vendorizations

H. Update on Health and Safety Waiver Exemptions

1. Submissions
2. Approvals

A. Garlanian provided an overview for items E-H

I. DEI Policy Steering Committee

M/S/C (L. Garcia/M. Davis) To create a separate Steering Committee to work on DEI policy. .

J. Strategic Plan Year 4 Update

M/S/C (R. Janka/L. Garcia) To develop a new 3-year strategic plan with the support of a facilitator.

K. New Strategic Plan and Retreat

V. Board Meeting Agenda Items

- A. Minutes of the August 2nd Meeting
- B. DDS Approval of 2021 Performance Contract
- C. 4th Quarter Report on CIE/PIP Activities
- D. 4th Quarter Report on Program Closures
- E. 4th Quarter Report on New Vendorizations

VI. Announcements / Information / Public Input

- A. Next Meeting: Monday, November 1, 2021 at 6:00 p.m.

VII. Adjournment

M. Davis adjourned the meeting at 8:24 pm.

Submitted by,



Ana Maria Parthenis-Rivas
Executive Assistant

[spcmin_aug2_2021]





North Los Angeles County Regional Center

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

Competitive Integrated Employment (CIE)

Description	1 st Quarter (July-September 2020)	2 nd Quarter (October- December 2020)	3 rd Quarter (January – March 2021)	4 th Quarter (April – June 2021)	Total
Consumer Authorizations	4	4	11	19	38
Vendors Approved	0	0	0	0	0
Payments Made	1	2	10	19	32

*CIE funds are paid to vendors after 30 days, 6 months, and 12 months of continuous employment of a consumer.

Paid Internship Program (PIP)

Description	1 st Quarter (July- September 2020)	2 nd Quarter (October- December 2020)	3 rd Quarter (January – March 2021)	4 th Quarter (April – June 2021)	Total
Consumer Authorizations (Using Auth Date)	31	10	15	20	76
Vendors Approved	0	0	0	0	0
Payments Made	10	22	27	47	106

*Service providers or employers are reimbursed up to a maximum of \$10,400 per year for wages and benefits paid to each consumer placed in an internship.

Summary of Program Closures by Program FY2021

4th Quarter

Fiscal Year	Service Codes	Service Description	Program Closure Date	Number Consumers Impacted	Reason for Closure	Zip Code	Service Address City
FY2020-2021	854	Home Health Agency	5/21/2021	0	DS1891 Non-Compliance	91423	Sherman Oaks
FY2020-2021	715	Dentistry	5/31/2021	5	Per Vendor Request- Retirement	91402	Panorma City
FY2020-2021	109	Supplemental Residential Program Support	6/1/2021	3	Per Vendor Request	91605	North Hollywood
FY2020-2021	915	Residential Facility Adult-SO	6/1/2021	3	Per Vendor Request	91605	North Hollywood
		Subtotal FY2020-2021 Q4	4	11			

**North Los Angeles County Regional Center
4th Quarter Report on New Vendorizations
FY2020-2021, Q4: 04/01/2021 - 06/30/2021**

Count	Approval Letter Signed	Vendor Name	Vendor #	Service Code	Service Description	Service Level	Area Served			Contract Effective Date
							SFV	SCV	AV	
1	7/2/2021	Workability LA, LLC	PL2056	55	Community Integration Training program		X			06/01/21
2	7/6/2021	Carousel Ranch	PL2014	55	Community Integration Training program			X		05/01/21
3	5/20/2021	Saleem, Mohammed dba ASTHA Home	PL2037	109	Supplemental Residential Program Support		X			3/4/2020
4	5/27/2021	Emily - Anne Center	PL2033	109	Supplemental Residential Program Support		X			3/4/2020
5	5/20/2021	Jordan, Willie dba Boots Better Living (Kildare)	PL2026	109	Supplemental Residential Program Support				X	3/4/2020
6	5/20/2021	Boots Better Living, LLC (Butterscotch)	PL2021	109	Supplemental Residential Program Support				X	3/4/2020
7	6/24/2021	Virginia Catalina	PL2024	109	Supplemental Residential Program Support		x			3/15/2020
8	7/1/2021	RSCR California (Desert Willow)	PL2055	109	Supplemental Residential Program Support				x	6/14/2021
9	6/18/2021	Estela Tomaneng dba Tomaneng Guest Home #3	PL2045	109	Supplemental Residential Program Support		x			3/4/2020
10	6/18/2021	Estela Tomaneng dba Tomaneng Guest Home #1	PL2046	109	Supplemental Residential Program Support		x			3/4/2020
11	7/1/2021	RSCR Desert Willow	PL2054	113	Specialized Residential Facility				x	6/14/2021
12	5/20/2021	Symphony Behavioral Health	PL1993	612	Behavior Analyst		x			3/1/2021
13	5/20/2021	Symphony Behavioral Health	PL1994	615	Behavior Management Assistant		x			3/1/2021
14	5/20/2021	Mi Voz: Speech & Language	PL2025	707	Speech Pathology					3/1/2021
15	7/15/2021	Dr. Jessica Gaines	PL2038	785	Clinical Psycholgist		X			6/1/2021
16	11/13/2021	Vibrant Therapy	HL0927	805	Infant Development Program	1:1 ratio		x		10/1/2020
17	11/13/2021	Vibrant Therapy	HL0928	805	Infant Development Program	1:2 ratio		x		10/1/2020
18	11/13/2021	Vibrant Therapy	HL0929	805	Infant Development Program	1:3 ratio		x		10/1/2020
19	6/24/2021	Village Touch	PL2036	896	Supported Living Services		x			5/1/2021
20	4/16/2021	David's ARF	HL0947	915	Adult Residential Facility	level 2-S (4 bed)	X			4/1/2021
21	4/16/2021	Paradiso Homes	HL0946	915	Adult Residential Facility	level 3-S (4 bed)	X			4/1/2021
22	4/8/2021	New Horizons (Reseda Ranch)	HL0913	930	Intermediate Care Facility	DD/Habilitative	x			11/1/2020
23	4/29/2021	Elwyn Wyse	PL2031	999	Start-up Funding	FY 2021 EBSH		X		4/1/2021
24	6/28/2021	Build	PL2047	999	Start-up Funding	FY 2021 HCBS	X			6/1/2021
25	7/1/2021	The Adult Skills Center	PL2049	999	Start-up Funding	FY 2021 HCBS	X			6/1/2021
26	7/1/2021	PathPoint	PL2051	999	Start-up Funding	FY 2021 HCBS	X			6/1/2021
27	6/29/2021	W&W Joint Ventures	PL2057	999	Start-up Funding	FY 2021 SRF	X	X	X	6/1/2021
28	6/29/2021	Elwyn California	PL2058	999	Start-up Funding	FY 2021 SRF	X	X	X	6/1/2021
29	6/30/2021	G & C Adult Residential Facility, Inc.	PL2059	999	Start-up Funding	FY 2021 SRF	X	X	X	6/1/2021

North Los Angeles County Regional Center
Vendor Advisory Committee Meeting Minutes
June 3, 2021

Draft

Present: Orli Almog, Erica Beall, Suad Bisogno, Catherine Carpenter, Cal Enriquez, Bob Erio, Kenny Ha, Sharoll Jackson (Chair), Dana Kalek, Jenni Moran, Alex Kopilevich, Don Lucas, Kevin Shields, and Nick Vukotic - Committee Members

Absent: Daniel Ortiz

Ruth Janka, Kim Rolfes, Jesse Weller, Evelyn McOmie, Arsho Garlanian, Josie Dauglash, Moné Masa, Royce Remelius, Chantelle Crown, Liliana Windover, Cheryl Blizin, and Nancy Salyers – NLACRC Staff

Approximately 107 Service Providers also participated on the Zoom call.

I. Call to Order & Introductions

Sharoll Jackson, VAC chair, called the meeting to order at 9:33 a.m.

II. Public Input

- Michele Linares from the Learning Grove and Chair of California Speech and Hearing Association shared that on November 30, 2020, California's Occupational Safety and Health Standards Board adopted Emergency Temporary Standards (ETS) to address the COVID-19 pandemic in the work setting. Since then, an advisory committee comprised of labor and management has met to negotiate updates to the ETS in order for the board to adopt final regulations. At their May 20 meeting, the board agreed to postpone the re-adoption of the emergency regulations until June 3, 2021, to allow for updated science and best practices changes to be made.

Michele provided an update regarding AB 2138. The Speech Language Pathology and Audiology Board has made minor changes stating that someone previously conviction cannot be used for stopping an individual for getting a license.

Michele also asked this committee to consider forming a temporary taskforce to start discussing the diagnostic profile, long-term effects and what type of generic resources we have for consumers who have had COVID-19.

- Victoria Berrey with the Family Focus Resource Center (FRC) informed this committee that every three years FRC has to develop a plan to be submitted to DDS in regards to the FRC plans to adjust the need of early start families. FRC has developed an Early Start professional's survey in order to obtain the community input. Victoria shared the following link for this survey:
https://docs.google.com/forms/d/e/1FAIpQLSccC4UzODISMkwtb1ChQUOYOn5FrYSo4tMI9UpoEq-uTZPMgQ/viewform?usp=sf_link

FRC has a number of webinars for early start families as well family support groups, IEP trainings and other events to take place during the month of June 2021. Victoria sharef the following link to obtain more information:
<https://www.csun.edu/family-focus-resource-center/events>

III. Consent Items

A. Approval of Agenda

M/S/C (N. Vukotic/S. Bisogno) to approve the agenda as presented.

B. Approval of Minutes from the May 6th VAC Meeting

M/S/C (N. Vukotic /D. Kalek) To approve the May 6th meeting minutes as presented.

IV. Executive Director's Report (Ruth Janka)

A. Legislation **Federal**

American Rescue Plan

\$1.9 trillion dollar stimulus package signed into law on March 11, 2021, provides State with a one-year increase in federal funding for Home Community Based Services by 10%, which translates into about \$600M for California.

Lanterman Coalition has developed one-time proposals to enhance, expand and strength services and supports in the developmental service system. DDS is currently finalizing the proposal due on Monday, June 7, 2021.

B. State/Local Update

TBL – Regional Center Operations Funding

The legislature is proposing to fund \$61M to the regional center system statewide to hire 921 Consumer Service Coordinators and 92 supervisors. In addition, the Legislature has a proposal of \$217M to begin implementing the rate study for FY 2021-22. There is also a proposal to restore social recreational and camp, educational services and non-medical services. Ruth encourages this committee to contact the Governor office to advocate for these proposals.

C. COVID-19 Related Updates

LA County Public Health COVID Update as of Sunday, May 04, 2021

1.9 cases per 100,000 and Positivity Rate: 0.7% (<) (7-day average)
Current County Risk Level: Tier 3 – (Orange Tier) – effective Thursday, May 6, Yellow Tier – this will increase capacity limits in several sectors, including restaurants, bars, amusement parks, indoor playgrounds, gyms, and other venues.

NLACRC COVID Update

We anticipate that the economic and community will be fully reopened by June 15, 2021. During the week of May 22nd, NLACRC reported 2 positive cases. Hospitalization in LA County has dropped below 300 cases.

California is promoting a campaign regarding vaccination. On June 15, 10 individuals who are fully vaccinated, will be selected to win \$1.5 million each. In addition, on June 4 and again on June 11, 15 people will be picked to receive \$50,000 each. The State will also reward individuals with \$50 grocery cards to encourage vaccinations.

DDS Directives

The Department of Developmental Services (DDS) extended the expiration dates for previous directives until July 2021. Information regarding these directives are posted in our website – www.nlacrc.org

RC Operations

The Learning Rights Law Center is putting together parent trainings starting on June 22nd during the 4th Tuesday of each month. Each month a new topic will be reviewed about the understanding of intellectual disabilities and its challenges. More information about these training will be posted in our website.

Town Hall

The June Town hall will be regarding Self Determination and it will take place on June 24th at 1:30 pm. June 7th is enrollment date and it will be open to any Lanterman consumers served by the regional center.

Technology Lending Library RFP

Westside Regional Center has a RFP for a Technology Lending Library to create access to technology for eligible individuals. More to come.

Intermediate Care Facilities (ICF) Rates

ICF temporary rate increases have been improved by the Centers for Medicare & Medicaid Services (CMS) for certain Medi-Cal rates, including rates for ICF/DDs, ICF/DD-Habilitative, and ICF/DD-Nursing effective March 1, 2020.

NLACRC Consumer's Statistics

Ruth shared the following consumer's statistics:

- San Fernando Valley: 18,085
- Antelope Valley: 7,224
- Santa Clarita Valley: 3,262

V. Deputy Director-Chief Financial Officer's Report (Kim Rolfes)

A. Fun Fact

Kim looked at the data as it relates to COVID-19 and shared what the center has been able to accomplish. As of May 11th, NLACRC has processed 11,778 COVID related authorizations to help consumers and families we served. The majority of authorizations were related to in-home support services, followed by delivery of PPE, early start, and 1:1 support in residential.

B. Financial Report

We received our B-3 Allocation for FY 2020-21 of \$27.8 million, which includes:

- \$697,000 OPS allocation which will help with new lease for Antelope Valley
- \$25.8M POS Base Allocation
- \$399,000 for HCBS Compliance Allocation
- \$900,000 for three Specialized Residential Facilities (SRF's)

The Center's total allocation is \$650.2 million of which \$60.2 million is for operations of the Center and \$590.0 million is for Purchase of Services (POS). The Center is currently projecting a POS deficit of \$636,777, with a Non-POS Surplus of \$23.1 million with a total POS surplus of \$22.5 million.

C. Statewide Regional Center (RC) POS Projection (FY2020-2021) B-2

Statewide regional centers are reporting an overall deficit of \$21.1 million. Kim reported this is a \$1.7 million increase in the statewide deficit as reported last month. There are eleven (11) regional centers reporting a surplus ranging from \$334,988 East LA Regional Center to \$23.1 million Redwood Coast Regional Center. Ten (10) regional centers are reporting a deficit ranging from \$1.2 million Central Valley Regional Center to \$72.5 million South Central Regional Center. The Center's deficit of \$2.7 million is ranked 6th of those regional centers reporting a POS deficit.

D. Special POS Check Runs

NLACRC will continue the special check runs. The next special check run is scheduled June 24th. There will not be a check run after June 24th because we are getting ready to do roll over.

E. Staffing Updates as of June 3, 2021

Human Resources: 566 employees filled out of 614 authorized positions as of end of April 2021. Annualized turnover rate is 0.12%.

26 CSC open positions; and 31 other positions; 57 total open positions.

G. Credit Line and NLACRC Insurance

We are in the process of securing our insurance effective July 1st. In addition, we will presenting to the Board of Trustees on June 9th our credit line of \$55 million in the event we see a delay on our cash advances.

H. FACT Transition, Stimulus Payments, P&I Balances

Kim shared a draft of Frequently Asked Questions (FAQ) with information about what to expect when the representative payeeship is transferred from NLACRC to FACT. This information will be posted in our website.

J. Loan Forgiveness and Payback Provisions

DDS issued guidelines last year on May 7th and June 15th regarding loan forgiveness. Once the loan is forgiven, 85% of this loan will be applied towards any absence billing the providers may have received through the regional center in order to avoid duplications. Providers can either get absence billing from the regional center or federal dollars, but they cannot get both.

VI. Chief of Program Services Report (Jesse Weller)

A. Town Halls

- Last month we had LAPD and the discussion was regarding our interaction with law enforcement and community
- We are looking for a town hall in July with the Sheriff's Department for the Antelope Valley
- On June 24th our town hall will be regarding Self Determination. This will be our kick-off campaign
- The town hall for August will be regarding Transition Age Services.

B. Consumer Services Manager

We have selected A Consumer Services Manager for our Branch Offices. This position will oversee the Santa Clarita and Antelope Valley Office.

We also continue our recruitment for our Aging Adult Specialist.

C. Vaccinations

- We continue our homebound efforts in collaboration with the Sherriff's department.
- Curative Mobile Clinic: We have an opportunity and an all-day event on Wednesday, June 9th to support individuals 12 y/o and older who cannot get vaccinations. Individuals get to choose between Pfizer, Moderna or Johnson & Johnson vaccines.

D. Placement Reviews

Communication will be coming out soon. NLACRC's Placement Review team has started to look all safety measurement and will be updating our community and residential service providers on our placements, face covering, vaccination, etc. More to come.

E. Self Determination

- As of June 1st we have 49 participants.
- Information meetings and orientations continue monthly.
- We finished 10 interviews for the RPFs. NLACRC will coordinate a meet and greet with the selected individuals in order for them to introduce their roles and functions.
- SDP Kick-off Campaign: Our Local Voluntary Advisory Committee received feedback regarding training that could be helpful for services providers or directed care staff regarding billing or services provided through this program. Dr.Weller encouraged this committee to provide feedback in the event training is needed for specific topics in order to make this program successful.

VII. Community Services Director's Report (Evelyn McOmie)

A. Residential Service Orientation

Enrollment is still opened and it will closed on Friday, June 4th by 5 pm. The information for the pre-requisite list is posted in the chat. Turn out is very low, but if it remains low, session two will be canceled and we will re-issue session three for the fall in late September early October.

B. Quality Assurance (QA)

QA is out in the field conducting un-announced site visits. QA will also be conducting screening question prior to entering the facility. If there is anybody in the facility under the weather, please notify QA, and visit will be re-scheduled.

C. Site Based and Residential Workgroup

This workgroup is meeting on June 10th to discuss return to date services. Email will be going out and it will be posted in our website.

NACRC is also working on opening our residential vendor provider meetings for all three valleys via zoom. Next meeting has been scheduled on July 23rd. An email blast will be sent regarding this meeting.

D. Independent Vendor Audit

A reminder to please submit your independent vendor audit report to requiredvendoraudits@nlacrc.org. The Annual review is required for entities receiving more than 500k and less than 2mil. For those entities receiving more than 2 mil the entity shall do an independent audit. Accounting sent notification to vendors back in September 2020 and Community Services has sent final notices. We will eventually be sending intent to terminate for those who have yet to submit.

E. Alternative Nonresidential Services.

- As the City/County is opening up and programs are returning to in-person services, we want to remind programs that if your agency receive transportation through Kiolis and/or STA, please notify R&D with 2-3 weeks' advance notice in order for them to begin to work on route plans.
- We are asking all programs including residential providers to communicate your plans on how you will implement return to service in the Community for individual you serve and their families.
- Reminder: Please communicate to Community Services any monumental changes to your program, such as primary contact, address, Tax ID, mailing address, key position in your organization, name change, as well as change of ownerships. Email us at Contract&Compliance@nlacrc.org.

F. Specialized Residential Facilities (SRF) Interviews

We received start-up funding for the amount of \$300,000. We are in the process of interviews 3 SRFs for individuals with special needs. We are planning to notify the selected entities by the end of next week.

G. Technology Lending RFP

Technology Lending RFP is posted in our website and. This RFP is hosted by Westside Regional Center in conjunction with 7 regional centers. For more information, please refer to our website.

H. Staff Announcements

- Evelyn announced the promotion of Stephanie Margaret as the Community Services Contract & Compliance Supervisor, effective June 7, 2021.
- Kimberly Johnson-McNeill, MSW was also promoted as Community Services Supervisor effective June 1, 2021.

I. Vendor Review Audit Compliance

Kim shared that on May 26th we received a letter from DDS regarding vendor independent review audits compliance with all the vendors that own independent audit reports for FY 2018-19 and FY 2019-20 and they are asking each regional center to put a plan on how we are going to ensure compliance for each vendor who owns an audit report. We will present our plan during our VAC in August 2021.

VIII. Legislative Report_(Michele Heid)

Some of the highlights Michele shared with this committee are as follow:

- The Governor's May Revises was released on May 14th
- Governor Newsom announced that California will have a one-time \$75 billion surplus for FY 2021-22.
- Legislators are in support of the proposal to increase service coordinators. ARCA is pressing for extra money (\$60 million General Fund) to hire 921 additional service coordinators.
- ARCA Grassroots Visits: 2021 members of the NLACRC community visited 10 of State Legislators.
- DS Task Force has continue to be active.
- Disability Thrive. This is an initiative launched by DDS to provide statewide training, support, and resources on how to deliver and access alternative services for Californians' with developmental disabilities during the COVID-19 Pandemic.

- The American Recovery Plan Act was approved on March 11, 2021 enacting a 19 trillion COVID-19 relief package.

Refer to the following link for addition information:

https://drive.google.com/file/d/1GMGSQFrHm8bDJ4_xI-KSC_vuciqEuIhx/view?usp=sharing

Sharoll encouraged this committee to reach out to our Legislators to thank them for their support and to keep those relationships warm and connected.

IX. Committee Business

No committee Business

X. Agenda Items for the Next Board Meeting

The committee identified the following item for their section of the June 9th board meeting agenda:

- A. Minutes of the June 3rd Meeting.

XI. Announcements/Public Input

Sharoll wished everyone Happy Pride Month. Our community embraces humanity and being kind which makes us the leaders in the community to keep us real and connected. Sharoll thanked the members of this committee for all their work.

- A. Next Meeting: Thursday, August 5th at 9:30 a.m. (July is dark)

XII. Committee Work (The committee breaks into their workgroups)

- A. Early Start Services (Dana Kalek)
- B. School Age Services (Cal Enriquez)
- C. Adult Services (Suad Bisogno & Erica Beall)
- D. Legislative Issues and Advocacy (Sharoll Jackson)

XIII. Adjournment

Sharoll Jackson adjourned the meeting at 10:41 a.m.

Submitted by,

Liliana Windover

Liliana Windover
Executive Assistant

[vacmin_May6_2021]



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	- California Association of Rehabilitation Facilities
CAL-TASH	- The Association for Persons with Severe Handicaps
CARF	- 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	- Comprehensive Diagnostic Evaluation
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
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
ICF/DD	- Intermediate Care Facility/Developmentally Disabled
ICF/DD-H	- Intermediate Care Facility/Developmentally Disabled-Habilitative
ICF/DD-N	- Intermediate Care Facility/Developmentally Disabled-Nursing
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
IPP	- Individual Program Plan
IRC	- Inland Regional Center
ISP	- Individual Service Plan
KRC	- Kern Regional Center
LACHD	- Los Angeles County Health Department
LACDMH	- Los Angeles County Department of Mental Health
LACTC	- Los Angeles County Transportation Commission
LADOT	- Los Angeles Department of Transportation (City)
LAUSD	- Los Angeles Unified School District

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

- 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

Name: _____

Comments: _____

1. Did the meeting follow the agenda? Yes ___ No ___

2. Did the meeting begin as scheduled? Yes ___ No ___

3. Did the meeting end as scheduled? Yes ___ No ___

4. Did you receive written or verbal information about the issues on the agenda? Yes ___ No ___

5. Did the information received enable you to make informed decisions? Yes ___ No ___

6. Did 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 specify below)

7. Did you feel prepared to participate in the meeting? Yes ___ No ___

8. What would you like more information about?

