

Board of Trustees Meeting

Wednesday, October 12, 2022 6:30 p.m.

Via Zoom Technology

Revised Packet

NLACRC Board of Trustees Calendar Fiscal Year 2022-23

		~	October 2022	!~		
■ September						November ►
Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4 Yom Kippur (begins at sundown)	5 Yom Kippur (no work)	6 9:30 am Vendor Advisory Committee (full meeting) 3:00pm-4:00pm	7	8
			Nominating Committee Meeting	Consumer Advisory Committee Meeting		
9 Sukkot (begins at sundown)	10 Sukkot (no work)	11 Sukkot (no work)	5:30 pm Board Packet Review (Zoom)	13	14	15
	6:00 pm Whistleblower Policy & COI Board Training		6:30 pm Board Meeting (Zoom)			
16 Shemini Atzeret Simchat Torah (no work)	17 Shemini Atzeret Simchat Torah (no work)	18 Shemini Atzeret Simchat Torah (no work)	6:00 pm Consumer Services Committee	20 10:00am-2:00 pm ARCA Executive Committee Mtg.	21 10:00am-2:00 pm ARCA Executive Board of Directors Mtg.	22
			7:30 pm Government/Community Relations Committee			
23	24 6:00 pm Strategic Planning Committee Meeting	25	26 5:30 pm Post-Retirement Medical Trust Mtg. 6:15 pm Administrative Affairs Committee Meeting 7:45 pm Executive Committee Meeting	27	28	29
30	31 Halloween					

NLACRC Board of Trustees Calendar Fiscal Year 2022-23

		~ N	lovember 2022	~		
October Sun	Mon	Tue	Wed	Thu	Fri	December ► Sat
Can	Mon	1	2 11:00am-1:00 pm Consumer Advisory Committee Meeting	3 9:30 am Vendor Advisory Committee Meeting (break-out groups)	4	5
6	7 6:00 pm Strategic Planning Committee Meeting	8 6:00 pm Lanterman Developmental Disabilities Services Act Overview Board Training	5:30 pm Board Packet Review 6:00 pm Board Dinner (Zoom) 6:30 pm Board Meeting (Zoom)	10	11 Veterans Day (NLACRC closed)	12
13	14	15	16 6:00 pm Consumer Services Committee Meeting 7:00 pm Government/Community Relations Committee Meeting	17	18	19
20	21	22	23	24 Thanksgiving (NLACRC closed)	25 Day after Thanksgiving (NLACRC closed)	26
27	28	29	30 6:00 pm Administrative Affairs Committee Meeting 7:30 pm Executive Committee Meeting			

North Los Angeles County Regional Center Board of Trustees Meeting - Via Zoom Wednesday, October 12, 2022 6:30 p.m.

~ <u>REVISED AGENDA</u> ~

- 1. Call to Order & Welcome Ana Quiles, Board President
- 2. Housekeeping
 - A. Spanish Interpretation Available
 - B. Public Attendance (please note name in Chat)
 - C. Board Support Updates
- 3. Board Member Attendance Lizeth Chavez, Executive Administrative Assistant
- 4. Introductions
 - A. Suad Bisogno, VAC Representative Board Member
 - B. Arshalous Garlanian, Community Services Director
- **5. Public Input & Comments** (3 minutes)
- 6. Consent Items
 - A. Approval of Agenda (Page 4)
 - B. Approval of September 14th Board Meeting Minutes (Page 8)
- 7. Committee Action Items
 - A. Strategic Planning Committee Lety Garcia
 - 1. Approval of Policies and Procedures Revision (Page 19)
 - 2. Approval of Proposed Revision to ByLaws Articles VII, Section 11.a Composition (*Page 20*)
 - B. Administrative Affairs Committee David Coe
 - 1. W&W Joint Ventures-Diamond Care PL2119-109 (Page 21)
 - 2. The Nurture Collective PL2117-116 (Page 25)
 - 3. Proposed Procurement Policy Framework (Page 30)
 - 4. Board Expenditures
 - a. Approval of ARCA Alternate attendance to in-person meetings

- C. Consumer Services & Government & Community Relations Committee Andrew Ramirez and Jordan Feinstock
 - 1. Approval of Alternating Bi-Monthly Meeting Schedule for FY2022-23 (Page 31)
- D. Nominating Committee Lillian Martinez
 - 1. Vote for ARCA Delegate and Alternate Board Positions (Page 33)
 - 2. Approval of Board and VAC Recruitment Notices (Page 35)
 - 3. Approval of Proposed Revised Potential Interview Questions and Qualifications Appraisal Rating Sheets (Page 37)
 - 4. Approval of Proposed Board Member Self-Evaluation Form For Review (Page 42)
- E. Executive Committee Ana Quiles
 - 1. Approval of Conflict Resolution Plans for Rocio Sigala and Ana Quiles (Page 43)
 - 2. Approval of Revised Board and Committee List (Page 69)
 - 3. Approval of Assembly Bill 637 Proposal for Social Recreation FMS (Page 70)
 - 4. Approval of Revised Board Members Responsibilities Policy (Page 71)
 - 5. Approval of DRAFT California State Auditor Findings Response Letter (Page 72)
 - 6. Approval of Revised Executive Director Performance Evaluation Timeline Policy (Page 76)
 - 7. Approval of CY23 Performance Contract Ruth (Page 78)
- F. Vendor Advisory Committee Suad Bisogno
 - 1. Approval of VAC Committee Priorities for FY2022-23 (Page 106)
- G. Additional Action Items

Administrative Affairs Committee – David Coe

- 1. Approval of Contracts
 - a. Holwick Constructors, Inc. (Page 107)
- 8. Executive Director's Report Ruth Janka (Page 111)
- 9. Self-Determination Program (SDP) Report Gabriela Eshrati (Page 144)
- 10. Administrative Affairs Committee David Coe
 - A. Minutes of the August 31st (Page 150)

- B. FY2022-2023 Financial Report (Attachment #1)
- C. Monthly Human Resources Report (Page 158)
- D. Revised Organizational Chart (Page 159)
- E. First Off-Site Quarterly Meeting held on September 30th with the Executive Committee, next meeting will be on January 26, 2023

11. Association of Regional Center Agencies – Ruth Janka

A. August Meeting Report (Page 160)

12. Consumer Advisory Committee – Jennifer Koster

A. Minutes of the October 5th Meeting - *defer*

13. Consumer Services Committee – Andrew Ramirez

- A. Minutes of the August 17th Meeting (*Page 171*)
- B. No Meeting held in September due to Legislative Board Training
- C. Off-site Quarterly Meetings will be combined and held with the Government Community Relations Committee

14. Executive Committee – Ana Quiles

- A. Minutes of the August 31st Meeting (Page 177)
- B. HCBS Funding FY2021-2022 Compliance Services Agreement (Page 187)**
- C. Casa Fiscal, Inc. 315 & 316 SDP FMS (Page 188)**
- D. Board Resolutions Removal of Authorized Signer Jesse Weller (Page 196)**
- E. FY2022-23 Board Budget (Page 200)
- F. First Off-Site Quarterly Meeting held on September 30th with the Administrative Affairs Committee, next meeting will be on January 26, 2023

15. Government & Community Relations Committee – Jordan Feinstock

- A. Minutes of the August 17th Meeting (Page 201)
- B. No Meeting held in September due to Legislative Board Training
- C. Off-site Quarterly Meetings will be combined and held with the Consumer Services Committee

16. Nominating Committee – Lillian Martinez

- A. Redacted Minutes of the September 7th and 20th Meetings (Page 205)
- B. Redacted Minutes of the September 29th Meetings defer
- C. DDS Composition Requirement Update
- D. First Off-Site Quarterly Meeting will be held on October 20, 2022.

17. Post-Retirement Medical Trust Committee – Ana Quiles

A. Next Meeting October 26, 2022 at 5:30pm

18. Strategic Planning Committee – Lety Garcia

A. Minutes of the September 26th Meeting - *defer*

19. Vendor Advisory Committee – Suad Bisogno

- A. Minutes of the October 6th Meeting *defer*
- B. First Off-Site Quarterly Meeting will be held on

20. Old Business/New Business

- A. Board and Committee Meeting Attendance Sheets (Page 212)
- B. Board and Committee Meetings Time Report (Page 221)
- C. Updated Acronyms Listing (Page 223)
- D. Meeting Evaluation (Page 229)

21. Announcements/Information/Public Input

- A. Next Meeting: Wednesday, October 12th at 6:30pm
- B. Public Meeting Attendance (Page 230)
- C. FFRC Mamas Latinas Support Group, October 12th, 11:00 am
- D. Virtual Cafecito Entre Nos, October 13th, 11:00 am
- E. FFRC IEP Basic Workshop, October 14th, 11:00 am
- F. Parent Check-In & Chat Support Group, October 16th, 12:30 pm
- G. Filipino Support Group, October 17th, 6:30 pm
- H. NLACRC Self-Advocacy Group Meeting, October 18th, 10:45 am
- I. Virtual Aprendiendo Entre Nos/Learning Amongst Us: Transition Roadmap Between Age Groups including Services and What is available, October 20th, 10:00 am
- J. Virtual Town Hall: Parent Perspective–School Age Svcs, October 20th, 1:30 pm
- K. Cultivar y Crecer, October 28th, 6:30 pm

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

22. Adjournment



^{**} Due to the urgency of having this contract approved for service delivery the contract was approved by the Executive Committee on September 28, 2022 and September 30, 2022.

Minutes of Regular Meeting

of

North Los Angeles County Regional Center Board of Trustees

DRAFT

The Board of Trustees of North Los Angeles County Regional Center, Inc., a nonprofit corporation, held their regular board meeting via Zoom on **September 14**th, **2022**

Trustees Present	Guests Present	Staff Present
Ana Quiles	Jason Francisco- DDS	Ruth Janka
Alma Rodriguez	Isabel Romero – Interpreter	Dr. Jesse Weller
Brian Gatus	Nancy Gallardo - Interpreter	Vini Montague
David Coe	Jasmine Barrios- Minutes Services	Lizeth Chavez
Lillian Martinez	Suzanne Paggi	Lilliana Windover
Leticia Garcia	Ana-Paula Ferreira	Gabriella Eshrati
George Alvarado	Jeremy Sunderland	Lilliana Windover
Andrew Ramirez	Jen Pippard	Maddy Gonzalez
Cathy Blin	Lia Cervantes- Lerma	Cristina Preuss
Gabriela Herrera	Curtis Wang	Silvia Haro
Jennifer Koster	Karina Andrade - ARCA	Jazmin Zinnerman
Jordan Feinstock	Lori Walker - SDLAC	Erica Beall
Nicholas Abrahms	Ana-Paula Ferreira - IF/Consumer	Tiffani Jones
Rocio Sigala	Kimberly Bermudez - 24 Hour Home	Clarence Foster
Sharmila Brunjes	Care	Sheila King
Sylvia Brooks- Griffin	Diana Padilla-Garcia	
	Anthony Rodriguez - George Alvarado	
Trustees Absent	Mrs. Gardner	
Angelina Martinez	Amparo Dallas	
Suad Bisogno	Victoria Berry	
	Curtis Wang	
	Erica Beall	

1. Call to Order & Welcome - Ana Quiles, Board President

Ana called the meeting to order at 6:30 p.m.

2. Housekeeping

A. Spanish Interpretation Available

Ana informed attendees that instructions for Spanish Interpretation in are located the chat.

B. Public Attendance

Ana asked public attendants are to notate their name in the chat.

C. Board Support Updates

Ana reminded Board Members to submit monthly billing to Board Support in a timely manner. She also advised Members to revise their Zoom Names to their full name and "Board Member" so that Board Support to easily identify Members when moving to Executive Committee.

3. Board Member Attendance – Lizeth Chavez, Executive Administrative Assistant Lizeth Chavez took attendance of Board Members; a quorum was present.

4. Introductions

A. Cathy Blin, Board Member

Cathy is a current Board Member and also serves on the Consumer Services Committee as well as the Government & Community Relations Committee. She is a native of Los Angeles and shared information about her sister, Barbara who is an NLA Consumer. As Barbara's caregiver, Cathy has been involved with NLA for the past 40 years and has seen tremendous growth in support for individuals with developmental disabilities. She has degrees in Health Education and Health Administration. She started a manufacturing company which recently sold and allowed her to retire. She has been to 19 countries and interests include music, watercolor, ceramics, tennis

B. Robert Dhondrup, Public Information Manager

Robert serves as the Public Information Manager with NLA. He studied Political Science and History. He worked on policy legislation on the Labor Council in San Francisco and moved over to communications, working on housing organization advocacy. Recently, he was a manager for the US Census and work resulted in identifying millions of people that were missed in the previous census. As a child of immigrants, Robert is closely aligned with many Asian-American non-profit organizations in the community. He loves art, collecting lithographs, spending time with his wife and kids. Robert's role models include the Dali Llama and Cesar Chavez, noting their work on non-violent advocacy. Robert survived a house fire that required years of recovery which ultimately, opened his eyes to following his passions in life.

5. Public Input & Comments

Amparo Dallas stated that NLA has done a great job so far, but that there is a lack of doctors and nurses at county facilities. She stated this is a result of being short-staffed and lacking resources. She pointed out that in her area, specialized medical care requires driving miles away and asked the Board to assist on this issue.

Victoria Berrey, from Family Focus Resource Group, announced a few upcoming workshops on Respite Services. These workshops will take place on September 16th in English and September 23rd in Spanish via Zoom. Those who are unable to attend will be able to watch the recorded workshop on the Family Focus Resource Group's YouTube page. Topics for upcoming workshops include Symptoms of Depression and Special Needs Planning. The Resource Fair will be held at Cal State Northridge on October 16th.

Lia Cervantes-Lerma, from the State Council for Developmental Disabilities, is asking for feedback regarding legislative priorities. The *There Must Be a Law* contest, is for individuals to submit problems and solutions that they face in everyday life. More

information can be found on the SCDD website. In addition, state-wide trainings are continuing Mondays at 10 am with a focus on Special Education and IP Strategies.

Jeremy Sunderland, former Board Member, thanked the Board and NLA staff for their contribution to the community. As the parent of a consumer, he often wonders how his child will be taken care of in the future, but feels assured that they will be taken care of due to the incredible work that NLA is doing.

Curtis Wang, former Board Member, thanked the Board for their contributions and welcomed the new Board Members. He enjoyed his time serving on the Board and wishes good luck to all of the new Members.

6. Consent Items

A. Approval of Revised Agenda (Packet 1, Page 4)

M/S/C (And. Martinez/D. Coe) To approve the agenda as presented.

Ana Quiles would like to move Committee Action Item G: Nominating Committee, to Item E, shifting all other Committee Action Items downward on the agenda.

Ana would also like to separate items listed under Committee Action Item D: Consumer Services Committee. This would separate number 2 to 2 separate actions. Number 2: Approval of Welcome and Access Onboarding Policy and then to create Number 3: Ad-Hoc Committee.

M/S/C (And. Martinez/D. Coe) To approve the agenda as revised.

B. Approval of August 10th Board Meeting Minutes (Packet 1, Page 8)

M/S/C (C. Blinn/And. Martinez) To approve the Minutes as presented.

7. Executive Session

A. Union Negotiations

M/S/C (And. Ramirez/L. Martinez) To enter the Executive Session at 6:53 pm.

M/S/C (D. Coe/ L. Martinez) To exit the Executive Session at 7:07 pm.

8. Executive Director's Performance Evaluation - Clarence Foster

A. Evaluation Process and Evaluation Form (Packet 1, Page 8)
Each March, all eligible Board Members will submit an evaluation on the Executive Director's Performance as required by statute. The Executive Committee has

responsibility for the Executive Director's evaluation and establishing a contract negotiation committee. The Executive Director evaluation process is reviewed by the Board in September and after January 23rd, all eligible Board Members have 1 month to complete the evaluation. Clarence and the Human Resources team will send plenty of reminders to board members regarding the need to complete the evaluation form and will provide support to Board Members if needed.

Eligible Board Members are those who have been participating on the Board for more than 3 months; failure to submit a completed and signed evaluation by the scheduled date is considered as a resignation from the Board, unless granted an extension by the Board President. Any concerns related to the Executive Director's performance during the performance period should be brought to the Executive Committee in an Executive Session.

The Evaluation Form is comprised of 3 sections; Board Function, Center Operations and Center Representation/Community Support. There are 3 ratings for each section: Exceeds Expectations, Meets Expectations and Needs Improvement.

Sources of Information that can be used to assist in evaluations include; Executive Director's Reports, monthly financial reports, feedback relative to the performance-based contract, DDS feedback, ARCA reports, etc.

March will be the month where all evaluations are submitted and in April, legal counsel will produce a Summary Report. The Board President will receive the Summary Report and will appoint a Negotiating Committee, made up of 3 Board Members to oversee the evaluation and negotiate the ED Contract. The Board President will also receive information and recommendations from members, committees and to take action as needed directly, or by making recommendations to the Board.

B. Negotiating Committee - Ana Quiles

The Negotiating Committee will be comprised of herself, Leticia Garcia and Alma Rodriguez.

9. Committee Action Items

A. Approval of all Revised Critical Calendars – Ana Quiles (Packet 1, Page 20)

M/S/C (C. Blin/N. Abrahms) To approve all updates to the Critical Calendars.

- B. Administrative Affairs Committee David Coe
 - 1. Review of Board Contract Policy Revision (Packet 1, Page 30)

M/S/C (J. Koster/ And. Martinez) To approve the revision of the Board Contract Policy as revised.

C. <u>Consumer Advisory Committee</u>- Jennifer Koster

- Approval of Goals and Priorities for FY 2022-23 (Packet 1, Page 33)
 M/S/C (J. Koster/D. Coe) To approve the Goals and Priorities for FY 2022-23 as presented.
- 2. Approval of Training Presentation Schedule for FY2022-23 (Packet 1, Page 34)

M/S/C (C. Blinn/D. Coe) To approve Training Presentation Schedule as presented.

- D. Consumer Services Committee -Andrew Ramirez
 - 1. Approval of Committee Priorities for FY2022-23 (Packet 1, Page 35)

M/S/C (J. Koster/And. Martinez) To approve Training Presentation Schedule as presented.

2. Approval and Welcome and Access Onboarding Policy

M/S/C (C. Blinn/R. Sigala) To approve the Welcome and Access Onboarding Policy as presented.

3. Approval for the Ad-Hoc Committee

Dr. Jesse Weller explained that a Policy-Steering Committee is being created to create the Welcome and Access Onboarding Policy. This group will work with Consumer Services to develop this policy.

M/S/C (G. Herrera/ C. Blinn) To approve the addition of an Ad-Hoc Committee as presented.

E. Nominating Committee - Lillian Martinez

The Nominating Committee is presenting the Nomination of George Alvarado as a full-Board Member. George currently serves as a Board Intern and is being recommended for Membership.

M/S/C (D. Coe/ R. Sigala) To approve George Alvarado for full Board Membership. The motion passed with one abstention from Jordan Feinstock.

- F. Executive Committee Ana Quiles
 - 1. Approval of the revised Board and Committee List Ana Quiles (Packet 1, Page 46)

Ana noted that this list has been updated to include George Alvarado and to include Leticia Garcia as Chair for the Administrative Affairs Committee.

- **M/S/C** (And. Martinez/D. Coe) To approve the revised Board and Committee List. The motion passed with one abstention from Jordan Feinstock.
- 2. Approval of Annual Board Training Plan (Packet 1, Page 37)
 Names of providers who are presenting the training have been added to this list.
 - **M/S/C** (And. Martinez/B. Gatus) To approve the revised Annual Board Training Plan as presented.
- 3. Approval of Committee Representative Report Out Forms (Packet 1, Page 38) Ana reviewed the template as presented in the packet. This report is a tool that will allow liaisons between committees to have a framework for what was discussed at the meeting to be able to report out to other committees. This will streamline the communication between committees. This will apply to the Board's Consumer Advisory Committee Representative, Self- Determination Committee Representative and ARCA Representative.
 - **M/S/C** (G. Herrera/L. Martinez) To approve the utilization of the Report Out Forms as presented.
- 4. Approval of Board of Trustees Policy Statement Revisions for President, First Vice-President and Secretary (Packet 1, Page 40)

 Changes have been made to this policy to include the name of the Committees for which each position participates.
 - **M/S/C** (D. Coe/J. Koster) To approve the revised Board of Trustees Policy Statement for President, First Vice-President and Secretary as presented.
- 5. Review of Board Support Policy Revision (*Packet 1, Page 43*)
 The Board Support Policy was amended to include a provision for credit monitoring of Board Members in the event of a breach of personal information.
 - **M/S/C** (A. Rodriguez /J. Koster) To approve the revised Board Support Policy as presented.
- G. Government & Community Relations Committee Jordan Feinstock
 - 1. Approval of Legislative Priorities for FY2022-23 (Packet 1, Page 47)
 - **M/S/C** (J. Koster/R. Sigala) To approve the Legislative Priorities for FY22-23 as presented.
- H. <u>Strategic Planning Committee</u> Leticia Garcia
 - 1. Review of Policies and Procedures Revision (Packet 1, Page 49)

2. Review Proposed Revision to Bylaws Articles VII, Section 11.a Composition (Packet 1, Page 50)

Both of the above-listed items were reviewed as presented in the packet for Board Member review. The Board is being asked to thoroughly review these items in preparation for a vote to take place at the next Board Meeting.

I. Additional Action Items

Administrative Affairs Committee - David Coe

This contract is being brought to the Board due to the urgent need for a Spanish-speaking vendor to meet the current demand.

1. Approval of Contracts Dr. Moreno-Walter PsyD PL2123-785 (Packet 1, Page 51)

POS Contract – Provides diagnosis and psychotherapy of mental and emotional disorders.

5-year contract effective October 1, 2022 through September 30, 2027

Projected total contract amount is \$441,612.05

Projected to serve 31 consumers per month.

M/S/C (D. Coe /L. Martinez) To approve contract PL2123-785 as presented.

10. Executive Director's Report - Ruth Janka (Packet 1, Page 57)

Ruth summarized the contents of the report as presented in the packet; highlights are outlined below:

Legislation

SB1092: This bill, to update the fair-hearings process, was held in appropriation and will not move forward this session.

State/Local Updates

Excess Heat- On September 2nd, Governor Newsom declared a State of Emergency in California due to extreme heat. As a result, DDS has authorized in NLA to pay non-residential service providers for absences that are a direct result of the extreme heat.

Quality Incentive Program - This is a voluntary program for service providers designed to improve consumer outcomes, service provider performance and the quality of services. Participating service providers that meet or exceed quality measures developed by DDS will be eligible for incentive payments. The amount of statewide funding available will be updated annually through the budget process. This work group did not meet in August, DDS will be releasing guidance on the measures, training and education for service providers this Fall.

COVID- Related Updates - As of September 8th, there are 780 current hospitalizations and the positivity rate stands at 7.23% (7-day average).

Early-Start Services - Ruth noted that the extension of Early-Start Services will be rescinded effective October 3, 2022. After that date, NLA will not have the authority to authorize early intervention services for children transitioning to special education

preschool services, unless the child meets criteria under current statute and regulation. There are 5 consumers who affected by this directive and the Center is in the process of transitioning these children to Special Education Pre-school Services, with continued support during the process.

NLA Staffing - Vini Montague has accepted the position of Chief Financial Officer, as of August 29th. Recruitment will begin for her former role, Director of Finance. Strategies for recruitment and staffing statistics are presented in the packet. Recruitment is also taking place at local colleges and universities as well as the development of relationships with these institutions for an ongoing recruitment process.

Regional Center Services Survey - Community Services is conducting its annual survey of staff and community members to identify resource needs in each geographic area of NLA's catchment. The survey launched on August 15th and the information received will inform NLA's next Request for Vendorization cycle.

Cultural Competency and Implicit Bias Training - The Lanterman Act requires all regional centers to provide staff with implicit bias training. NLA has received DDS approval on the Center's curriculum for implicit bias training for staff and has begun the trainings. This training will be offered to all service providers on September 21, 2022; currently there are 21 vendors registered.

Town Halls - There were 21 attendees at the most recent Town Hall Meeting (Rights Under the Lanterman Act). The September Town Hall is a parent panel regarding the Early Start Program is scheduled for September 15th, 2022 at 1:30 pm.

DDS Employment Grants - There were a significant number of providers who submitted proposals to the department. DDS will assemble a panel to review all of the applications and finalists will be announced.

11. Self Determination Program (SDP) – Dr. Jesse Weller

A. SDP Report (Packet 1, Page 62)

As of September 1st, there are 137 individuals who have transitioned into the program with approved spending plans and active SDP IPPs. Orientation and Informational meetings will continue monthly, it was noted that Orientation can now be completed online at the convenience of the participant. New information has been included to the report in regards to SDP Budget by year. This data will be tracked monthly to identify any potential barriers during the yearly transitions.

Concerns have been raised regarding FMS providers having sufficient staff available to serve families in Self-Determination. Silvia Haro will be presenting information at the next Self-Determination Local Advisory Committee to discuss NLA's FMS providers and the newest FMS directive that requires weekly payments to providers. Lori Walker was recently elected the Chair for this Committee and Richard Deir will serve as co-Chair. Self Determination Support Group – next meeting will be Wednesday, October 5th from 6:00-7:30pm. SDP Volunteer Local Advisory Committee – Next meeting will take place September 15th from 6:30 pm to 8:30 pm. Everyone is welcome to attend.

12. Administrative Affairs Committee – David Coe

A. Minutes of the August 31st Meeting – defer

- **B.** Insurance Coverage for FY 2022-23 Vini Montague (*Packet 1, Page 68*) Annual status coverage is presented to the Board annually, presented in the packet.
- C. FY 2021-2022 Financial Report (Attachment #1)

Vini reviewed the information from this report as presented in the packet.

Expenses through June 2022 - \$13,386,899

YTD Expenditures- \$663,257,053

Projected Annual Expenditures - \$692,190,619

Projected Annual Surplus-\$39,547,773

The Administrative vs. Direct Allocation Report percentage should be below 15% annually, currently at 14.5%

D. FY 2022-2023 Financial Report (Attachment #2)

Preliminary Budget - \$656,642,383

Monthly Expenditures for July - \$45,527,399

YTD Expenditures - \$47,263,697

Currently no projection for surplus/deficit as POS Expenditures Projections will be done in December.

Administrative vs. Direct Allocation Report percentage should be below 15% annually, currently at 16.4%. This will be closely monitored but is not currently of concern due to the timing of some administrative expenditures that re paid at the beginning of the fiscal year..

E. Monthly Human Resources Report (Packet 1, Page 74)

This report is presented in the packet. Highlights for June and July include an increase in the annual turnover rate, which is currently at 0.18%. As Ruth mentioned in her report, much is being done in terms of recruitment and focus on improving the process to lower the turnover rate.

13. Association of Regional Center Agencies - Ana Quiles for Angelina Martinez

Ana reviewed the information as presented in the packet.

A. August Meeting Report (Packet 1, Page 76)

14. **Consumer Advisory Committee** – Jennifer Koster

Ana reviewed the information as presented in the packet.

- A. Minutes of the August 3rd Meeting (Packet 1, Page 79)
- B. Minutes of the September 7th Meeting (Packet 1, Page 82)
- C. Committee Meeting Time Change the Committee time will be changed to 3:00 pm in the future and the next meeting is scheduled for October 5th, 2022.

15. Consumer Services Committee – Andrew Ramirez

Ana reviewed the information as presented in the packet. Andrew Ramirez noted that the Committee Meeting time will be changed to 6:00pm-7:30 pm. The 7:30 end time will be a

hard stop to allow time for the following meeting to begin on time.

A. Minutes of the August 17th Meeting – *defer*

16. Executive Committee – Ana Quiles

Ana reviewed the information as presented in the packet.

- A. Minutes of the April August 31st Meeting defer
- B. Jaravata Northridge Home PL2122-109 (Packet 1, Page 85)
- C. FY2021-22 Board vs Expenditures (Packet 1, Page 90)
- D. FY2022-23 Board Budget (Packet 1, Page 91)
- E. ELARC Boardsmanship Manual (Attachment)

This document was adopted from another Regional Center to assist with the onboarding of new Board Members.

17. Government & Community Relations – Jordan Feinstock

Ana reviewed the information as presented in the packet.

- A. Minutes of the August 4th Meeting (Packet 1, Page 92)
- B. Minutes of the August 17th Meeting *defer*

18. Nominating Committee - Lillian Martinez

Ana reviewed the information as presented in the packet.

- A. Redacted Minutes of the April 6th and April 18th Meetings (Packet 1, Page 99)
- B. Minutes of the September 7th Meeting *defer*
- C. DDS Composition Requirement Update applications are being reviewed to add new members per the compliance requirements.

19. Post-Retirement Medical Trust Committee – Ana Quiles

Ana reviewed the information as presented in the packet.

A. Next Meeting: October 26th, 2022 at 5:30 pm.

20. Strategic Planning Committee- Leticia Garcia

Ana reviewed the information as presented in the packet.

A. Minutes of the August 29th Meeting – defer

21. Vendor Advisory Committee – Suad Bisogno

Ana reviewed the information as presented in the packet.

- A. Minutes of the September 1st Meeting –*defer*
- B. Housing Recommendations from the Adult Services Workgroup Erica Beall (Packet 1, Page 110)

Erica stated that the Adult Services Workgroup met to review data and compiled a set of recommendations for the Board to consider in regards to housing. Individuals remain concerned about long-term housing and these recommendations will help alleviate some of those concerns.

22. Old Business/New Business

Ana reviewed the information as presented in the packet.

- A. Board and Committee Meeting Attendance Sheets (Packet 1, Page 113)
- B. Board and Committee Meetings Time Report (Packet 1, Page 122)
- C. Updated Acronyms Listing (Packet 1, Page 123)
- D. Meeting Evaluation (Packet 1, Page 129)

23. Announcements/Information/Public Input

- A. Next Meeting: Wednesday, October 12th at 6:30pm
- B. Public Meeting Attendance (Packet 1, Page 130)
- C. Virtual Alianza de Hombres, September 13th at 7:00pm
- D. Virtual Town Hall: Parent Perspective/Early Start, September 15th at 1:30pm
- E. Community Based Organization Roundtable, September 15th at 1:30pm
- F. Filipino Support Group, September 19th at 6:30pm
- G. Self-Advocacy Group Meeting, September 20th at 10:45am
- H. Performance Contract Public Meeting, September 20th at 1:00pm
- I. FFRC Advance IEP, September 21st at 11:00am
- J. Performance Contract Public Meeting, September 22nd at 6:00pm
- K. Cultivar y Crecer, September 23rd at 6:30pm

No Public input

24. Adjournment

Ana Quiles, Board President, adjourned the meeting at 8:21 p.m.

Submitted by:

(*) Lizeth Chavez

Executive Administrative Assistant

for:

Lillian Martinez Board Secretary

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

North Los Angeles County Regional Center Strategic Planning Committee

Policies & Procedures

Rationale

North Los Angeles County Regional Center's (NLACRC) Board of Trustees will create a permanent Strategic Planning Committee (SPC) charged with developing and implementing annual performance contract objectives. The committee will also participate in the development and monitoring of the Center's strategic plan and give advice to the Board of Trustees on developing a long-range resource development plan.

Composition

- The composition of the SPC shall be consistent with requirements found in the Lanterman Developmental Disabilities Services Act for regional centers when convening any task force or advisory group. As such, the SPC may have members who are or who represent primary consumers, family members, service providers, the State Council, and staff. The SPC should have not less than twelve (12) ten (10) or more than sixteen (16) members, of which a minimum of 60% being board members. The chairperson is selected by the members of the committee.
- The board president, with the advice and consent of the Board of Trustees, shall appoint committee members. A quorum shall consist of 50% of the members of the SPC.

Purpose

The SPC will identify gaps in the service delivery system and recommend alternatives to close these gaps. The committee may identify service gaps in generic agencies within NLACRC's catchment area that may require some systems advocacy, legislation or interagency coordination.

Duties

The duties of the SPC shall be to participate in the development of NLACRC's strategic plan, performance contract and make recommendations to the Board of Trustees on adopting and modifying goals and objectives contained in the performance contract. The committee may advise to the Board of Trustees on developing a long-range resource development plan and participate in the strategic planning of types of services needed. At the direction of the Board, the SPC may be required to develop recommendations for the Board's consideration in other areas, such as pending legislation, housing, or other activities that may require NLACRC to utilize a community forum for input.

[polpro.spc] Approved: August 10, 2016

Revised: January 12, 2022; xx/xx/xx

Committee should give consideration to alternating their nomination for the position among eligible board members. Election of the committee chair will occur at the time of the regular board elections. The Nominating Committee will also recommend the nomination of a vice-chair.

(c) <u>Duties</u>. The duties of the Consumer Advisory Committee shall be to provide the Center's Board of Trustees with recommendations on legislation or services and supports provided by the center or other publicly funded entities

Section 11. Strategic Planning Committee

- (a) <u>Composition.</u> The Strategic Planning Committee shall be consistent with requirements found in the Lanterman Developmental Disabilities Services Act for regional centers when convening any task force or advisory group. As such, the Strategic Planning Committee may have members who are or who represent primary consumers, family members, service providers, the State Council, and staff. The Strategic Planning Committee should have not less than twelve (12) ten (10) or more than sixteen (16) members, of which a minimum being 60% board members. The chairperson is selected by the members of the committee. The board president, with the advice and consent of the Board of Trustees, shall appoint committee members. A quorum shall consist of 50% of the members of the Strategic Planning Committee.
- (b) <u>Duties.</u> The Strategic Planning Committee is charged with providing advice in the development and implementation of the Regional Center's annual performance contract, the objectives contained therein, and recommendations to the Board of Trustees on adopting and modifying goals and objectives contained in the contract. The committee may advise to the Board of Trustees on developing a long-range resource development plan and participate in the strategic planning of types of services needed. The Strategic Planning Committee may identify gaps in the service delivery system, including generic agencies, and recommend alternatives to close these gaps, such as systems advocacy, legislation, or interagency coordination. At the direction of the Board, the Strategic Planning Committee may be charged with developing recommendations for the Board's consideration in other areas, such as housing or other activities that may require the Regional Center to utilize a community forum for input.

ARTICLE VIII

RECORDS AND REPORTS

Section 1. Inspection of Records. The Regional Center shall maintain adequate and correct

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

Vendor#	Service Code	Service Code Description
PL2050	109	Supplemental Residential Program Support
PL2052	109	Supplemental Residential Program Support
PL1358	109	Supplemental Residential Program Support
HL0831	915	Adult Residential Facility (Level 4I – Staff Operated)
HL0622	915	Adult Residential Facility (Level 3 – Staff Operated)
HL0682	915	Adult Residential Facility (Level 4I – Staff Operated)
PL2107	113	Specialized Residential Facility – Habilitative
PL2057	999	Start-up Funding for CPP Costs
PL2115	999	Start-up Funding for CPP Costs

Vendor Name: W & W Joint Ventures, Inc., d.b.a. Diamond Care Facility

Vendor Number: PL2119 **Service Code:** 109

Service Code Description: Supplemental Residential Program Support

Antelope Valley

Service Address: 1632 Amargosa Drive Palmdale, CA 95331

Service Description:

Service Area:

Time-limited, supplemental staffing in excess of the amount required by regulation for residents of Diamond Care Facility, a Specialized Residential Facility (SRF) for four (3 ambulatory and 1 non-ambulatory) female consumers, ages 18 – 59 years. Supplemental support is designed to implement an objective in the consumer's IPP and allow the consumer to remain in their current residential environment. Supplemental Residential Program Support services include, but are not limited to, assistance and training in skills for activities of daily living and in socially appropriate skills to replace (and serve the same function/purpose as) challenging behavior.

Staffing:

Supplemental Residential Program Support services will be provided by staff who meet the Personnel Requirements set forth in Title 22 § 80065 General Licensing Requirements, possess current first aid certification, have criminal record clearance from the Department of Justice, and have the experience, skills, and training necessary to meet the consumer's needs.

Contract Summary and Board Resolution

No.	Description	Contract Summary
1.	Contract Overview: (New or Amendment) (POS or OPS)	New Nonresidential Negotiated Rate Agreement, Purchase of Services (POS)
2.	The Name of Vendor or Service Provider	W & W Joint Ventures, Inc. dba Diamond Care Facility Vendor Number PL2119, Service Code 109
3.	The Purpose of the Contract	Contractor will provide Supplemental Residential Services Program Support services pursuant to Title 17, Section 54356 and the DDS published guidelines regarding Miscellaneous Services revised 05/10/2010. The service provider will provide, or obtain, time limited supplemental staffing in excess of the amount required by regulation. Supplemental Residential Program Support is designed to implement an objective in the consumer's IPP and allows the consumer to remain in their current residential environment. Supplemental Residential Program Support services include, but are not limited to: assistance and training in skills for activities of daily living and in socially appropriate skills to replace (and serve the same function/purpose as) a challenging behavior.
4.	The Contract Term	Three (3) year contract term. Coterminous with contract term for PL2107-113. September 15, 2022 through August 31, 2025
5.	The Total Amount of the Contract	Projected annual value of the contract is up to \$92,710.80, or \$278,132.40 over the entire three (3) year term, based on the maximum rate of reimbursement, the statewide median rate of \$14.15 per hour, and an estimation of 6 hours per day of supplemental program support per each of three (3) consumers.
6.	The Total Proposed Number of Consumers Served	Maximum of up to 3 per month. Note: PL2107-113 has a vendored capacity of 4. If three consumers have 1:1 supplemental support through the 109 vendorization, the facility staffing requirements will provide services for the 4 th consumer.

PL2119-109 Page 1 of 3

7.	The Rate of Payment or Payment Amount	Payment will be reimbursed to service provider based on 1) the actual services authorized; 2) the actual services provided; and 3) the authorized rate hourly rate.
8.	Method or Process Utilized to Award the Contract.	Based on vendorization requirements under statute and regulation for Supplemental Residential Services Program Support services.
9.	Method or Process Utilized to Establish the Rate or the Payment Amount	The rate negotiated will be based on a cost statement and will comply with WIC, Section 4691.9 (b) which states that effective July 1, 2008 "no Regional Center may negotiate a rate with a new service provider, for services where rates are determined through a negotiation between the Regional Center and the provider, that is higher than the Regional Center's median rate for the same service code and unit of service, or the statewide median rate for the same service code and unit of service, whichever is lower." Effective January 1, 2020, the Statewide Median Rate is \$14.15 per hour. The provider's requested rate is the same as the statewide median rate.
10.	Exceptional Conditions or Terms: Yes/No If Yes, provide explanation	The Specialized Residential Facility (PL2107-113) was licensed on September 15, 2022.

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

	September 28, 2022
David Coe, Board Treasurer	Date

PL2119-109 Page 2 of 3

Contract Summary and Board Resolution

The North Los Angeles County Regional Center's ("NLACRC") Board of Trustees reviewed and discussed the Nonresidential Negotiated Rate Agreement ("Agreement", or "Contract") for W & W Joint Ventures, Inc. dba Diamond Care Facility and passed the following resolution:

<u>RESOLVED THAT</u> in compliance with NLACRC's Board of Trustees Contract Policy, the Contract between NLACRC and **W & W Joint Ventures, Inc. dba Diamond Care Facility** was reviewed and approved by NLACRC's Board of Trustees on <u>October 12, 2022</u>.

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

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

	October 12, 2022
Lillian Martinez, Board Secretary	Date

PL2119-109 Page 3 of 3

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

Vendor #	Service Code	Service Code Description
PL2094	999	Start-up Funding for CRDP Costs

Vendor Name: Nurture Collective

Vendor Number: PL2117 **Service Code:** 116

Service Code Description: Early Start Specialized Therapeutic Services

Service Address: 1028 W. Avenue L, Suite 103

Lancaster, CA 93534

Service Area: Antelope Valley

Service Description:

Nurture Collective's early intervention program utilizes a family-centered care approach that involves the provision of services in such a way that parents/caregivers and other family members are an integral part of the team. Services are primarily provided in the home but are also available in the Lancaster clinic or via teletherapy by family request. Service languages include English, Spanish, and Tagalog.

The Purpose of Nurture Collective Specialty Service

- Provide evaluation and skilled intervention for children to achieve their physical (gross and fine motor), emotional, cognitive, self-care, and language (expressive and receptive) potential.
- Integrate family-centered approaches during intervention to facilitate a strong emotional connection between parent and child that foster positive social-emotional development.
- Partner and connect with community-based organizations to meet the needs of the child and family in the context of their natural environment.

Services will include:

- Occupational Therapy, including Feeding, Swallowing, and Eating Program
- Physical Therapy
- Speech & Language Therapy
- Parent & Family Counseling
- Pediatric Nutrition Services

Staffing:

- Administrator
- Occupational Therapist
 - Occupational Therapy Assistant
- Physical Therapist
 - Physical Therapy Assistant
- Speech Language Pathologist
 - Speech Language Pathology Assistant
- Mental Health Provider/Counselor (Licensed LMFT, LCSW, or Psychologist)
- Registered Dietician

Contract Summary and Board Resolution

No.	Description	Contract Summary
1.	Contract Overview: (New or Amendment) (POS or OPS)	New - Professional Services Agreement Purchase of Services (POS)
2.	The Name of Vendor or Service Provider	The Nurture Collective Vendor Number PL2117, Service Code 116
3.	The Purpose of the Contract	Contractor will provide Early Start Specialized Therapeutic Services to consumers aged birth to thirty-six (36) months who require specialized services as deemed necessary based on informed clinical opinion. The services must be identified in the Individualized Family Service Plan. Early Start Specialized Therapeutic Services include, but are not limited to: services necessary to increase or maintain health and/or developmental progress; and, when provided as ancillary to these services, family and/or individual education and training; family support and counseling; provider travel; interagency consultation; and consultation with and training for other involved professionals. Vendors shall be individuals offering these services, and shall ensure possession of licenses, certifications and/or credentials as required by the State of California to practice in the field being offered. In addition, the vendor shall have at a minimum, one year's experience working with persons with developmental disabilities.
4.	The Contract Term	Five (5) year contract effective November 1, 2022 through October 31, 2027.
5.	The Total Amount of the Contract	Projected annual cost is \$4,021,263.28 per year, or \$20,106,266.40 over the entire five (5) year term of the contract based on four (4) cost statements, one per median rate. Projected annual cost per service: - Assessment: \$837,436.32 - Occupational Therapy: \$796,138.56 - Speech, Hearing and Language Services (bilingual): \$567,456.00 - Counseling: \$152,505.12 - Nutrition: \$152,505.12

PL2117-116 Page 1 of 4

		- Speech, Hearing and I \$905,191.68		ervices:
		- Physical Therapy: \$61	10,020.48	
		Projected 784 authorization consumer anticipated to rewithin the program).		*
6.	The Total Proposed Number of Consumers Served	Projected authorizations per - Assessment: 153 - Occupational Therapy - Speech, Hearing and I (bilingual): 100 - Counseling: 31 - Nutrition: 31 - Speech, Hearing and I - Physical Therapy: 124	v: 161 Language S Language S	
7.	The Rate of Payment or Payment Amount	Payment will be reimburse based on 1) the actual serv actual services provided; a rate.	ices author	ized; 2) the
8.	Method or Process Utilized to Award the Contract.	Based on vendorization red statute and regulation for E Therapeutic Services.	-	
		Negotiated hourly rates based on a cost statement do not exceed the January 1, 2020 statewide median rates as follows:		
			Negotiated rate	Statewide median rate
		Assessment	\$114.03	\$114.10
		OT Speech, Hearing and	\$103.02 \$118.22	\$103.27 \$118.39
9.	Method or Process Utilized to Establish the Rate or the Payment Amount	Language – bilingual Counseling Nutrition Speech, Hearing and Language Services Physical Therapy	\$102.49	\$102.70
		The rate negotiated comp 4691.9 (b) which states that "no Regional Center may new service provider, for a determined through a ne Regional Center and the than the Regional Center same service code and the	at effective negotiate a services whe egotiation provider, the r's median	July 1, 2008 a rate with a here rates are between the hat is higher rate for the

PL2117-116 Page 2 of 4

		statewide median rate for the same service code and unit of service, whichever is lower."
10.	Exceptional Conditions or Terms: Yes/No If Yes, provide explanation	DDS approval for this service code is required per Title 17 regulation and 2013 program advisory. NLACRC received DDS approval to vendor service code 116 programs on August 31, 2021. Request for Vendorization ("RFV") published on October 15, 2021. There is no start-up funding associated with this RFV.

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

	September 28, 2022
David Coe, Board Treasurer	Date

PL2117-116 Page 3 of 4

Contract Summary and Board Resolution

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

<u>RESOLVED THAT</u> in compliance with NLACRC's Board of Trustees Contract Policy, the Contract between NLACRC and **The Nurture Collective.** was reviewed and approved by NLACRC's Board of Trustees on **October 12, 2022.**

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

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

	October 12, 2022
Lillian Martinez, Board Secretary	Date

PL2117-116 Page 4 of 4

<u>Procurement Policy Proposal Summary</u>

Date: October 12, 2022

Single or sole source vendors allowable in the following situations:

- 1) Contracts under \$10,000
- 2) Contracts above \$10,000, relationship with the same vendor may be maintained for one year from initial contract
- 3) Emergencies
- 4) IT infrastructure dependent solution renewals
 - Examples: Document Management System, Human Resources
 & Payroll Solutions, Microsoft Infrastructure
 - Re-evaluate as needed based on business needs
- 5) IT specialized expertise or compatibility reasons
 - Re-evaluate minimum every three years, including:
 - o Potential disruptions to business
 - Time frame for transition
 - Transition costs
 - Internal resources required for transition

Outside of the above parameters, NLACRC will seek a written price quotation from at least three vendors.

- Selection will be based on an assessment of various factors, including: price, experience, ability to achieve the outcome, time frame to meet business needs, transition costs.
- NLACRC will solicit proposals and quotes from diverse platforms and sources

North Los Angeles County Regional Center

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

Consumer Services Committee Meetings Schedule

FY 2022-23

Wednesday, October 19, 2022 6:00 p.m.

Wednesday, November 16, 2022 6:00 p.m.

~ No meeting in December ~

Wednesday, February 15, 2023 6:00 p.m.

Wednesday, April 19, 2023 6:00 p.m.

Government Community & Relations Meetings Schedule

FY 2022-23

Wednesday, October 19, 2022 7:30 p.m.

~ No meeting in December ~

Wednesday, January 18, 2023 6:00 p.m.

Wednesday, March 15, 2023 6:00 p.m.

Wednesday, May 17, 2023 6:00 p.m.

Why should I be the next ARCA Alternate for North Los Angeles County Regional Center?

I have two main reasons why I decided to submit my name for the ARCA alternate position.

First reason is **Connection**.

Recently I met with the previous ARCA President Rita Walker to try and gain some insight on the board president experience. Since Mrs. Walker served as both her regional center's board president and as ARCA president her name was recommended as a person that could provide the greatest access to insights on both platforms. My number one question for Mrs. Walker was if she knew of any organizations or any meetings that were scheduled for board presidents to meet and share ideas on best practices. Her answer was that all though there isn't anything formalized ARCA was actually the place that board presidents used to connect with other regional centers' leadership. It's not uncommon for Board Presidents to also be the ARCA reps. ARCA meetings are used for both Executive Directors and Board delegates to meet with other regions. I believe that as the ARCA alternate it will allow me the opportunity to expand the level of support and cooperation among other board regional center leadership.

Second reason is **Onboarding:**

Our organization has been experiencing a lot of transition among staff and board members in the last few years. Overall,

our board is pretty new. One of our oldest board members has been on the board for under 5 years and everyone else is under 3 years. Our orientation and onboarding of new board members is key area of focus and priority for me. ARCA is a critical and valuable relationship for our board. Unfortunately, we have not developed an orientation process for potential ARCA reps or for new liaisons once they are voted in. My goal as the alternate is to work on an onboarding process and policy to help our future members not only understand the ARCA relationship but also their individual role once they decide to accept the responsibility. I believe that the alternate position is the perfect starting point to focus on this objective. Since ARCA has decided to host both in person and virtual meetings it allows both the ARCA representative and the ARCA alternate to attend the meetings all the meetings.

I am excited for this new chapter in our ARCA relationship. I believe my understanding of board leadership would be an asset to the entire organization as the ARCA alternate. I hope these two objectives will help you decide to vote for me as your ARCA alternate for 2022-2023.

NOTICE TO CONSUMERS, FAMILY MEMBERS and COMMUNITY MEMBERS

Call for Applications for NLACRC's Board of Trustees

North Los Angeles County Regional Center (NLACRC) continuously strives to identify qualified and interested persons as potential members of the Board of Trustees. To assure that all consumer needs are considered, the Nominating Committee is seeking your assistance at this time in recruiting nominees. Meetings are currently held virtually on the Second Wednesday of every month. Additional meeting information will be provided for possible in-person meetings.

The Nominating Committee will first consider current special needs of the board to assure balanced representation and seek the names of appropriate nominees from board members, groups representing persons with developmental disabilities, and the general community. Due to meeting DDS Board composition requirements for all other Ethnicity, Race, and Board Member Representation Oour board is currently seeking consumers, family members, or community members, particularly Iindividuals Served with legal, financial, management, developmental disabilities, and/or board governance experience. who meet one of the following criteria:

- Hispanic/Latino, Asian, or Caucasian
- Santa Clarita or Antelope Valley resident Individual Served
- Family member of a consumer in the Early Start program
- Legal, Financial, and/or Board Governance experience

Please note that NLACRC service providers are unable to serve on the board as it would constitute a conflict of interest. Board members must reside, work, or have a family member who receives services within the Regional Center's catchment area (San Fernando, Santa Clarita, or Antelope Valley). Anyone interested in applying for membership will be provided with an application packet. After receiving completed documents from an applicant, the Nominating Committee will interview the applicants and submit a proposed slate of names to the Board of Trustees for their approval. Please contact Board Support at boardsupport@nlacrc.org for additional information or for an application packet.

The deadline for application submission is December 15th.



North Los Angeles County Regional Center

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NOTICE TO SERVICE PROVIDERS

Call for Applications for NLACRC's Vendor Advisory Committee

The Board of Trustees of North Los Angeles County Regional Center (NLACRC) is seeking qualified individuals to serve on the NLACRC Vendor Advisory Committee (VAC). The VAC is an 18-member committee which provides advice, guidance, recommendations and technical assistance to NLACRC's Board of Trustees to assist the board in carrying out its mandated duties. The VAC designates one of its members to serve as chairperson of the committee who also serves as a member of the NLACRC Board of Trustees.

The Nominating Committee of the Board of Trustees will develop a slate of nominees for the VAC that will be presented to the board. The committee is seeking applicants at this time. We are in particular need of vendors who provide services in any of the following areas:

- Community care facility
- Health Licensed Facility
- Home Health Agencies
- Early intervention
- Habilitation
- Day care/After school/Saturday programs
- Mobility training

In order to serve as a member of the VAC, an individual must represent a category of providers from whom NLACRC purchases services (vendors) or be a board member or employee of a provider. Members are selected based upon their individual credentials and expertise. VAC members may be elected to serve up to 6 years. The committee meets virtually at 9:30 a.m. on the first Thursday of each month, at the regional center's main office in Chatsworth, with the exception of a semi-annual in-person meeting.

If a member of your board or staff is interested in serving on the VAC, please contact Board Support at boardsupport@nlacrc.org for an application.

The deadline for application submission is December 15th. Thank you!

Potential Interview Questions

BOARD OF TRUSTEES

1. Background - Personal

• Question: Please give us a brief overview about yourself

• Question: Why do you want to volunteer to serve on our board?

2. Background - Professional/Board Experience

- Question: What personal, professional, or volunteer experience do you think you could bring to the board?
- Question: Have you attended any of our board or committee meetings at NLACRC or any other Regional Center?
- Question: Why do you want to volunteer to serve on our board? Are you familiar with Robert's Rules of Order?

3. Communication/Inter-personal Relationships

- Question: Please tell us about your experience working with groups or committees.
- Question: Are you able to speak up and share your thoughts with others who may have a difference of opinion?
- Question: What experience do you have working as a team member and finding common ground with others?

4. Commitment

- Question: Can you make the commitment to attend the monthly board meeting and at least one monthly committee meeting?
- Question: Would you also be willing to participate in our annual legislative events and meetings?

Created: 12/28/16 Revision:

• Question: If you were elected to serve on our board, can you see yourself in the future assuming increased responsibilities, for instance becoming a committee chairperson or board officer?

5. Work Management

• Question: One week prior to each meeting, you will be sent the agenda and meeting materials. Are you willing to take some time to review these materials prior to coming to the meeting so you are prepared to discuss the issues at hand?

Question: Do you have any questions for us?

Created: 12/28/16 Revision:

Qualifications Appraisal Rating Sheet

Board Member Candidate

Applicant Name:	Date:
Rater:	
□ Consumer □ Family Member	□ Other
Disability : □ Autism □ Cerebral Pals	y □ Intellectual Disability □ Other
Location : □ San Fernando Valley □	Antelope Valley
Expertise : □ Legal □ Manag □ Developmental Disability l	ement Program Skills Other
Please rate the applicant according to the	he following rating system:
A rating of: 5 - indicates outstanding perform 4 - indicates excellent perform 3 - indicates average performa 2 - indicates below average pe 1 - indicates unacceptable/qua 1. Background - Personal Experience	nance/qualifications nce/qualifications rformance/qualifications alifications
 Why does the applicant want to be 	pe a board member?
■ Why do you want to volunteer to	serve on our board?
2. Background - Professional/Board	Experience RATING:
What personal, professional, or v to the board?	volunteer experience will the applicant bring

Is the applicant famil	iar with Robert's Rules of Order?
Communication/Interp	personal Relationships RATING:
 What experience does 	the applicant have working in groups?
 Is the applicant able to 	o speak up and share their thoughts with others?
 What experience does finding common grou 	s the applicant have working as a team member and and?
Commitment	RATING:
 Is the applicant able to 	o attend the monthly board and committee meetings
Is the applicant willing meetings?	g to participate in our annual legislative events and
• In the future, is the ap board officer?	oplicant willing to become a committee chair or
Work Management	RATING:
• Is the applicant willing meetings?	g to review all materials prior to board or committee

Sub-Total:	
TOTAL (Divide the subtotal by 56):	
Additional Notes:	

Individual Board Member Self-Evaluation

Use the following questions for individual board member evaluation. For board members answering yes to these questions, they are likely to be fulfilling their responsibilities as board members.

	Yes	No	Not Sure
1. Do I understand and support the mission of the organization?			
2. Am I knowledgeable about the organization's programs and services?			
3. Do I follow trends and important developments related to this organization?			
4. Do I read and understand the organization's financial statements?			
5. Do I have a good working relationship with the Chairs of the Committees I work with?			
6. Do I recommend individuals for service to this board?			
7. Do I prepare for and participate in board meetings and committee meetings?			
8. Do I act as a good-will ambassador to the organization?			
9. Do I find serving on the board to be a satisfying and rewarding experience?			

NOTIFICATION OF CONFLICT OF INTEREST, AND SUBMISSION OF CONFLICT RESOLUTION PLAN

ROCIO SIGALA - NLACRC BOARD MEMBER NORTH LOS ANGELES COUNTY REGIONAL CENTER

I. Law Governing Conflicts of Interest

The prohibition against Regional Center employee or board member conflicts of interest has its origin in section 4626 of the Welfare & Institutions Code. Subsection (d) of said section 4626 provides: "The department shall ensure that no regional center employee or board member has a conflict of interest with an entity that receives regional center funding...."

That general prohibition is explained in more detail in Title 17 of the California Code of Regulations, section 54520 "Positions Creating Conflicts of Interests for Regional Center Governing Board Members and Executive Directors," which provides in pertinent part:

- (a) A conflict of interest exists when a regional center governing board member...or <u>family member</u> of such person is any of the following for a business entity, entity, or provider as defined in section 54505 of these regulations...:
 - (1) a governing board member
 - (2) a board committee member
 - (3) a director
 - (4) an officer
 - (5) an owner
 - (6) a partner
 - (7) a shareholder
 - (8) a trustee
 - (9) an agent
 - (10) an employee
 - (11) a contractor
 - (12) a consultant
 - (13) a person who holds any position of management
 - (14) a person who has decision or policy making authority. (Emphasis added.)

Section 54505 states that: "Business Entity, Entity or Provider" means any individual or business venture from whom or from which the regional center purchases, obtains or secures goods or services to conduct its operations."

Further, Section 54533 states:

(a) When a present or potential conflict of interest is identified for a regional center <u>board member</u>, executive director, employee, contractor, agent, or consultant, the present or potential conflict shall be either eliminated or mitigated and managed through a Conflict Resolution Plan, or the individual shall resign his or her

position with the regional center or regional center governing board.

II. Potential Conflict of Ms. Sigala

Rocia Sigala is a Board Member at North Los Angeles County Regional Center (hereinafter "NLACRC" or "the Regional Center"). Ms. Sigala is a board member and the 2nd Vice President and as such she participates on the Executive Committee and Consumer Services Committee. NLACRC Executive Director Ruth Janka confirms that Ms. Sigala is a productive and valued member of the Board of Trustees. Attached as **Exhibit A** is Ms. Sigala completed Conflict of Interest Reporting Statement. As part of the Conflict Resolution Plan, she will remain in her position on the Board of Trustees.

Ms. Sigala's sister, Belen Sigala and father-in-law, Federico Vasquez, provide respite, personal assistance and daycare for her nephew, a consumer of NLACRC. Ms. Belen Sigala and Mr. Federico Vasquez are both employed with Helpful Hands, a vendor of North Los Angeles County Regional Center. This creates a direct conflict for Ms. Sigala as defined by regulation. This document constitutes a disclosure of this conflict, a Conflict Resolution Plan to mitigate any adverse consequences from this relationship, and a request for approval of the Conflict Resolution Plan by DDS.

In short, this Conflict Resolution Plan will have Ms. Sigala remain in her position on the NLACRC Board of Trustees, but limit her actions as a board member so that she in no way participates in any role whatsoever with regard to Helpful Hands or any other vendor who provides respite, personal assistance and daycare services.

III. Facts

The plan of action proposed herein is designed to eliminate any adverse consequences from the conflict. To better understand how the plan will eliminate any adverse consequences, this request will first provide the facts regarding Ms. Sigala's duties and responsibilities as a board member and her sister and father-in-law's role with Helpful Hands.

A. Ms. Sigala's Duties as Board Member

As a board member, Ms. Sigala regularly meets with other board members of NLACRC to create policy for the operation of the regional center. Policy is developed through recommendations from board committees and the Executive Director. Direct operation is delegated to the Executive Director who is hired by the board. Staff recommendations for policy initiation or modification go the Executive Director, who, in turn, refers them to the board and/or an appropriate board committee. A copy of the Board Member Responsibilities is attached as **Exhibit B**.

Ms. Sigala's responsibilities as a member of the Board of Trustees of the NLACRC would include, but not be limited to:

1. Act for the president and/or the first vice president in their absence or incapacity, performing their duties to include:

- Calling meetings of the Board of Trustees.
- Presiding at meetings of the trustees and all Executive Committee meetings.
- Executing, on behalf of the corporation, any and all instruments necessary
 to transact the business of the corporation in accordance with such authority
 as may be granted to him/her by the Board of Trustees.
- 2. Act as parliamentarian for the Board of Trustees.
- 3. Exercise such other powers and perform such other duties as may be prescribed by the Board of Trustees and the bylaws.
- 4. Attendance, either virtual or in-person, at monthly Board of Trustees meetings, usually held on the second Wednesday of each month at one of NLACRC's three offices at 6:30 p.m.
- 5. Membership and attendance on one (1) or more board committees.
- 6. Board participation and advocacy will be focused on systems issues; issues regarding an individual consumer, family or program will be directed to the Executive Director's Office.
- 7. Identification of any potential conflict of interest as identified in Welfare and Institutions Code, Sections 4626 and 4627 during the board member's term on the board will be reported to the administrative assistant to the board.
- 8. Completion of the Conflict of Interest Statement annually and MediCal Provider Enrollment Form as applicable due to the regional center's funding and contract with the State of California, Department of Developmental Services.
- 9. Completion of a W-9 form by board members who seek reimbursement for childcare or personal care services under the Board Member Support policy.
- 10. Adherence to the board's Code of Conduct.
- 11. Attendance at the annual board orientation for all newly seated board members.
- 12. Participation in board-coordinated trainings and the annual board retreat.
- 13. Visitation to NLACRC vendored programs is expected in order that board members may be informed about the developmental disabilities service system. Programs include a wide variety of residential and day programs as well as those providers who deliver a specific service (e.g. school setting or transportation).
 - C. Belen Sigala and Ferderico Vasquez's Duties at Helpful Hands

Helpful Hands is a service provider to NLACRC that provides the following

services:

- In home respite services
- Personal assistance
- Daycare

As employees for Helpful Hands, Ms. Sigala and Mr. Vasquez provide respite, personal assistance and daycare services solely to her nephew who is an NLACRC consumer.

IV. Conflict Resolution Plan

The Regional Center and its Executive Director, Ruth Janka, have concluded that Ms. Sigala provides great value to the Board of NLACRC. After consideration of the totality of the circumstances and a careful review of the facts, the Executive Director believes it is in the best interests of the Regional Center to create and implement a Conflict Resolution Plan to eliminate any adverse consequences from this relationship and seek approval of this plan by DDS.

Initially, the first step in the Conflict Resolution Plan is to allow Ms. Sigala to remain in her position on the Board of Trustees, but to cease any activity or action that might in any way impact Helpful Hands. This will eliminate any instance in which Ms. Sigala would have to vote, give her opinion, analyze, assess the performance of, or take action for or against Helpful Hands, and would eliminate any possible action by Ms. Sigala to recommend Helpful Hands or other similar available respite, personal assistance and daycare vendors.

The second part of the plan is to insulate Ms. Sigala from any involvement whatsoever with the generic type of provider like Helpful Hands. She would recuse herself from participation in any vote regarding, drafting, planning, or discussion of rules, policies, or restrictions that would impact Helpful Hands and all other respite, personal assistance vendors. Any duties that potentially relate to Helpful Hands or generic policies applicable to such a vendor represent a small portion of the valuable duties she performs on behalf of the Regional Center, and these duties can be easily delegated to other Regional Center board members. Like other board members, Ms. Sigala develops policy through recommendations from the Executive Director, and thus works with numerous vendors on a variety of services.

Further, as the Conflict Resolution Plan details below, when any matter arises with regard to Helpful Hands respite, personal assistance and daycare vendors, she will agree not to be involved in the discussion of the matter, the presentation of options to the Board, or the decision or vote on such matter. NLACRC will require Ms. Sigala to abstain from discussion with, or involvement in the matter, and require the other board members to take all such actions, including appropriate description of options, recommendations, analysis and ultimate decision and vote.

The Regional Center and Ms. Sigala suggested Conflict Resolution Plan for this conflict of interest is as follows:

1. Ms. Sigala will have no interaction as a board member with any matter that might impact Helpful Hands, and specifically she will recuse herself from any vote on any matter that could impact Helpful Hands.

- 2. Ms. Sigala will, in every conceivable manner, cease interacting with the Board on any matter that could conceivably impact Helpful Hands.
- 3. Ms. Sigala will not participate as a board member in the consideration, preparation, review, presentation, formulation or approval of any report, plan, opinion, recommendation or action regarding Helpful Hands or any actions creating policy or approaches that would impact Helpful Hands and other respite, personal assistance and daycare vendors.
- 4. Ms. Sigala will not review or participate as a board member in any discussions, recommendations, or decisions about Purchase of Service (POS) authorizations for Helpful Hands and other respite, personal assistance and daycare vendors.
- 5. Ms. Sigala will not review or in any way participate as a board member in the preparation, consideration, or any follow-up related to Special Incident Reports from or about Helpful Hands and other respite, personal assistance and daycare vendors.
- 6. Ms. Sigala will not create, review, or in any way participate as a board member in, any corrective action plans for Helpful Hands and other respite, personal assistance and daycare vendors.
- 7. Ms. Sigala will not participate as a board member in any discussions, recommendations, action, or resolution of any complaints pertaining to Helpful Hands and other respite, personal assistance and daycare vendors.
- 8. Ms. Sigala will take no part as a board member in decisions regarding vendor appeals, or fair hearings involving Helpful Hands and other respite, personal assistance and daycare vendors.
- 9. Ms. Sigala will not as a board member access vendor files or other information the regional center maintains about Helpful Hands and respite, personal assistance and daycare vendors, either in electronic or hard copy form.
- 10. Ms. Sigala shall not participate as a board member in developing, creating, or recommending any POS policies, or other policies, that might apply to Helpful Hands and other respite, personal assistance and daycare vendors. Instead, these tasks will become the responsibility of the other board members.
- 11. Ms. Sigala will not be involved as a board member in the negotiation, discussion, obligation or commitment of NLACRC to a course of action involving Helpful Hands and other respite, personal assistance and daycare vendors.
- 12. The NLACRC Board of Trustees will be informed about this Plan of Action, and they will be informed of the need to ensure that Ms. Sigala has no involvement whatsoever in any action or business whatsoever involving or affecting Helpful Hands and other respite, personal assistance and daycare vendors.

- These restrictions only apply to Helpful Hands and policies impacting other respite, personal assistance and daycare vendors. The bulk of Ms. Sigala's duties with regard to a vast array of other Board issues and other vendors will remain unchanged, unless the Board work would in any way impact Helpful Hands. This amounts to a reassignment of a small portion of her duties and will not reduce the value and productivity that Ms. Sigala provides to the NLACRC Board.
- 14. In the event the board member changes to a different respite agency during the course of her term, each provision of this plan shall apply to with regard to the new agency for the duration of the trustee's term on the board.
- NLACRC has received approval from its Board of Trustees regarding this Conflict Resolution Plan.

V. Request Approval of Conflict Resolution Plan

For the reasons provided above, and in accordance with the Conflict Resolution Plan set forth above, North Los Angeles County Regional Center hereby requests that DDS approve the Conflict Resolution Plan in this matter.

Respectfully submitted,

Chio SV (Oct 9, 2022 22:03 PDT)

Rocio Sigala, NLACRC Board Second Vice President

Date: 10.09.2022

Ana Quiles (Oct 10, 2022 04:27 PDT) By:

Ana Quiles, NLACRC Board President

Date: 10.10.2022

By:

Ruth Janka, Executive Director, NLACRC

Date: 10/10/2022

Reset Form

CONFLICT OF INTEREST REPORTING STATEMENT DS 6016 (Rev. 08/2013)

The duties and responsibilities of your position with the regional center require you to file this Conflict of Interest Reporting Statement. The purpose of this statement is to assist you, the regional center and the Department of Developmental Services (DDS) to identify any relationships, positions or circumstances involving you which may create a conflict of interest between your regional center duties and obligations, and any other financial interests and/or relationships that you may have. In order to be comprehensive, this reporting statement requires you to provide information with respect to your financial interests.

A "conflict of interest" generally exists if you have one or more personal, business, or financial interests, or relationships that would cause a reasonable person with knowledge of the relevant facts to question your impartiality with respect to your regional center duties. The specific circumstances and relationships which create a conflict of interest are set forth in the California Code of Regulations, title 17, sections 54500 through 54530. You should review these provisions to understand the specific financial interests and relationships that can create a conflict of interest.

Please answer the following questions to the best of your knowledge. If you find a question requires further explanation and/or there is not enough space to thoroughly answer the question, please attach as many additional sheets as necessary, and refer to the question number next to your answer. If the regional center identifies a conflict involving you, it will be required to prepare a conflict resolution plan. Some relevant definitions have been provided in the footnotes to assist you in responding to this statement.

You are required to file this Reporting Statement within 30 days of beginning your employment with the regional center or from the date that you are appointed to the regional center board or advisory committee board. You are then required to file an annual Reporting Statement by August 1st of every year while you remain employed with the regional center or while you are a member of the regional center board or advisory committee board. You must also file a Reporting Statement within 30 days of any change in your status that could result in a conflict of interest. Circumstances that can constitute a change in your status that can require you to file an updated Reporting Statement are described below in footnote one.

A. INFORMATION OF REPORTIN	NG INDIVIDUAL		
Name: Rocio Sigala		Regional Center:	North Los Angeles County Regional Center
Regional Center Position/Title:	■ Governing Boa □ Vendor Adviso □ Contractor	ard Member ory Committee sitting on Board Agent	□ Executive Director□ Employee□ Consultant
Reporting Status: If a change in status, date and	☐ Annual ☐ Change of State		
ir a change in status, date and	a circumstance of ci	nange in status:	
Please list your job title and o Board Member	lescribe your job du	ties at the regional center.	
2nd Vice President	Ø¥.		

Change of status includes a previously unreported activity that should have been reported, change in the circumstance of a previously reported activity, change in financial interest, familial relationship, legal commitment, change in regional center position or duties, change in regional center, or change to outside position or duties. See California Code of Regulations, title 17, sections 54531(d) and 54532(d).

		☐ Executive Director☐ Employee/Other
2.	Do you or a family member ² work for any entity or organization that is a regional center produced yes on a normal normal normal normal center consumers. If the provider or contractor is a state or local governmental entity and describe your job of governmental entity.	ervices it provides for the ocal governmental entity,
	Yes. My father-in-law, Federico Vasquez works as a Caregiver with NLACRC vendor agenc sister Belen Sigala as well. $ \mathcal{R} \zeta $	y: Helpful Hands and my
3.	Do you or a family member own or hold a position ³ in an entity or organization that is a recontractor? yes no If yes, provide the name of the entity or organization, provides for the regional center or regional center consumers, and describe your or your finterest.	describe what services it
4.	Are you a regional center advisory committee board member?	to the regional center or
5.	If you are a regional center advisory committee board member and answered yes to all the above, do any of the following apply to you: (a) are you an officer of the regional center by purchasing services from a regional center provider; or (c) do you vote on matters where y interest? yes no If yes, please explain.	ooard; (b) do you vote on

Governing Board Member ☐ Vendor Advisory on Board

² Family member includes your spouse, domestic partner, parents, stepparents, grandparents, siblings, stepsiblings, children, stepchildren,

grandchildren, parent-in-laws, brother-in-laws, sister-in-laws, son-in-laws and daughter--in-laws. See California Code of Regulations, title 17, sections 54505(f).

To purposes of this question, hold a position generally means that you or a family member is a director, officer, owner, partner, employee, or shareholder of an entity or organization that is a regional center provider or contractor. For a specific description of positions that create a conflict of interest in a regional center provider or contractor see the California Code of Regulations, title 17, sections 54520 and 54526.

		☐ Executive Director☐ Employee/Other
6.	Do any of the decisions you make when performing your job duties with the regional cerfinancially benefit you or a family member ⁴ ? [Note: Governing board members do not hat question if the financial benefit would be available to regional center consumers or their factory yes on one of the property of the property of the performance of the performing your job duties with the regional certain the regional center of the property of the performing your job duties with the regional certain the performing your job duties with the regional certain the performing your job duties with the regional certain the performing your job duties with the regional certain the performing your job duties with the regional certain the performing your job duties with the regional certain the performance of the performance	ve to answer "yes" to thi
7.	Are you responsible for negotiating, making, ⁵ executing or approving contracts on behavener? ✓ yes ☐ no If yes, please explain. I will be approving contracts over \$250, 000.	If of the regional
8.	· · · · · · · · · · · · · · · · · · ·	- If yes, did you negotiate - If yes, please explain.
9.	Do any of your family members have a financial interest in any contract with the regional configuration of the regional configuration of the regional configuration.	•

☑ Governing Board Member☑ Vendor Advisory on Board

⁴ Generally, a decision can financially benefit you or a family member if the decision can either directly or indirectly cause you or a family member to receive a financial gain or avoid a financial loss. For a specific description of the types of decisions that can result in a financial benefit to you or a family member see the California Code of Regulations, title 17, sections 54522 and 54527.

⁵ California Code of Regulations, title 17, sections 54523(b)(2) and 54528(b)(2) describes the types of conduct which constitute involvement in the making of a contract.

⁶ For purposes of questions 8 and 9, a financial interest in a contract generally means any direct or indirect interest in a contract that can

⁶ For purposes of questions 8 and 9, a financial interest in a contract generally means any direct or indirect interest in a contract that can cause you or a family member to receive any sort of financial gain or avoid any sort of financial loss irrespective of the dollar amount. California Code of Regulations, title 17, sections 54523 and 54528 define when financial interests in a contract will occur.

	☐ Vendor Advisory on Board☐ Executive Director☐ Employee/Other
 10. Do you evaluate employment applications or contract bids that are submitted by your formula. □ yes □ no If yes, please explain. 	amily member(s)?
11. Your job duties require you to act in the best interests of the regional center and region have any circumstances or other financial interests not already discussed above that w in the best interests of the regional center or its consumers? □ yes □ no If yes,	ould prevent you from acting
D. ATTESTATION	
B. ATTESTATION	
Rocio Sigala (print name) HEREBY CONFIRM that I have	
regional center's Conflict of Interest Policy and that my responses to the questions in this Statement are complete, true, and correct to the best of my information and belief. I agr any information that might indicate that this statement is not accurate or that I have no center's Conflict of Interest Policy or the applicable conflict of interest laws, I will notify the individual immediately. I understand that knowingly providing false information on this C Statement shall subject me to a civil penarty in an amount up to fifty thousand dollars (\$50,0 Institutions Code section 4626.	ee that if I become aware of t complied with the regional regional center's designated Conflict of Interest Reporting
Signature DateDate	28.2022
INTERNAL USE ONLY Date this Statement was received by Poviewer:	
Date this Statement was received by Reviewer: The reporting individual does does not have a present potential	L conflict of interest
	Review Completed
	10/22

☑ Governing Board Member

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

Board Member Responsibilities

The role of the Board of Trustees of the North Los Angeles County Regional Center (NLACRC) is to make policy for the operation of the regional center. Policy is developed through recommendations from board committees and the executive director; direct operation is delegated to the executive director who is hired by the board. Staff recommendations for policy initiation or modification go to the executive director who, in turn, refers them to the board and/or an appropriate board committee.

Your responsibility as a member of the Board of Trustees of the NLACRC would include, but not be limited to:

- Attendance, either virtual or in-person, at monthly Board of Trustees meetings, usually held on the second Wednesday of each month at at one of NLACRC's three offices at 6:30 p.m.
- Membership and attendance on one (1) or more board committees.
- Board participation and advocacy will be focused on systems issues; issues regarding an individual consumer, family or program will be directed to the Executive Director's Office.
- Identification of any potential conflict of interest as identified in Welfare and Institutions Code, Sections 4626 and 4627 during the board member's term on the board will be reported to the administrative assistant to the board.
- Completion of the Conflict of Interest Statement annually and MediCal Provider Enrollment Form as applicable due to the regional center's funding and contract with the State of California, Department of Developmental Services.
- Completion of a W-9 form by board members who seek reimbursement for childcare or personal care services under the Board Member Support policy.
- Adherence to the board's Code of Conduct.
- Attendance at the annual board orientation for all newly seated board members.
- Participation in board-coordinated trainings and the annual board retreat.
- Visitation to NLACRC vendored programs is expected in order that board members may be informed about the developmental disabilities service system. Programs include a wide variety of residential and day programs as well as those providers who deliver a specific service (e.g. school setting or transportation).

[policy.bd.bdmbr.resps] 01-13-93 Revised: 08-16-2021 Adopted: 9-9-2021

EXHIBIT B

North Los Angeles County Regional Center Board of Trustees Policy Statement

Second Vice President

The office of second vice president is established in Article V, Section 7 of the bylaws of North Los Angeles County Regional Center. The second vice president shall be a member of the Board of Trustees and elected by the Board of Trustees. The term of office shall be one (1) year with no limitation on the number of terms. The second vice president shall serve on the Executive Committee.

The second vice president shall:

- Act for the president and/or the first vice president in their absence or incapacity, performing their duties to include:
 - 1. Calling meetings of the Board of Trustees.
 - 2. Presiding at meetings of the trustees and all Executive Committee meetings.
 - 3. Executing, on behalf of the corporation, any and all instruments necessary to transact the business of the corporation in accordance with such authority as may be granted to him/her by the Board of Trustees.
- · Act as parliamentarian for the Board of Trustees.
- Exercise such other powers and perform such other duties as may be prescribed by theBoard of Trustees and the bylaws.

EXHIBIT C

NOTIFICATION OF CONFLICT OF INTEREST, AND RESUBMISSION OF CONFLICT RESOLUTION PLAN

ANA QUILES - NLACRC BOARD MEMBER NORTH LOS ANGELES COUNTY REGIONAL CENTER

I. Law Governing Conflicts of Interest

The prohibition against Regional Center employee or board member conflicts of interest has its origin in section 4626 of the Welfare & Institutions Code. Subsection (d) of said section 4626 provides: "The department shall ensure that no regional center employee or board member has a conflict of interest with an entity that receives regional center funding...."

That general prohibition is explained in more detail in Title 17 of the California Code of Regulations, section 54520 "Positions Creating Conflicts of Interests for Regional Center Governing Board Members and Executive Directors," which provides in pertinent part:

- (a) A conflict of interest exists when a regional center governing board member...or <u>family member</u> of such person is any of the following for a business entity, entity, or provider as defined in section 54505 of these regulations...:
 - (1) a governing board member
 - (2) a board committee member
 - (3) a director
 - (4) an officer
 - (5) an owner
 - (6) a partner
 - (7) a shareholder
 - (8) a trustee
 - (9) an agent
 - (10) an employee
 - (11) a contractor
 - (12) a consultant
 - (13) a person who holds any position of management
 - (14) a person who has decision or policy making authority. (Emphasis added.)

Section 54505 states that: "Business Entity, Entity or Provider" means any individual or business venture from whom or from which the regional center purchases, obtains or secures goods or services to conduct its operations."

Further, Section 54533 states:

(a) When a present or potential conflict of interest is identified for a regional center <u>board member</u>, Executive Director, employee, contractor, agent, or consultant, the present or potential conflict

shall be either eliminated or mitigated and managed through a Conflict Resolution Plan, or the individual shall resign his or her position with the regional center or regional center governing board.

II. Potential Conflict of Ms. Quiles

Ana Quiles is a Board Member at North Los Angeles County Regional Center (hereinafter "NLACRC" or "the Regional Center"). Ms. Quiles is a Board Member and the Board President and as such she participates on the Strategic Planning, Administrative Affairs, Executive, Nominating and Post-Retirement Medical Trust Committees. NLACRC Executive Director Ruth Janka confirms that Ms. Quiles is a productive and valued member of the Board of Trustees. Attached as **Exhibit A** is Ms. Quiles completed Conflict of Interest Reporting Statement. As part of the Conflict Resolution Plan, she will remain in her position on the Board of Trustees.

Ms. Quiles' has disclosed the following conflicts' of interest:

- A. Her mother, Maria Elena Martinez and sister, Martha Martinez, are employed with Caring Family Supports, a vendor of NLACRC. Her mother and sister, provide respite, personal assistance and day care for her Ms. Quiles' daughters (consumers of NLACRC).
- B. Her sister, Adriana Martinez; father, Luis Martinez; and brother, Gabriel Martinez are employed with Caring Family Supports, a vendor of NLACRC. Her sister, father and brother provide respite and personal assistance for Ms. Quiles' nephews (consumers of NLACRC).

This creates a direct conflict for Ms. Quiles as defined by regulation. This document constitutes a disclosure of these conflicts, a Conflict Resolution Plan to mitigate any adverse consequences from this relationship, and a request for re-approval of the Conflict Resolution Plan by DDS.

In short, this Conflict Resolution Plan will have Ms. Quiles remain in her position on the NLACRC Board of Trustees, Board President, and limit her actions so that she in no way participates in any role whatsoever as a board member with regard to Caring Family Supports or any other vendor who provides respite, personal assistance, and day care services.

III. Facts

The plan of action proposed herein is designed to eliminate any adverse consequences from the conflict. To better understand how the plan will eliminate any adverse consequences, this request will first provide the facts regarding Ms. Quiles' duties and responsibilities as the Board President and her family member's roles in providing respite, personal assistance and/or day care services based on their employment with Caring Family Supports.

A. Ms. Quiles' Duties as Board Member

The role of the Board of Trustees of the North Los Angeles County Regional Center (NLACRC) is to make policy for the operation of the Regional Center. Policy is developed through recommendations from board committees and the Executive Director; direct operation is delegated to the Executive Director who is hired by the board. Staff recommendations for policy initiation or modification go to the Executive Director who, in turn, refers them to the board and/or an appropriate board committee. A copy of the Board Member Responsibilities is attached as **Exhibit B**. The responsibilities as a member of the NLACRC Board of Trustees would include, but not limited to:

- 1. Attendance, either virtual or in-person, at monthly Board of Trustees meetings, usually held on the second Wednesday of each month at one of NLACRC's three offices at 6:30 p.m.
 - 2. Membership and attendance on one (1) or more board committees.
- 3. Board participation and advocacy will be focused on systems issues; issues regarding an individual consumer, family or program will be directed to the Executive Director's Office.
- 4. Identification of any potential conflict of interest as identified in Welfare and Institutions Code, Sections 4626 and 4627 during the board member's term on the board will be reported to the administrative assistant to the board.
- 5. Completion of the Conflict of Interest Statement annually and MediCal Provider Enrollment Form as applicable due to the regional center's funding and contract with the State of California, Department of Developmental Services.
- 6. Completion of a W-9 form by board members who seek reimbursement for childcare or personal care services under the Board Member Support policy.
 - 7. Adherence to the board's Code of Conduct.
- 8. Attendance at the annual board orientation for all newly seated board members.
 - 9. Participation in board-coordinated trainings and the annual board retreat.
- 10. Visitation to NLACRC vendored programs is expected in order that board members may be informed about the developmental disabilities service system. Programs include a wide variety of residential and day programs as well as those providers who deliver a specific service (e.g. school setting or transportation).

Under the suggested Conflict Resolution Plan, Ms. Quiles will remain in her board position, but will be strictly regulated so that she has no role or involvement whatsoever with any matter that might conceivably impact Caring Family Supports, or a vendor that provides respite, day care and personal assistance services.

B. Ms. Quiles Duties as Board President

The office of Board President is established in Article V, Section 5 of the bylaws of North Los Angeles County Regional Center. The Board President shall be a member of the Board of Trustees and elected by the Board of Trustees. The terms of office shall be one (1) year with no limitation on the number of terms. A copy of the Board President Responsibilities is attached as **Exhibit C.** The Board President shall serve as the chairperson of the Post-Retirement Medical Trust, Executive Committees and a member of the Administrative Affairs, Strategic Planning, and Nominating Committees.

The Board President shall:

- 1. Call meetings of the Board of Trustees.
- 2. Preside at meetings of the Trustees and all Executive Committee meetings.
- 3. Execute, on behalf of the corporation, any and all instruments necessary to transact the business of the corporation in accordance with such authority as may be granted to him/her by the Board of Trustees.
- 4. Exercise such other powers and perform such other duties as may be prescribed by the Board of Trustees and the bylaws.
 - 5. Be an ex-officio member of all committees of the Board of Trustees.
 - C. Ms. Quiles' Family Members' Duties at Caring Family Supports

Caring Family Supports is a service provider to NLACRC that provides the following services:

- 1. Respite Services
- 2. Personal Assistance
- 3. Day Care

As a respite worker for Caring Family Supports, Maria Elena Martinez and Martha Martinez provides respite services solely to Ms. Quiles' daughters who are NLACRC consumers. In addition, Adriana Martinez, Luis Martinez, and Gabriel Martinez provides respite services solely to Ms. Quiles' nephews who are NLACRC consumers. Their respite duties and responsibilities are as follows:

1. Review and understands Individual, Family and/or Home Provider Needs;

- 2. Provide individual receiving services with the supports necessary to meet their need;
 - 3. Understand what to do in case of an emergency;
- 4. Under the direction of the Co-Founder, has a list of activities appropriate for each individual;
 - 5. Attends in-service trainings and staff meetings;
 - 6. Any other job-related duties as assigned by Co-Founders.

As a personal assistant for Caring Family Supports, Maria Elena Martinez and Martha Martinez provides personal assistance and day care services solely to Ms. Quiles' daughters who are NLACRC consumers. In addition Adriana Martinez, Luis Martinez and Gabriel Martinez provides personal assistance services solely to Ms. Quiles' nephew who are NLACRC consumers. Their personal assistance duties and responsibilities are as follows:

- 1. Review and understands Individual, Family and/or Home Provider Needs;
- 2. Provide individual receiving services with the supports necessary to meet their need;
 - 3. Understand what to do in case of an emergency;
- 4. Under the direction of the Co-Founder, has a list of activities appropriate for each individual;
 - 5. Attends in-service trainings and staff meetings;
 - 6. Any other job-related duties as assigned by Co-Founders.

Day care is a sub-code under the Personal Assistance vendorization to distinguish if the personal assistance is for attendant care (i.e. feeding, toileting) or as a means for day care (i.e. child care)

IV. Conflict Resolution Plan

The Regional Center and its Executive Director, Ruth Janka, have concluded that Ms. Quiles provides great value to the Board of NLACRC. After consideration of the totality of the circumstances and a careful review of the facts, the Executive Director believes it is in the best interests of the Regional Center to create and implement a Conflict Resolution Plan to eliminate any adverse consequences from this relationship and seek approval of this plan by DDS.

Initially, the first step in the Conflict Resolution Plan is to allow Ms. Quiles to remain in her position on the Board of Trustees, Board President but to cease any activity or action that might in any way impact Caring Family Supports. This will eliminate any instance in which Ms. Quiles would have to vote, give her opinion, analyze, assess the performance of, or take action for or against Caring Family Supports, and would eliminate any possible action by Ms. Quiles to recommend Caring Family Supports or other similar available respite, personal assistance and day care vendors.

The second part of the plan is to insulate Ms. Quiles from any involvement whatsoever with the generic type of provider like Caring Family Supports. She would recuse herself from participation in any vote regarding, drafting, planning, or discussion of rules, policies, or restrictions that would impact Caring Family Supports and all other respite, personal assistance and day care vendors. Any duties that potentially relate to Caring Family Supports or generic policies applicable to such a vendor represent a small portion of the valuable duties she performs on behalf of the Regional Center, and these duties can be easily delegated to other Regional Center board members. Like other board members, Ms. Quiles develops policy through recommendations from the Executive Director, and thus works with numerous vendors on a variety of services.

Further, as the Conflict Resolution Plan details below, when any matter arises with regard to Caring Family Supports or other respite, personal assistance day care vendors, she will agree not to be involved in the discussion of the matter, the presentation of options to the Board, or the decision or vote on such matter. NLACRC will require Ms. Quiles to abstain from discussion with, or involvement in the matter, and require the other board members to take all such actions, including appropriate description of options, recommendations, analysis and ultimate decision and vote.

The Regional Center and Ms. Quiles suggested Conflict Resolution Plan for this conflict of interest is as follows:

- 1. Ms. Quiles will have no interaction as a board member with any matter that might impact Caring Family Supports, and specifically she will recuse herself from any vote on any matter that could impact Caring Family Supports.
- 2. Ms. Quiles will, in every conceivable manner, cease interacting with the Board on any matter that could conceivably impact Caring Family Supports.
- 3. Ms. Quiles will not participate as a board member in the consideration, preparation, review, presentation, formulation or approval of any report, plan, opinion, recommendation or action regarding Caring Family Supports or any actions creating policy or approaches that would impact Caring Family Supports and other respite, personal assistance vendors.
- 4. Ms. Quiles will not review or participate as a board member in any discussions, recommendations, or decisions about Purchase of Service (POS) authorizations for Caring Family Supports and other, respite and personal assistance vendors.

- 5. Ms. Quiles will not review or in any way participate as a board member in the preparation, consideration, or any follow-up related to Special Incident Reports from or about Caring Family Supports and other respite and personal assistance and day care vendors.
- 6. Ms. Quiles will not create, review, or in any way participate as a board member in, any corrective action plans for Caring Family Supports and other respite, personal assistance and day care vendors.
- 7. Ms. Quiles will not participate as a board member in any discussions, recommendations, action, or resolution of any complaints pertaining to Caring Family Supports and other respite, personal assistance and day care vendors.
- 8. Ms. Quiles will take no part as a board member in decisions regarding vendor appeals, or fair hearings involving Caring Family Supports and other respite, personal assistance and day care vendors.
- 9. Ms. Quiles will not as a board member access vendor files or other information the regional center maintains about Caring Family Supports and other respite, personal assistance and day care vendors, either in electronic or hard copy form.
- 10. Ms. Quiles shall not participate as a board member in developing, creating, or recommending any POS policies, or other policies, that might apply to Caring Family Supports and other respite, personal assistance and day care vendors. Instead, these tasks will become the responsibility of the other board members.
- 11. Ms. Quiles will not be involved as a board member in the negotiation, discussion, obligation or commitment of NLACRC to a course of action involving Caring Family Supports and other respite, personal assistance and day care vendors.
- 12. The NLACRC Board of Trustees will be informed about this Plan of Action, and they will be informed of the need to ensure that Ms. Quiles has no involvement whatsoever in any action or business whatsoever involving or affecting Caring Family Supports and other respite, personal assistance and day care vendors.
- 13. These restrictions only apply to Caring Family Supports and policies impacting other respite, personal assistance and day care vendors. The bulk of Ms. Quiles' duties with regard to a vast array of other Board issues and other vendors will remain unchanged, unless the Board work would in any way impact Caring Family Supports. This amounts to a reassignment of a small portion of her duties and will not reduce the value and productivity that Ms. Quiles provides to the NLACRC Board.
- 14. In the event the board member changes to a different respite, personal assistance and day care agency during the course of her term, each provision of this plan shall apply to with regard to the new agency for the duration of the trustee's term on the board.

15. NLACRC has received approval from its Board of Trustees regarding this Conflict Resolution Plan.

V. Request Re-Approval of Conflict Resolution Plan

For the reasons provided above, and in accordance with the Conflict Resolution Plan set forth above, North Los Angeles County Regional Center hereby requests that DDS reapprove the Conflict Resolution Plan in this matter.

Respectfully submitted,

	سلاملا
Bv:	Ana Quiles (Jul 26, 2022 15:07 PDT)

Ana Quiles, NLACRC Board Member

7-26-22

By: Ruth Janka (Jul 26, 2022 18:05 PDT)

Ruth Janka, Executive Director, NLACRC

7/26/22 Date:

Reset Form

63

CONFLICT OF INTEREST REPORTING STATEMENT DS 6016 (Rev. 08/2013)

The duties and responsibilities of your position with the regional center require you to file this Conflict of Interest Reporting Statement. The purpose of this statement is to assist you, the regional center and the Department of Developmental Services (DDS) to identify any relationships, positions or circumstances involving you which may create a conflict of interest between your regional center duties and obligations, and any other financial interests and/or relationships that you may have. In order to be comprehensive, this reporting statement requires you to provide information with respect to your financial interests.

A "conflict of interest" generally exists if you have one or more personal, business, or financial interests, or relationships that would cause a reasonable person with knowledge of the relevant facts to question your impartiality with respect to your regional center duties. The specific circumstances and relationships which create a conflict of interest are set forth in the California Code of Regulations, title 17, sections 54500 through 54530. You should review these provisions to understand the specific financial interests and relationships that can create a conflict of interest.

Please answer the following questions to the best of your knowledge. If you find a question requires further explanation and/or there is not enough space to thoroughly answer the question, please attach as many additional sheets as necessary, and refer to the question number next to your answer. If the regional center identifies a conflict involving you, it will be required to prepare a conflict resolution plan. Some relevant definitions have been provided in the footnotes to assist you in responding to this statement.

You are required to file this Reporting Statement within 30 days of beginning your employment with the regional center or from the date that you are appointed to the regional center board or advisory committee board. You are then required to file an annual Reporting Statement by August 1st of every year while you remain employed with the regional center or while you are a member of the regional center board or advisory committee board. You must also file a Reporting Statement within 30 days of any change in your status that could result in a conflict of interest. Circumstances that can constitute a change in your status that can require you to file an updated Reporting Statement are described below in footnote one.

A. INFORMATION OF REPORTING INDIVIDUAL				
Name: Ana Laura Quiles		Regional Center: _	North Los Angeles County Regional Center	
Regional Center Position/Title:	■ Governing Board□ Vendor Advisory G□ Contractor	Member Committee sitting on Board ☐ Agent	□ Executive Director□ Employee□ Consultant	
Reporting Status: ☐ Annual ☐ New Appointment (dat ☐ Change of Status¹ If a change in status, date and circumstance of change in status:				
Please list your job title and de Regional Center Board President	, ,	s at the regional center.		

EXHIBIT A

¹ Change of status includes a previously unreported activity that should have been reported, change in the circumstance of a previously reported activity, change in financial interest, familial relationship, legal commitment, change in regional center position or duties, change in regional center, or change to outside position or duties. See California Code of Regulations, title 17, sections 54531(d) and 54532(d).

		☐ Employee/Other
2.	Do you or a family member ² work for any entity or organization that is a regional center provide yes on the center or regional center or regional center consumers. If the provider or contractor is a state or provide the specific name of the state or local governmental entity and describe your job governmental entity.	services it provides for the ocal governmental entity,
	Martha Martinez my sister and Maria Elena Martinez my mother provide respite and person daughters Angela and Ariana Quiles. Adriana, Gabriel my brother and sister along with my dad Luis Martinez provide respite and my nephews. Services are provided through Caring Family Supports.	•
3.	Do you or a family member own or hold a position ³ in an entity or organization that is a r contractor? \square yes \square no If yes, provide the name of the entity or organization, provides for the regional center or regional center consumers, and describe your or your interest.	describe what services it
	Caring Family Supports provides respite, day care and personal assistance center consumers.	services to regional
4.	Are you a regional center advisory committee board member?	s to the regional center or
5.	If you are a regional center advisory committee board member and answered yes to all the above, do any of the following apply to you: (a) are you an officer of the regional center purchasing services from a regional center provider; or (c) do you vote on matters where interest?	board; (b) do you vote on

☑ Governing Board Member☑ Vendor Advisory on Board☑ Executive Director

² Family member includes your spouse, domestic partner, parents, stepparents, grandparents, siblings, stepsiblings, children, stepchildren, grandchildren, parent-in-laws, brother-in-laws, sister-in-laws, son-in-laws and daughter-in-laws. See California Code of Regulations, title 17, sections 54505(f).

sections 54505(f).

Tor purposes of this question, hold a position generally means that you or a family member is a director, officer, owner, partner, employee, or shareholder of an entity or organization that is a regional center provider or contractor. For a specific description of positions that create a conflict of interest in a regional center provider or contractor see the California Code of Regulations, title 17, sections 54520 and 54526.

		☐ Employee/Other
6.	Do any of the decisions you make when performing your job duties with the regional cerfinancially benefit you or a family member ⁴ ? [Note: Governing board members do not ha question if the financial benefit would be available to regional center consumers or their fa yes no If yes, please explain. See #2 above	ve to answer "yes" to this
7.	Are you responsible for negotiating, making, sexecuting or approving contracts on behavener?	olf of the regional
	A a member of the Board of Trustees, I will be voting to approve contracts.	
8.		- If yes, did you negotiate - If yes, please explain.
	A a member of the Board of Trustees, I will be voting to approve contracts.	
9.	Do any of your family members have a financial interest in any contract with the regional configuration of the regional contract on behalf of the regional configuration.	
	see #2 above	

☑ Governing Board Member☑ Vendor Advisory on Board☑ Executive Director

⁴ Generally, a decision can financially benefit you or a family member if the decision can either directly or indirectly cause you or a family member to receive a financial gain or avoid a financial loss. For a specific description of the types of decisions that can result in a financial benefit to you or a family member see the California Code of Regulations, title 17, sections 54522 and 54527.

benefit to you or a family member see the California Code of Regulations, title 17, sections 54522 and 54527.

⁵ California Code of Regulations, title 17, sections 54523(b)(2) and 54528(b)(2) describes the types of conduct which constitute involvement in the making of a contract.

⁶ For purposes of questions 8 and 9, a financial interest in a contract generally means any direct or indirect interest in a contract that can cause you or a family member to receive any sort of financial gain or avoid any sort of financial loss irrespective of the dollar amount. California Code of Regulations, title 17, sections 54523 and 54528 define when financial interests in a contract will occur.

		☐ Employee/Other
	Do you evaluate employment applications or contract bids that are submitted by your family member(s)? yes no If yes, please explain.	
ha	our job duties require you to act in the best interests of the regional center and regional over any circumstances or other financial interests not already discussed above that would the best interests of the regional center or its consumers?	d prevent you from acting
B. AT	TESTATION	
regional Statemany informal center individ Statem	Laura Quiles (print name) HEREBY CONFIRM that I have ral center's Conflict of Interest Policy and that my responses to the questions in this Connent are complete, true, and correct to the best of my information and belief. I agree formation that might indicate that this statement is not accurate or that I have not cr's Conflict of Interest Policy or the applicable conflict of interest laws, I will notify the redual immediately. I understand that knowingly providing false information on this Connent shall subject me to a civil penalty in an amount up to fifty thousand dollars (\$50,000 interest Code section 4626.	offlict of Interest Reporting that if I become aware of complied with the regional gional center's designated offlict of Interest Reporting
	Ana Laura Quiles Digitally signed by Ana Laura Quiles Date: 2022.06.20 13:08:03 -07'00' Date Date Date	2022
	INTERNAL USE ONLY	
Date this Statement was received by Reviewer:		
	The reporting individual does does not have a present potential co	onflict of interest
	Signature of Designated Reviewer Date Rev	iew Completed

☑ Governing Board Member☑ Vendor Advisory on Board☑ Executive Director

North Los Angeles County Regional Center Board of Trustees Policy

Board Member Responsibilities

The role of the Board of Trustees of the North Los Angeles County Regional Center (NLACRC) is to make policy for the operation of the regional center. Policy is developed through recommendations from board committees and the executive director; direct operation is delegated to the executive director who is hired by the board. Staff recommendations for policy initiation or modification go to the executive director who, in turn, refers them to the board and/or an appropriate board committee.

Your responsibility as a member of the Board of Trustees of the NLACRC would include, but not be limited to:

- Attendance, either virtual or in-person, at monthly Board of Trustees meetings, usually held on the second Wednesday of each month at at one of NLACRC's three offices at 6:30 p.m.
- Membership and attendance on one (1) or more board committees.
- Board participation and advocacy will be focused on systems issues; issues regarding an individual consumer, family or program will be directed to the Executive Director's Office.
- Identification of any potential conflict of interest as identified in Welfare and Institutions Code, Sections 4626 and 4627 during the board member's term on the board will be reported to the administrative assistant to the board.
- Completion of the Conflict of Interest Statement annually and MediCal Provider Enrollment Form as applicable due to the regional center's funding and contract with the State of California, Department of Developmental Services.
- Completion of a W-9 form by board members who seek reimbursement for childcare or personal care services under the Board Member Support policy.
- Adherence to the board's Code of Conduct.
- Attendance at the annual board orientation for all newly seated board members.
- Participation in board-coordinated trainings and the annual board retreat.
- Visitation to NLACRC vendored programs is expected in order that board members may
 be informed about the developmental disabilities service system. Programs include a wide
 variety of residential and day programs as well as those providers who deliver a specific
 service (e.g. school setting or transportation).

[policy.bd.bdmbr.resps] 01-13-93 Revised: 08-16-2021 Adopted: 9-9-2021

North Los Angeles County Regional Center Board of Trustees Policy Statement

President

The office of president is established in Article V, Section 5 of the bylaws of North Los Angeles County Regional Center. The president shall be a member of the Board of Trustees and elected by the Board of Trustees. The term of office shall be one (1) year with the number of consecutive terms limited to two (2). The president shall serve on the Executive Committee.

The president shall:

- Call meetings of the Board of Trustees.
- Preside at meetings of the trustees and all Executive Committee meetings.
- Execute, on behalf of the corporation, any and all instruments necessary to transact the business of the corporation in accordance with such authority as may be granted to him/her by the Board of Trustees.
- Exercise such other powers and perform such other duties as may be prescribed by the Board of Trustees and the bylaws.
- Be an ex-officio member of all committees of the Board of Trustees.

[policy.pre] Adopted 09-09-87

EXHIBIT C

BOARD & BOARD COMMITTEE LIST

FY 2022-23

Board of Trustees

Ana Quiles – President & Chair Alma Rodriguez – First V.P. Rocio Sigala – Second V.P. Lillian Martinez - Secretary David Coe - Treasurer Open-ARCA Delegate

Leticia Garcia -ARCA Alternate Angelina Martinez

Andrew Ramirez
Brian Gatus
Cathy Blin
Gabriela Herrera
George Alvarado
Jennifer Koster
Jordan Feinstock
Nicholas Abrahms
Sharmila Brunjes
Sylvia Brooks Griffin

Administrative Affairs Evelyn McOmie, Staff

Suad Bisogno - VAC Chair

David Coe, Chair

Alma Rodriguez Ana Quiles Leticia Garcia Lillian Martinez

Rocio Sigala

VAC Representative
Bob Erio

<u>Consumer Advisory</u> Jennifer Koster, Chair

Executive
Ruth Janka, Staff
Ana Quiles, Chair
Alma Rodriguez
Angelina Martinez

David Coe Lillian Martinez Rocio Sigala Leticia Garcia

Consumer Services Evelyn McOmie, Staff

Andrew Ramirez, Chair Brian Gatus

Cathy Blin
Gabriela Herrera
George Alvarado
Nicholas Abrahms
Rocio Sigala
Sharmila Brunjes
Angelina Martinez
VAC Representative

VAC Representative Erica Beall

Government & Community Relations

Robert Dhondrup, Staff Jordan Feinstock, Chair

Andrew Ramirez Brian Gatus Cathy Blin George Alvarado

Nicholas Abrahms

Rocio Sigala

Sharmila Brunjes Sylvia Brooks Griffin Angelina Martinez VAC Representative Andrea Devers

Nominating

Liz Chavez, Staff Lillian Martinez, Chair

Ana Quiles
David Coe
Jennifer Koster
VAC Representative
Suad Bisogno

Strategic Planning Ruth Janka, Staff Leticia Garcia, Chair

Ana Quiles
Alma Rodriguez
Brian Gatus
Jesse Weller
Evelyn McOmie
Lillian Martinez
Michael Fernandez
Ruth Janka
Sharmila Brunjes
VAC Representative

Kimberly Bermudez

Post-Retirement Medical

Trust

Vini Montague, Staff

Ana Quiles, Chair

Vini Montague Alma Rodriguez David Coe Ruth Janka

Vendor Advisory Ruth Janka, Staff Suad Bisogno, Chair

Alex Kopilevich
Andrea Devers
Bob Erio
Cal Enriquez
Catherine Carpenter
Dana Kalek
Daniel Ortiz
Don Lucas
Erica Beall
Jodie Agnew-Navarro
Kimberly Bermudez

Lisa Williamsen Nick Vukotic Rosalynn Daggs (3 open position)



Memorandum

DATE: Wednesday, September 28, 2022

TO: Executive Committee

FROM: Evelyn McOmie, Chief Consumer & Community Services Officer

RE: 637 Proposal for Allowance of FMS Bill Payer model for Reimbursement of Social Recreation, Camp and Non-Medical Therapy services

The restoration of regional center funding for social recreation, camp and non-medical therapy services is a much needed and in demand service. However, business entities that provide these services have largely demonstrated unwillingness to proceed with the vendorization process. When approved by the IPP, NLACRC can reimburse for non-vendored services through the purchase reimbursement (service code 024) process. However, this requires that consumers or their families pay out of pocket and complete the vendorization process to seek reimbursement.

Current regulation identifies certain types of services – respite, day care, transportation, nursing, and community-based training services for adults – as participant-directed services, which allows consumers to control how services are provided and who provides them. Participant-directed services are paid through a regional centered-vendored financial management services ("FMS").

In order to meet the current needs of NLACRC consumers and facilitate person-centered planning, NLACRC intends to prepare a proposal known as a "637 Proposal" that describes allowing NLACRC to have the capability for social recreation services to be funded as a participant-directed service specifically through the FMS as Bill Payer model.

The FMS as Bill Payer model would allow for the FMS to process payment and write a check to pay for the social recreation services included in the IPP without the need for consumers or their families to pay out of pocket.

Proposed Accelerated Timeline:

- Thurs., September 29, 2022, 9 am: Publish Notice of Public Hearing on NLACRC website and distribute through News You Can Use email blast
- Tuesday, October 11, 2022, 6:30 pm: virtual Public Hearing, English with Spanish translation
- Monday, October 17, 2022, 5 pm: Deadline for stakeholder written comment
- Wednesday, October 19, 2022, 9 am: Submission of 637 Proposal for DDS consideration
- Wednesday, November 9, 2022, 6:30 pm: Review and Approval at Board meeting*
 *Seeking to waive Board review per Executive Committee approval (9/28) unless stakeholder feedback does not support submission.

North Los Angeles County Regional Center Board of Trustees Policy

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Your responsibility as a member of the Board of Trustees of the NLACRC would include, but not be limited to:

- Attendance, either virtual or in-person, at monthly Board of Trustees meetings, usually held <u>at 6:30 p.m.</u> on the second Wednesday of each month at one of NLACRC's three offices at 6:30 p.m. To be counted as "present", one must attend the meeting for at least 1 hour of the meeting's duration.
- Membership and attendance on one (1) or more board committees.
- Board participation and advocacy will be focused on systems issues; issues regarding an
 individual consumer, family or program will be directed to the Executive Director's
 Office.
- Identification of any potential conflict of interest as identified in Welfare and Institutions Code, Sections 4626 and 4627 during the board member's term on the board will be reported to the administrative assistant to the board.
- Completion of the Conflict of Interest Statement annually and MediCal Provider Enrollment Form as applicable due to the regional center's funding and contract with the State of California, Department of Developmental Services.
- Completion of a W-9 form by board members who seek reimbursement for childcare or personal care services under the Board Member Support policy.
- Adherence to the board's Code of Conduct.
- Attendance at the annual board orientation for all newly seated board members.
- Participation in board-coordinated trainings and the annual board retreat.
- Visitation to NLACRC vendored programs is expected in order that board members may
 be informed about the developmental disabilities service system. Programs include a wide
 variety of residential and day programs as well as those providers who deliver a specific
 service (e.g. school setting or transportation).

October XX, 2022

Director Bargmann
Department of Developmental Services
1215 O Street, MS 9-60
Sacramento, CA 95814

Re: June 2022 California State Auditor's Report

Dear Director Bargmann,

I am writing in response to the findings of the recent California State Auditor's report, where the North Los Angeles County Regional Center was selected to participate in the audit of the Department of Developmental Services.

In the report issued June 2022 titled "Department of Developmental Services: It Has Not Ensured That Regional Centers Have the Necessary Resources to Effectively Serve Californians with Intellectual and Developmental Disabilities", the auditor found areas where our Center was not meeting the statutory or regulatory requirements. Please find below each such area and the Center's actions to ensure prospective compliance.

<u>Vendor Monitoring – On Site Reviews</u>

No finding; North L.A. found to be in compliance.

Vendor Monitoring – Biennial Vendor File Reviews

Finding: reviews were not conducted for 7 of 10 vendors every two years since fiscal year 2018-19, as required.

Response: As noted in the report, North L.A. has a procedure in place to ensure that the Center meets the requirement of conducting biennial vendor file reviews. The time period selected by the audit coincides with the beginning of the pandemic (March 2020), where indeed, North L.A. did not engage in vendor file reviews due to our attention and efforts being redirected to supporting providers during the initial phase of the pandemic, which included accessing Personal Protective Equipment and transitioning their programs to alternative service delivery models. The Center has returned to normal operations in our Community Services Department and is conducting biennial vendor file reviews in accordance with the statute.

Lastly, as a result of the California State Auditor's review, the Center's procedure for biennial vendor file reviews has been updated to limit information requests to two attempts before initiating an action for noncompliance with the vendorization requirements. Additionally, the Center is conducting a review of our electronic vendor files as we have learned that some of the documents were not uploaded during the Center's transition to our electronic document management system.

Convenient Service Access

Finding: State law requires a process for evaluating quality and access measures and for identifying barriers to consumers' accessing services. The auditor found that regional centers rely on service coordinators to work with consumers individually to identify and resolve barriers to convenient access to services. The audit report concluded that the lack of aggregate information about barriers to accessing services precludes regional centers from proactively identifying solutions and/or developing new resources to ensure consumers have convenient access to services. While North L.A. does not have technology that will provide information about barriers to accessing services yet, we are seeking to generate reports by service code on service access using data from SANDIS (authorization date) and data from UFS (first billing date) to determine the amount of time taken from the authorization to utilization of services by service types. North L.A. also conducts an internal survey of staff annually regarding the service needs of our community. The results of the survey are used to inform our resource development plan. Further, the Center is creating a Service Needs Survey for our community to access year-round on our website. Once available, we will promote the survey through our weekly "News You Can Use" email blasts as well as on all of our social media platforms. All of the information gathered will be used to assess access to services, resolve barriers and identify needed services.

4731 Complaints – Timely Completion

Finding: State law requires 4731 Complaints to be investigated within a 20 day time frame, however North L.A. was found to exceed the time frame, with an average time of 51 working days to complete investigations and the longest investigation taking 68 working days. While North L.A. has consistently obtained consent from a complainant to extend a rights violation investigation, we were unaware that extending the time frame is not allowed by law, even with consent of the complainant. North L.A. has a unit that manages all of the Center's administrative due process, including 4731 Complaints, and has modified our investigation process to ensure that investigations are completed within the 20-day time frame.

4731 Complaints – Notification Requirements

Finding: State law requires regional centers to notify applicants and consumers in writing of the right to file a complaint. While North L.A. has an appropriate process for notifying consumers at all regularly scheduled IPP meetings of the right to file a complaint, this process did not include written notification to applicants during the intake process. Upon learning of this from the auditor, North L.A. immediately amended the intake process to include the provision of written notification to all applicants of the right to file a complaint.

Timely Eligibility Determinations

Finding: Statute requires regional centers to complete the eligibility determination process in no longer than 142 days; North L.A. exceeded the time frame for 1 of the 5 applications reviewed. As noted in the report, North L.A. begins the 120-day timeline immediately following the initial intake and immediately begins scheduling necessary evaluations while waiting for records to arrive. While North L.A.'s intake and eligibility determination process is calibrated to support timely eligibility decisions for applicants, there are extenuating circumstances which impact the Center's ability to make those determinations in a timely manner such as cancelled evaluation appointments and delays in receiving requested records. North L.A. makes every effort to obtain the needed information and secure the appropriate evaluations to ensure that eligible individuals are entered into the system as timely as possible. Toward this end, the Center actively recruits for clinical psychologists and expedites their vendorization. Lastly, North L.A. has implemented several changes since the audit review period (2018-2019) that has improved our intake process. These changes include implementing our electronic document management system, adding staff to the Intake Unit including additional Intake Service Coordinators, and adding vendored psychologists.

Fair Hearing Process

While there was not a specific finding related to North L.A. in this area, the Center does understand that consumers and families find the documents difficult to understand, find the process intimidating and expensive, particularly in terms of accessing legal counsel, and that preparation for hearing is time-consuming. Additionally, the report reveals that administrative law judges found that approximately one fifth of all cases heard revealed that regional centers had inappropriately denied or changed at least some services. To address the challenges consumers and families face in accessing the fair hearing process, North L.A. trains all case management staff in the fair hearing process to ensure staff are aware of their role in supporting families in completing fair hearing request forms and providing families with resources for support with the fair hearing process. Additionally, the Center held a town hall on the topic and recently held a town hall on "Rights Under the Lanterman Act". Further, the Center will be conducting trainings for staff and our community regarding the upcoming changes to the process: please note that training materials are in plain language and interpretation services, including ASL, are provided upon request. Routinely, Spanish interpretation is available at all public meetings as Spanish is a threshold language for the Center. Lastly, issues raised in fair hearing can provide information on areas where processes need to be updated or staff are in need of additional training, to ensure we are meeting the needs of those we serve as intended, and required, by law. As such, our Consumer Services Directors update processes as needed and the Center's Fair Hearing Manager provides in-service training to case management staff as needed in response to a finding or issue raised in a fair hearing. Moreover, the Center has added a new position, Quality Improvement and Outcomes Manager, which is responsible for evaluating the data we receive from 4731 Complaints and fair hearings, reviewing processes and overseeing implementation of changes directed toward increased quality and outcomes for the individuals we serve.

California State Auditor's Report Response Page 4

Thank you for the opportunity to provide the Center's actions in response to the recent California State Auditor report. Should you have any questions regarding the actions we are taking here at the Center to ensure compliance with our statutory requirements, and improve outcomes for those we serve, please do not hesitate to contact me directly at (818) 756-6360.

Sincerely,

Ruth Janka Executive Director

C: Ana Quiles, Board President File

North Los Angeles County Regional Center Board of Trustees

Executive Director's Performance Evaluation Timeline

Time Period	Actions
August	• The chief organizational development officerchief human resources officer (CODOCHRO) will review with the new board president his/her responsibilities and the process surrounding the executive director's performance evaluation.
September Board Meeting	 The executive director's performance evaluation process and blank performance evaluations are reviewed with the board members. The board president will create a negotiating committee and provide the members' names to the CODOCHRO.
January	• The CODOCHRO, deputy director/chief financial officer, and director of finance will meet with the board president and the negotiating committee to review the performance evaluation and compensation process.
January Executive Committee Meeting	• The negotiating committee will request external compensation data from the CODOCHRO.
February Board Meeting	 Blank executive director evaluation forms are distributed for board members to complete. Completed evaluations are due to the board president prior to the March board meeting. (Board members with less than 3 months of service do not complete evaluation forms. All other board members must complete an evaluation form or will be considered to have resigned from the board.) The negotiating committee will meet with the executive director.
March Board Meeting	• Completed executive director evaluation forms are due to the board president.
April Executive Committee Meeting	 The CODOCHRO, deputy director/chief financial officer, and director of finance meet with the negotiating committee to provide the compensation data for review and provides any requested additional information. Executive director's evaluation to be completed and a summary report is reviewed (in executive session).
May Board Meeting	 is reviewed (in executive session). The negotiating committee provides a summary of the compensation and/or contract changes (in executive session). The executive session will be placed at the beginning of the board meeting agenda.

<u>June</u>	• The CODOCHRO will prepare the documentation necessary to
	process the negotiating committee's compensation and/or contract
	changes as appropriate.
	• The CODOCHRO will schedule a meeting with the executive
	director and provide the board president with all required documents
	needed for the meeting (e.g. compensation, performance review
	information, employment contract changes, etc.)
	• Copies of all signed documents will be provided to the CODOCHRO
	to allow for the timely processing of compensation information.

[Timeline.Feb2020] Approved: February 12, 2020 Revised:

NLACRC CY2023 Performance Contract – Executive Summary

The Department of Developmental Services (DDS) establishes contracts with regional centers that include specific, measurable performance objectives, in key areas that are important to our community and our system – residence types, competitive employment and service access and equity. The performance contract also includes areas where regional centers must comply, based on statute, regulation and/or contract with the State. The purpose of the Performance Contract is to measure each regional center's performance all identified areas on an annual basis.

Each of the *public policy measures* (living arrangements, competitive integrated employment and service access/equity) have one or more *goals*. For *living arrangements*, the overall goal is for as many consumers as possible to live in non-institutional like settings. For *competitive integrated employment*, the goal is to increase the number of adults working in competitive employment, including after participating in a Paid Internship Program. DDS also reviews the average hourly wages and average weekly work hours for consumers who participated in a Paid Internship Program and in the Competitive Employment Incentive Program. This data helps DDS assess the effectiveness of programs such as the PIP and CIE. For *service access and equity*, the goal is for consumers and families to access services regardless of diagnosis, age, ethnicity or language. DDS reviews data demonstrating how much regional centers spend in a fiscal year on consumers and families by age, ethnicity, and residence type. The data for a regional center is compared against a former fiscal year and against a statewide average.

For each public policy measure/goal, the Strategic Planning Committee and NLACRC staff have identified *activities* that will help NLACRC make progress in each area, the activities are listed respectively under each goal. For each activity, frequency and metrics have been identified.

Each regional center's performance contract also includes compliance measures, such as passing the independent audit, passing the DDS audit, conducting required vendor audits, not overspending the regional center's operations budget, percentage of current CDERs (Client Development Evaluation Reports)/ESRs (Early Start Reports), IPP Development, meeting IFSP (Individualized Family Service Plan) requirements.

NLACRC's performance contract also includes local measures, or "outside of the box" performance measures that include increasing recruitment in each of our valleys, increasing service provider access to trainings, increasing educational opportunities for Community Services staff, create resources and best practices for service providers to assist consumers with employment preparedness, and gather and assess data from various sources to identify and resolve barriers to service access and equity.



Calendar Year(s): 2023 DRAFT

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

ACTIVITIES SUMMARY

NLACRC Resource Development Plan to Address Goal 1:

Development #1

Name of Provider: Brilliant Corners

Type: Enhanced Behavioral Support Home (EBSH)

Number of Consumers: 4

This home is open

Development #2

Name of Provider: W&W

Type: Specialized Residential Facility (SRF)

Number of Consumers: 4

Status Update: Development in progress.

Projected Date to Open Home: Fall 2022

Development #3

Name of Provider: Elwyn

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

Status Update: Vendor is currently engaging in property searches

Projected Date to Open Home: TBD

Development #4

Name of Provider: G&C

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

Status Update: Vendor acquired property; development in progress.

Projected Date to Open Home: Summer 2023

Development #5

Name of Provider: W&W

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

Development #6

Name of Provider: G&C

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

79



Calendar Year(s): 2023 DRAFT

Public Policy Performance Measures (Required)

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

ACTIVITIES SUMMARY NLACRC Plan to Address Goal 2:

New Staff Orientation/Training

Name of Training: Service Standards
Frequency: Every other month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 2

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Lanterman Act Training

Frequency: Every other month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: CDER/Person Centered Planning 1

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 3

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Self Determination Program

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training



Calendar Year(s): 2023 DRAFT

Dissemination of Information

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

Frequency: Annual

Metric: Increase Number of Attendees

Data Source to Evaluate: Public Information

Type of Activity: Printed Information Provided toCommunity

Frequency: Monthly

Metric: Number of materials provided to communitypartners

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

Type of Activity: Electronic Information Provided to Community

Frequency: Monthly

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

means including newsletters and social media

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

Type of Activity Grassroots Outreach & CommunityEngagement Contacts

Frequency: Monthly

Metric: Number of community contacts monthly by geographic location

Data Source to Evaluate: Diversity, Equity, and Inclusion

Type of Activity: Printed Information Provided to Community

Frequency: Annual

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

the community

Data Source to Evaluate: Public Information

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

Can Use

Frequency: Monthly

Metric: Number of electronic newsletters distributed

Public Policy Performance Measures (Required)

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



Calendar Year(s): 2023 DRAFT

ACTIVITIES SUMMARY NLACRC Plan to Address Goal 3:

Resource Availability

Type of Service: Independent Living Skills (ILS)

Metric: Current Number of ILS Providers

Data Source: SANDIS

Type of Service: Family Home Agencies (FHA)

Metric: Current Number of FHA Providers

Data Source: SANDIS

Type of Service: Personal Assistance/Family SupportServices

Metric: Current Number of Personal Assistant Providers

Data Source: SANDIS

Type of Service: Self Determination Program

Metric: Number of participants

Data Source to Evaluate: SDP Unit

New Staff Orientation/Training

Name of Training: Service Standards

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 2

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Lanterman Act Training

Frequency: Every other month

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

employment.

Data Source to Evaluate: Human Resources & Training

Type of Service: Supported Living Services (SLS)

Metric: Current Number of SLS Providers

Data Source: SANDIS

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

Data Source: SANDIS

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

Nursing (460), Transportation

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

Metric: Current Number of Participant Directed Services Vendors

Data Source: SANDIS

Name of Training: CDER/Person Centered Planning 1

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 3

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Independent Living/Supported Living

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

82



Name of Training: Residential Living Options

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

Community Training/Orientation

Name of Training: Supported Living Services (SLS)Orientation

Frequency: Monthly

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

Orientation

Data Source to Evaluate: Case Management

Dissemination of Information

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

Frequency: Annual

Metric: Increase Number of Attendees

Data Source to Evaluate: Public Information

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

w/Client Rights Advocate Frequency: Annual

Metric: Increase Number of Attendees

Data Source to Evaluate: Public Information

Public Policy Performance Measures (Required)

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



North Los Angeles County Regional Center PERFORMANCE CONTRACT Colondor Voor(o): 2022 DBAET

Calendar Year(s): 2023 DRAFT

ACTIVITIES SUMMARY NLACRC Plan to Address Goal 4:

New Staff Orientation/Training

Name of Training: Residential Living Options

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

Resource Development

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

or Parent Coordinated

Behavioral Intervention Program (077)

Metric: Current Number of vendors

Data Source: SANDIS

Name of Training: Service Standards

Frequency: Every other month

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

employment.

Data Source to Evaluate: Human Resources & Training

Public Policy Performance Measures (Required)

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

ACTIVITIES SUMMARY
NLACRC Plan to Address Goal 5:

Starts on next page



North Los Angeles County Regional Center PERFORMANCE CONTRACT Colondor Voor(a): 2022 DBAET

Calendar Year(s): 2023 DRAFT

New Staff Orientation/Training

Name of Training: Residential Living Options

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Service Standards Frequency: Every other month

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

employment.

Data Source to Evaluate: Human Resources & Training

Resource Development

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

Metric: Number of vendors

Data Source: SANDIS

Public Policy Performance Measures (Required)

Goal

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

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

Measure 6a	Jan. through Dec. 2019 CA	Jan. through Dec. 2019 NLACRC	Jan. through Dec. 2020 CA	Jan. through Dec. 2020 NLACRC
6a. Consumer earned income (ages 16 and above) From Employment Development Department (EDD)		712713713		712710710
Quarterly number of consumers with earned income	25,710	1,529	22,772	1,552
Percentage of consumers with earned income	17.17%	15.04%	18.86%	17.73%
Average annual wages for consumers	\$8,772	\$10,121	\$9,733	\$11,067



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



Calendar Year(s): 2023 DRAFT

21	20	23	20
22	27	17	11
28	33	19	11
34	36	33	16
	22 28	22 27 28 33	22 27 17 28 33 19

ACTIVITIES SUMMARY NLACRC Plan to Address Goal 6:

Resource Availability & Development

Competitive Integrative Employment (CIE)

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

12/31/2023

Data Source: Community Services Employment Specialist

Supported Employment Program (SEP)

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

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

12/31/2023

Data Source: Community Services Employment Specialist

Paid Internship Program (PIP)

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

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

12/31/2023

Data Source: Community Services Employment Specialist



Calendar Year(s): 2023 DRAFT

Increased Employment Opportunities for Consumers

Competitive Integrative Employment (CIE)

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

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

Data Source: Community Services & Case Management

Supported Employment Program (SEP)

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

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

Data Source: Community Services & Case Management

Paid Internship Program (PIP)

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

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

Data Source: Community Services & Case Management

Service Access & Equity Grant

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

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

Data Source: Diversity, Equity, and Inclusion Department

Outreach & Engagement to Increase Employment for Consumers

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

Frequency: Monthly

Metric: Total Number of colleges contacted Data Source: Workforce & Employment Specialist

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

individuals succeed. Frequency: Quarterly

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

Data Source to Evaluate: Workforce & Employment Specialist

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

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

Frequency: Quarterly

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

Data Source to Evaluate: Employment Specialist



Calendar Year(s): 2023 DRAFT

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

Frequency: Quarterly

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

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

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

Metric: Number of calls to hotline

Data Source to Evaluate: Employment Specialist

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

business.

Frequency: Monthly

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

Data Source to Evaluate: Employment Specialist

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

opportunities for Micro Enterprises.

Frequency: Monthly

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

Data Source to Evaluate: Employment Specialist

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

Frequency: Monthly

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

Data Source to Evaluate: Public Information

Individualized Program Plans

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

Frequency: Monthly

Metric: Increase number of IPPs with employment goals/outcomes

Data Source: IPP random sampling

Trainings

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

individuals succeed Frequency: Annual

Metric: Number of staff trainings

Data Source to Evaluate: Training and Development



Calendar Year(s): 2023 DRAFT

Dissemination of Information

Type of Event: Town Hall – Department of Rehabilitation

Frequency: Annual

Metric: Increase Number of Attendees

Data Source to Evaluate: Public Information

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

Frequency: Annual

Metric: Number of Attendees

Data Source to Evaluate: Public Information

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

about what employment might mean to them.

Frequency: Monthly

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

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

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

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

Frequency: Annual

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

Data Source to Evaluate: Employment Specialist



7

Goal

Ensure that consumers

age, diagnosis, ethnicity,

Residence

and families have access to services and supports regardless of

or language

North Los Angeles County Regional Center PERFORMANCE CONTRACT Calendar Year(s): 2023 DRAFT

Indicator showing the relationship between annual authorized services and expenditures byindividual's residence type and ethnicity

Measure

Data for this measure that is separated by residence type is included below as numbers 7a.through 7f. See below for this data.

2020-21

(Note: The most recent data provided by DDS is 2020-21)

	Type	20	13-20	20	20-21
7a	Home	American Indian or Alaska Native 0.40	Native Hawaiian or Other Pacific Islander 0.70	American Indian or Alaska Native 0.50	Native Hawaiian or Other Pacific Islander 0.76
		 Asian 0.65	White 0.67	 Asian 0.60	 White 0.64
		 Black/ African American 0.72	Other Ethnicity or Race 0.67	 Black/ African American 0.67	Other Ethnicity or Race 0.62
		Hispanic 0.70		Hispanic 0.69	
7b	ILS/SLS	American Indian or Alaska Native 0.95	Native Hawaiian or Other Pacific Islander N/A	American Indian or Alaska Native 0.87	Native Hawaiian or Other Pacific Islander N/A
		Asian 0.80	White 0.84	Asian 0.81	White 0.78
		Black/ African American 0.81	Other Ethnicity or Race 0.77	Black/ African American 0.80	Other Ethnicity or Race 0.78
		Hispanic 0.82		Hispanic 0.82	
					91



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



	, ,		
or	Native Hawaiian or Other	American Indian or Alaska	l Native Hawaiian or Other

(Ot wh hos	ther Other includes consumers to are out-of-state, in ospice, transient/homeless, not listed elsewhere.)	American Indian or Alaska Native 0.00 Asian 0.34 Black/ African American 0.96 Hispanic 0.64	Native Hawaiian or Other Pacific Islander N/A White 0.81 Other Ethnicity or Race 0.00	American Indian or Alaska Native N/A Asian 0.90 Black/ African American 0.94 Hispanic 0.66	Native Hawaiian or Other Pacific Islander N/A White 0.68 Other Ethnicity or Race N/A
			ACTIVITIES SUMMARY		

ACTIVITIES SUMMARY NLACRC Plan to Address Goal 7:

Diversity, Equity, and Inclusion Initiative

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

Tentative Timeline: December 31, 2023

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

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

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

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

Metric: Number of policies and guidelines reviewed

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

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

Metric: Number of policies and practices reviewed **Data Source to Evaluate:** Human Resources

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

Tentative Timeline: Quarterly

Metric: Number and type of focus groups

Data Source to Evaluate: Diversity, Equity and Inclusion



Calendar Year(s): 2023 DRAFT

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

Purchase of Service Variance.

Frequency: Monthly

Metric: Number of events attended

Data Source to Evaluate: Diversity, Equity and Inclusion

Staff Positions

Enhanced Service Coordination

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

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

Data Source to Evaluate: Human Resources

Deaf & Hard of Hearing Specialist

Tentative Timeline: Continue recruitment for newly establishedpositions through December 2023

Metric: Position Filled

Data Source to Evaluate: Human Resources

Participant Choice Specialists

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

Metric: Position Filled

Data Source to Evaluate: Human Resources

Language Access Specialist

Tentative Timeline: December 31, 2023

Metric: Position filled.

Data Source to Evaluate: Human Resources

Outreach Language Specialist

Tentative Timeline: December 31, 2023

Metric: Position filled.

Data Source to Evaluate: Human Resources

Housing Specialist

Tentative Timeline: Recruit for newly established position through December 2023

Metric: Position filled

Data Source to Evaluate: Human Resources

Mental Health Specialist

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

created

Metric: Position filled

Data Source to Evaluate: Human Resources



Calendar Year(s): 2023 DRAFT

Administrative Analyst

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

Metric: Position filled

Data Source to Evaluate: Human Resources

NLACRC Recruitment of Service Coordinators

Tentative Timeline: Active recruitment for open positions

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

Metric: Reduction in the number of CSC vacancies Data Source to Evaluate: Human Resources

Community Engagement & Relationships

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

Frequency: Monthly

Metric: Increase Number of Attendees

Data Source to Evaluate: Diversity, Equity, and Inclusion

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

Frequency: Monthly

Metric: Increase Number of Attendees

Data Source to Evaluate: Diversity, Equity, and Inclusion

New Staff Orientation/Training

Name of Training: Service Standards

Frequency: Every other month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 2

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Lanterman Act Training

Frequency: Every other month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: CDER/Person Centered Planning

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 3

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

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

Frequency: Every other month

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

employment.

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

Inclusion



Calendar Year(s): 2023 DRAFT

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

Frequency: Annual

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

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

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

Center through Apriendiendo Entre Nos meetings.

Frequency: Every other month **Metric:** Number of trainings provided

Data Source to Evaluate: Diversity, Equity and Inclusion

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

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

Frequency: Quarterly

Metric: Number of trainings provided

Data Source to Evaluate: Case Management & Training and Development

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

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

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

Data Source to Evaluate: Case Management

Dissemination of Information

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

Frequency: 6 times per year

Metric: Increase Number of Attendees

Data Source to Evaluate: Diversity, Equity, and Inclusion

Type of Event: Purchase of Service Public Meetings

Frequency: Annual

Metric: Increase Number of Attendees Data Source to Evaluate: Public Information

Type of Activity Grassroots Outreach & Community Engagement Contacts

Frequency: Monthly

Metric: Increase Number of community contacts monthly by geographic area

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

Type of Event: Festival Educacional

Frequency: Annual

Metric: Increase Number of Attendees

Data Source to Evaluate: Public Information

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

Frequency: Monthly

Metric: Increase Number of Attendees Data Source to Evaluate: Public Information

Type of Activity: Printed Information Provided to Community

Frequency: Monthly

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

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

Inclusion Unit



Calendar Year(s): 2023 DRAFT

Type of Activity: Electronic Information Provided to Community

Frequency: Monthly

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

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

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

holders in easily accessible areas of mailrooms.

Tentative Timeline: Monthly

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

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

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

Tentative Timeline: Monthly

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

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

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

Frequency: Monthly

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

Data Source to Evaluate: Diversity, Equity, and Inclusion

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

methods.

Frequency: Quarterly

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

Data Source to Evaluate: Public Information

Type of Activity: Increase promotion of Participant Directed Services

Frequency: Monthly

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

Data Source to Evaluate: Public Information

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

Tentative Timeline: Quarterly

Metric: Number of satisfied users through feedback surveys

Data Source to Evaluate: Public Information

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

Tentative Timeline: Monthly

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

Data Source to Evaluate: Public Information



Calendar Year(s): 2023 DRAFT

_anguage Access

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

Frequency: Monthly

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

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

Data Source to Evaluate: Public Information

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

Tentative Timeline: December 31, 2023

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

Data Source to Evaluate: Public Information

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

Frequency: Monthly

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

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

develop further strategies Tentative Timeline: Annual

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

Data Source to Evaluate: Diversity, Equity, and Inclusion

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

Tentative Timeline: Monthly

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

Data Source to Evaluate: Diversity, Equity, and Inclusion

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

Tentative Timeline: Monthly

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

Data Source to Evaluate: Diversity, Equity, and Inclusion

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

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

council centers and services

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

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



Calendar Year(s): 2023 DRAFT

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

Tentative Timeline: December 31, 2023

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

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

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

Tentative Timeline: December 31, 2023

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

Data Source to Evaluate: Diversity, Equity, and Inclusion

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

Communication Plan.

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

Metric: Number of materials used by focus groups

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

Other

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

Frequency: Annual

Metric: Number of IPPs sampled

Data Source to Evaluate: Case Management

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

(1110	Goal	Measure	Ethnicity	2019-20	2020-21
8.	Ensure that consumers and families have access	Number and percent of individuals receiving only case	American Indian or Alaska Native	Birth to 2: 0 (0%) 3 to 21: 5 (31%) 22+: 2 (40%)	Birth to 2: 0 (0%) 3 to 21: 7 (37%) 22+: 1 (25%)
	to services and supports regardless of age,	management services by ethnicity and age egardless of Birth to age two,	Asian	Birth to 2: 1 (0%) 3 to 21: 333 (32%) 22+: 91 (16%)	Birth to 2: 27 (9%) 3 to 21: 404 (39%) 22+: 111 (19%)
	diagnosis, ethnicity, or language • Age three to 21, inclusive • Twenty-two and	Black/African American	Birth to 2: 1 (0%) 3 to 21: 469 (31%) 22+: 216 (19%)	Birth to 2: 25 (8%) 3 to 21: 510 (34%) 22+: 259 (21%)	
		older	Hispanic	Birth to 2: 9 (0%)	Birth to 2: 179 (6%)



(Note: The most recent data provided by DDS is

2020-21)

North Los Angeles County Regional Center PERFORMANCE CONTRACT Calendar Year(s): 2023 DRAFT

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

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



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

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



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

ACTIVITIES SUMMARY
NLACRC Plan to Address Goal 9:

Same activities as Goal 7



Calendar Year(s): 2023 DRAFT

Compliance Measure (Required)

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

ACTIVITIES SUMMARY NLACRC Plan to Address Goal 10:

New Staff Orientation/Training

Name of Training: CDER/Person Centered Planning Training

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 3

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training

Name of Training: Person Centered Planning 2

Frequency: Every month

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

employment.

Data Source to Evaluate: Human Resources & Training



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

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

Data source for statewide averages: https://www.dds.ca.gov/rc/dashboard/performance-contracts/.



"Outside of the box" performance measures:

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

North Los Angeles County Regional Center

Vendor Advisory Committee



FY 2022-23 Priority Issues

<u>Priority for each of the 43 groups</u>: Support of consumers' and families' service needs through creative, resourceful alternative service delivery that promotes choice, communication, and connection. <u>Identify legislative advocacy issues as applicable to each group</u>.

I. Early Start Services

- Continue strengthening and enhancing the social-emotional development of children by supporting the family system in alignment with the State Systemic Improvement Plan (SSIP).
- Advocate and educate the medical community in early intervention and available services to support optimal development of every child.

II. School Age Services

• Facilitate information for access to services and supports available to consumers and families to fill in the gap.

III. Adult Services

- Expand vocational training service options and competitive employment opportunities in a manner that more fully integrates consumers within the business community and provides full, non-productivity-based remuneration for work performed.
- Develop expanded and creative housing options that ensure consumers have a safe, affordable place to live within their own communities and with the required supports needed to ensure their success within their chosen housing options.
- Encourage, promote, and engage in activities to increase competitive, integrated customized employment opportunities for adults with intellectual and developmental disabilities (I/DD).
- Continue to seek and share innovative housing solutions that expand choice and affordability for persons with I/DD.
- Support and assist vendored service providers to successfully and seamlessly serve individuals enrolled in the Self-Determination Program.

- Discuss, review, posit, and advocate for legislative ideas that benefit adults with I/DD and the support system in which they are entitled.
- Share ideas and formulate new solutions working in collaboration with public resources and NLACRC to advance person centered supports for aging adults with I/DD.

IV. Legislative Issues and Advocacy

• Including the Health Insurance Portability and Accountability Act (HIPAA), mandated reporting, rate reform, zero tolerance, cyber insurance, etc.



[priorityissues.2022-23] Approved:

NLACRC – VENDOR CONTRACT REQUEST – EXECUTIVE SUMMARY

Type of Contract: Operations

Vendor Name: Holwick Constructors, Inc.

Service Location: 9200 Oakdale Avenue, Chatsworth, CA 91311

Service Description:

General contractor for reconfiguration of existing office space in the San Fernando Valley office location to accommodate growing workforce and relocate all meeting space with the public to the first floor.

1st floor

Create additional cubicles

Reconfigure existing intake department space to move exam rooms to 1st floor

2nd Floor

Reconfigure existing space for relocation of intake department

3rd Floor

Reconfigure existing space, including conference room, for additional cubical and private office space for case management

4th Floor

Reconfigure existing space, including conference rooms, for additional cubicle, workstation and private office space

7th Floor

Reconfigure existing space for additional cubicle space

Expand supply room

Contract Summary and Board Resolution

No.	Description	Contract Summary
1	Contract Overview: (New or Amendment) (POS or OPS)	Operations - New Agreement
2.	The Name of Vendor or Service Provider	Holwick Constructors, Inc.
3.	The Purpose of the Contract	General Contractor to reconfigure office space located at 9200 Oakdale Avenue in the city of Chatsworth.
4.	The Contract Term	October 1, 2022 to June 30, 2023
5.	The Total Amount of the Contract	Total Contract: \$730,822.00
6.	The Rate of Payment or Payment Amount	Payment will be reimbursed to Contractor based on work performed in accordance with the Contractor's Proposal #10358, dated August 3, 2022. Contractor shall request payment.
7.	Method or Process Utilized to Award the Contract.	NLACRC sought bids from four general contractors and receive proposals from two, including Holwick Constructors. Holwick's proposal was the lower of the two bids. Additionally, NLACRC has previously used Holwick Constructors for different projects including an expansion in the Chatsworth location. Their project managers and support staff are familiar with our internal renovation and expansion projects, our office location, and our internal processes.
8.	Method or Process Utilized to Establish the Rate or the Payment Amount	Usual & Customary Rate
9.	Exceptional Conditions or Terms: Yes/No If Yes, provide explanation	None

The North Los Angeles County Regional Center's ("NLACRC") Board of Trustees reviewed and discussed the Construction Agreement ("**Agreement**') between NLACRC and Holwick Constructors, Inc. The Board of Trustees is authorizing an Officer of NLACRC to execute the Agreement.

	October 12, 2022
David Coe, Board Treasurer	Date

Contract Summary and Board Resolution

The North Los Angeles County Regional Center ("**NLACRC**") Board of Trustees reviewed and discussed the Construction Agreement between NLACRC and Holwick Constructors ("**Holwick**")

RESOLVED THAT in compliance with NLACRC's Board of Directors Contract Policy, on October 12, 2022, the Construction Agreement ("**Agreement**") between NLACRC and Holwick was reviewed and discussed by the NLACRC Board of Trustees. The NLACRC Board of Trustees hereby authorizes and designates any Officer of NLACRC to execute and deliver the Agreement on behalf of NLACRC, in such form as NLACRC's legal counsel may advise, and on such further terms and conditions, as such Officer may approve. The final terms of the Agreement shall be conclusively evidenced by the execution of the Agreement by such Officer. For purposes of this authorization, an "Officer" means NLACRC's Executive Director, Deputy Director, Chief Financial Officer, Chief of Program Services, or Chief Organizational Developmental Officer, and no one else.

CERTIFICATION BY SECRETARY: I certify that: (i) I am the Secretary of the NLACRC; (ii) the foregoing Resolution is a complete and accurate copy of the Resolution duly adopted by Board of Trustees; iii) the Resolution is in full force and has not been revoked or changed in any way.

	October 12, 2022
Lillian Martinez, Board Secretary	Date

North Los Angeles County Regional Center Executive Director's Report October 12, 2022

I. North Los Angeles County Regional Center

A. Staffing Changes

Deputy Director

Jesse will be assuming his new role as the San Gabriel Pomona Regional Center Executive Director on Monday, October 3rd; an exciting time for Dr. Weller and a huge win for SGPRC! We wish Jesse every success in his new role and will miss him very much! Recruitment for the Deputy Director position is on hold at this time and the duties of that position are being reassigned – Evelyn McOmie will oversee the Consumer Services Directors, the Clinical Director will report to the Executive Director, and Community Services will be supported by contract consultation through Kim Rolfes, former Deputy Director.

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

Jazmin Zinnerman has decided to pursue a new endeavor! Her last day at the Center is Thursday October 6th, we wish her the best of luck!!

Deaf/HOH Specialist Position

The Center has identified a candidate for the Deaf/HOH Specialist position, currently in background check.

B. Staffing Statistics

Effective August 31, 2022, the Center has 703 positions authorized, 6 positions on hold, 88 vacant positions (52 are service coordinator positions), 600 positions filled. Annualized turnover rate is 0.16%.

C. Staff Engagement and Staff Retention

Staff Retention is everyone's business at the Center! While Team Human Resources is working hard to recruit staff, our leadership team is working together to retain staff! This includes an intentional effort to support new staff onboarded to the Center and engage staff with one another and with leadership. Towards that end, I am meeting with staff for "Coffee with Ruth" twice per month, (small groups of no more than 30 staff per meeting) to answer questions, receive feedback and dialogue about issues that are important to them. In my most recent meetings, we talked about what is important at work for staff. They shared that they want fair compensation for work performed, they want reasonable workloads, and they want to be part of a team, want to feel connected to one another, and want to get to know each other (given so many new staff). Feedback about wanting more "in-person" contact has been shared with me by various staff individually, and thus, we are seeking to implement a monthly opportunity called "Let's Get Connected" for staff to meet and learn about each other through a facilitated exercise (icebreaker).

We will also hold our **Annual Harvest Festival Event** this fall and are assessing staff comfort with this being in-person for this event in each office. This event includes costume contests with nominal prizes, provides the opportunity for engagement and recognition of staff.

D. Staff Training - Consumer Housing Options

Generic Resource Housing Options Training was conducted by Jessica Gould (Gould Consulting) for Case Management Supervisors on Monday, Oct 3rd and a similar training will be provided at the Consumer Advisory Committee's November meeting (November 3rd at 3:00 pm).

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

The Center's Inclusion, Equity and Diversity policy includes the provision of training to staff on a quarterly basis; our training for the first quarter is complete for all NLACRC staff (Implicit Bias by Bridging Voices).

The Center offered our *Service Provider Community* **Cultural Proficiency Training** provided by **Full Circle** Consulting, which included implicit bias. The two-hour training focused on developing a common language for talking about diversity, equity and inclusion, identified thinking and beliefs that affect behaviors, and provided skills and tools to be applied in everyday work. The training was held on **September 21**st and had **79 participants** representing **57 vendored service providers!**

Quarter 2 Training will be regarding the LGBTQ community; and is being coordinated by Dr. Fernandez and Cristina; we anticipate this training will be completed before the end of the quarter (Dec 31).

F. Language Access and Cultural Competency Plan

We have a proposal from Bridging Voices to conduct an assessment of our community's language access and cultural proficiency needs for low frequency language groups. The proposal includes facilitating listening sessions for low frequency language and cultural groups, including Blind/Visually Impaired, Armenian, Farsi-speaking individuals/families, data analysis and based on the data, design a 4-hour workshop for NLACRC staff and stakeholders. Staff will follow up with the consultant regarding the value of a survey of the catchment regarding language access and cultural proficiency needs as well.

G. Regional Center Services Survey

The Center received 201 responses from staff regarding the services needed in their respective locations and age groups. The following represents the top 11 services identified and the specific location in which the service is needed:

- #1 Speech & Language Pathologist (707) services within the SCV
- #2 Occupational Therapist (773) within SCV
- #3 Physical Therapist (772) within SCV SFV
- #4 In-Home Respite Services (862) within all three valleys
- #5 Personal Assistance (062) AV & SCV -
- #6 Adaptive Skills Training (605) AV & SCV
- #7 Community Integration Training (055) with CIE/PIP attached SCV & AV
- #8 Adult Residential Facility Level 2-4 Non-Ambulatory ONLY
- #9 Home Health Agency (854)- within all three areas
- #10 Specialized Therapeutic Services (117) within all three areas (Clinical Department Request)
- #11 Self-Directed Support Services (099) within all three areas

The Center has posted a Request for Vendorization announcement on our website seeking providers to apply for vendorizatino for these services. An Applicant's Conference is being held on October 19, 2022 at 10:00 a.m. to answer questions regarding the Vendorization process.

H. HCBS Remediation Consultant RFP

Regional centers received funds from DDS to support service provider compliance with the HCBS Final Rule; NLACRC sought two HCBS Remediation Consultants to assist providers in creating and implementing innovative and creative practices to support community integration, individuals rights and individual choices through clinics, workshops, and 1:1 mentorship. NLACRC did not receive any proposals, and thus, is seeking the Department's approval to reallocate the funding to train service providers in Person Centered Thinking and Universal Lifestiles Training (Dr. Tom Pomeranz).

I. California Early Childhood Special Education Network Exemplar Leads Program

NLACRC was not selected for the program, though applauded for our practices.

J. Community Engagement

i. Service Provider Meetings

Met with John Brauer of New Horizons where he shared their plans to expand services and increase employment of individuals served; they are currently serving 385 individuals in their employment services program with a goal of increasing the number of individuals in their employment program to 2,000 by 2027! They recently met with 48 store managers from Alberstons/Vons/Safeway regarding individuals who have completed the Go4Grocery Program and are ready for hire!

Attended Tierra Del Sol's Circle of Hope Event on Saturday, September 17th, where I toured the campus including their art studios; art projects were in various stages of completion and getting ready for exhibit/sale.

ii. 2022 Town Halls

September's Town Hall, "**Parent Perspective – Early Start**" had 17 attendees and was well received; the parent participant was engaging and answered questions and the Center's Early Start Manager Elisa Hill reviewed available resources regarding early intervention services with the audience. **October's Town Hall** will be "Parent Perspective – School Age Services" and is set for October 20th at 1:30 PM.

iii. <u>Upcoming Support and Consumer Advocacy Group Meetings include:</u>

- Virtual Cafecito Entre Nos, October 13th at 11:00 am
- Filipino Support Group, October 17th at 6:30 pm
- NLACRC Self-Advocacy Group Meeting, October 18th at 10:45 am
- Virtual Aprendiendo Entre Nos: Transition Roadmap by Age Group, October 20th at 10:0 am
- Cultivar y Crecer, October 28th at 6:30 pm

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

iv. Upcoming Community Events and Educational Training Opportunities

- AB637 Public Hearing: Social Recreational Services, October 11th at 6:30 pm
- FFRC All Abilities Resource Fair, October 16th 11:0 am
- SDP Spending Plan, October 17th at 4:30 pm
- FFRC Taller Avanzado IEP, October 18th at 11:00 am
- FFRC Advanced IEP Workshop, October 19ht at 11:00 am

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

K. Quality Assurance

For the month of September 2022, Community Services conducted 102 residential visits as follows:

- 59 unannounced visits
 - 41 CCFs, 15 ICFs, 3 FHAs, 0- FFA (6 AV, 53 SFV/SC)
- 21 Annual Reviews CCF and FHA (8 AV, 16 SFV/SC)
- 22 Other In-Person Visits (New Provider Orientation, QA/RD Walkthrough, 7 Day visit, SIR Follow/Complaint/CAP Follow-up, Attempted Unannounced Visits – provider was not home)
- o 3 Corrective Action Plans developed with residential providers
- 1 Plan of Improvement with a non-residential provider

L. Consumer Statistics

As of September 2022, the Center served 32,364 consumers and applicants, including 4,869 (increase of 47 over last month) in Early Start and 25,392 (increase of 181) in the Lanterman program. The Center's San Fernando Valley Office serves 20,485 individuals, Antelope Valley serves 8,100 and the Santa Clarita Office serves 3,591 (these totals include applicants, and individuals served under Lanterman and the Early Start programs).

M. Special Incident Reports

During the month of September 2022, the center received 99 special incident reports, 15 of which occurred in months prior to June.

II. COVID

A. Statistics

LA County Public Health COVID Update as of Wednesday, October 5, 2022

http://publichealth.lacounty.gov

Current Hospitalizations: 501

Positivity Rate: 4.4% (7-day average)

B. LA County Public Health Rescinds Weekly Testing for Health Care Workers

On 9/16/2022, LA County Public Health updated the public health order regarding Health Care Worker Vaccination Requirements to align with the State Health Officer's Health Care Worker Vaccine Requirement Order, rescinding the testing requirement for workers exempt due to medical reasons or religious beliefs and also updated timing of required booster doses consistent with the CDC recommendations.

C. LA County Public Health Rescinds Masking Requirement in Public Transit

On 9/22/2022, LA County Public Health no longer requires masking when using public transit or at indoor transit hubs. Transit agencies may elect to continue requiring masking.

D. COVID 19 Supplemental Pay Benefits Extended to December 31, 2022.

Governor Newsom signed AB 152 which extends COVID 19 Supplemental Paid Sick Leave until December 31, 2022. This bill does not provide additional hours for those employees who have exhausted this benefit during the allotted time, and does allow employees to use any unused benefit that expired on September 30, 2022.

III. DDS Guidance/Directives

A. <u>09/28/22 Department Directive 01-092822: Extension of Waivers, Modifications, and Directors due to COVID-19</u>

The 01-092822 Directive extends the provisions of several former directives into late October and mid-November of 2022.

Effective 9/16/22, Title 17 Section 58886 was amended to add personal assistance, independent living services and supported employment to the list of participants directed services, and thus the directive re: additional participant services has been rescinded.

IV. LEGISLATION

AB 1663 (Maienschein) – Governor Newsom signed this bill into law, requiring the courts to consider alternatives to conservatorship, such as supported decision-making. This means individuals with developmental disabilities may choose others to support them in making decisions and having those decisions honored.

SB 870 (Portantino) – Governor Newsom vetoed this bill, which would have raised the age of disability onset from 18 to 22 years of age. The basis for vetoing the bill included the fact that there would be a need for resource development in order to support expansion of regional center eligibility, a point raised by ARCA. Future work on this particular issue should include cost estimates associated with expanding the eligibility criteria as defined in this bill.

SB 882 (Eggman) – This ARCA sponsored bill was signed into law and will create an advisory council for law enforcement regarding effective ways to interact with individuals with developmental disabilities. This

AB 682 (Bloom) – This ARCA supported bill was signed into law and will increase the availability of affordable housing by providing developers with a density bonus for constructing 10% of the total units for rental or sale to lower income households.

AB 2216 (Irwin) – This ARCA supported bill was signed into law and will ensure that if an ABLE account beneficiary dies, the account can be legally transferred to an individual who qualifies for an ABLE Account ensuring the funds will continue to be put towards the needs of a person with a disability.

V. STATE/LOCAL UPDATES

A. <u>Department of Developmental Services (DDS)</u>

1. Self Determination Program

Adjustments to Individual Budget

DDS issued guidance for adjusting a SDP participant's individual budget when there is an increase in state minimum wage (to bring an EE's pay into compliance), when there is an increase or decrease in rates for the vendored providers and/or services associated with the expenditures used in the individual budget calculation or when there is a change in rates for a vendored provider who also provides SDP services. Participants should contact their service coordinator should a budget adjustment be needed.

Funding to Support Implementation of SDP

For FY22-23, NLACRC received \$47,620 in base funding and \$80,078.71 in Self-Identified Non-White Consumer Specific funding to secure contractors to further the implementation of the SDP through any of the following:

Recruitment and training of independent facilitators, with a focus on increasing the number of bilingual, bicultural independent facilitators.

- •Joint training for participants, families, regional centers, LVAC members and others with a focus on training self-advocates and families from diverse communities that are underrepresented in the SDP.
- Assistance with spending plan development; and,
- Collaborative groups/workshops to foster ongoing, shared learning and problem-solving opportunities.

NLACRC and the LVAC will jointly assess the needs to determine the best use of the funds in furthering participation in the program. Funds must be expended by March of 2025.

2022-23 Service Access and Equity Grants

DDS is accepting applications for FY22-23 SAE grants from community-based organizations and regional centers. Proposals are due by October 25, 2022 by 5:00 through the online application in Grantvantage.

2. Quality Incentive Program

Incentive Payments for DSP Workforce Data Survey Submission

NLACRC will be issuing a single payment of \$8,000 to each provider agency that completed a DSP Workforce Data Survey, as validated by DDS. Statewide 1,503 service providers participated with additional surveys undergoing validated. At this time, NLACRC has 94 providers validated and eligible for this incentive payment.

Incentive Payments for Adult Residential Facilities for Persons with Special Health Care Needs ARFPSHNs may receive an incentive payment of \$5,000 for reporting required data for residents residing within the facility for six months or longer in CY2022. An additional incentive payment of \$1,000 may be awarded if the ARFPSHN demonstrates all eligible individuals residing in that facility received preventative health screenings at the recommended intervals. By January of 2023, DDS will provide all ARFPSHN facilities with access to an electronic reporting form, participation in this is voluntary. For all validated responses, NLACRC will issue incentive payments as instructed by DDS by June 30, 2023.

Workgroup Meeting

The Quality Incentive Program Workgroup did not meet in September.

3. Regional Center Performance Measures Workgroup Meeting

This workgroup did not meet in September.

4. Employment Workgroup Meeting

This workgroup did not meet in September.

B. Association of Regional Center Agencies (ARCA)

ARCA did not meet in September; next scheduled meeting is October 20 & 21, 2022.

C. State Council on Developmental Disabilities (SCDD)

SCDD held a statewide meeting on 9/20/22, the following are a few highlights from that meeting:

- Program development grants were awarded to the following under the Cycle 45 Grant process:
 - Acorns to Oak Trees (Education-\$78,298);
 - Adaptive Parent Project (Health & Safety-\$28,125);
 - o Jazz Hands for Autism (Employment-\$100,000); and,
 - The Kelsey (Housing-\$50,000).
- Results of proposed legislation sponsored by SCDD were shared as follows:
 - SB 1092 (Hurtado)-Regional center Fair Hearing Bill included 80% of the recommended language of SCDD. This bill did not progress, but similar provisions were included in the Budget Trailer Bill Language.
 - AB 1663 (Maienschein)-Probate Conservatorship Reform bill passed the Legislature.
 - AB 2546 (Nazarian and Hicks)-Housing subsidies for older Californians and people with disabilities bill was not budgeted for this fiscal year. This bill did not pass.
- Self-Determination Statewide Orientation Update:
 - Orientations began on July 14, 2022
 - 55 trainings held with 695 regional center service recipients
 - 48% of individuals participating in the orientation stated that they will be enrolling in SDP

Residential and Day Program Quality Assurance Monitoring Activities January 2022 - December 2022

Month	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Totals
# of Res'l & Day QA Staff	7	8	8	8	7	7	7	7	7				
# Annual Facility Monitoring Visits	10	16	33	10	16	24	13	22	21				165
# Unannounced Visits	11	24	54	66	83	81	31	65	59				474
# Corrective Action Plans Issued	0	0	2	1	3	4	5	4	3				22
*Substantial Inadequacies Cited:													
1.Threat to Health or Safety													
2.Provision of fewer staff hours than req'd					1		1	1					
3. Violations of Rights							1	1					
4.Failure to implement consumer's IPP						1	2						
5.Failure to comply with Admission Agreement			6		5	2	6	4	9				
6.Deficiencies handling consumers' cash resources						1							
7.Failure to comply with staff training reqs			1	2	1	1	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.						2							
13.Failure to submit Special Incident Report					2	1	1	1					
*per Title 17 §56054(a)	0	0	7	2	9	8	12	8	9				

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

	October 2021 Total	September 2022 Total	Increase/ Decrease	% Change
ALL VALLEYS				
Total Non-Early Start	24,182	25,392	1,210	5.00%
Total Early Start	4,471	4,869	398	8.90%
Unit Supervisor Cases (*)	138	149	11	7.97%
Self Determination Specialist (*)	64	39	-25	-39.06%
Prenatal Services	0	0	0	#DIV/0!
Provisional Eligiblity	99	420	321	324.24%
Development Center	11	16	5 205	45.45%
Enhanced Caseloads	0	205		#DIV/0!
On-Duty Specialist Unit Enhanced Case Mgmt	26	0 34	0 8	#DIV/0! 30.77%
Specialized 1:25 Caseloads	17	22	5	29.41%
Pending Transfer	66	70	4	6.06%
Intake Services	791	1,148	357	45.13%
TOTAL ALL VALLEYS	29,865		2,499	8.37%
SAN FERNANDO VALLEY				
Adult Services	6,221	6,290	69	1.11%
Adult Unit Supervisor (*)	7	15	8	114.29%
Transition Services	3,058	3,207	149	4.87%
Transition Unit Supervisor (*)	29	19	-10	-34.48%
School Age Services	5,857	6,308	451	7.70%
School Age Unit Supervisor (*)	42	48	6	14.29%
Early Start Services	2,894	3,190	296	10.23%
Early Start Unit Supervisor (*)	2	5	3	150.00%
Early Start Intake Unit Supervisor (*)	1	17	16	1600.00%
Prenatal Services	0	0	0	#DIV/0!
Provisional Eligibility	99	420	321	#DIV/0!
Provisional Unit Supervisor (*) On-Duty Specialist Unit	0	14	14 0	#DIV/0! #DIV/0!
Development Center	11	16	5	#DIV/0! 45.45%
Enhanced Caseload	0	205	205	#DIV/0!
Enhanced Case Mgmt	26	34	8	30.77%
Specialized 1:25 Caseloads	17	22	5	29.41%
Pending Transfer	66	70	4	6.06%
Intake Services	479	723	244	50.94%
Self Determination Specialist (*)	31	15	-16	-51.61%
TOTAL	18,840	20,485	1,778	9.44%
ANTELOPE VALLEY				
Self Determination Specialist (*)	18	13	-5	-27.78%
Adult Services	2,361	2,590	229	9.70%
Adult Unit Supervisor (*)	12	1	-11	-91.67%
Transition Unit	1,926	1,856	-70	-3.63%
Transition Unit Supervisor (*)	9	2	-7	-77.78%
School Age Services	1,994	2,172	178	8.93%
School Age Unit Supervisor (*)	35	5	-30	-85.71%
Early Start Unit Supervisor (*)	1	1	0	0.00%
Early Sart Intake Unit Supervisor (*)	0	11	11	#DIV/0!
Early Start Services	941	1,057	116	12.33%
Intake Services TOTAL	312 7,534	425 8,100	113 529	36.22% 7.02%
	•	,		
SANTA CLARITA VALLEY				00.075
Self Determination Specialist (*)	15		-4	-26.67%
Adult Services	919		31	3.37%
Transition Services	615	665	50	8.13%
School Age Supervisor (*)	1,231	1,354	123	9.99%
School Age Supervisor (*) Early Start Services	0 636	6 622	6 -14	#DIV/0! -2.20%
Early Start Unit Supervisor (*)	030	2	2	-2.20% #DIV/0!
Early Start Intake Unit Supervisor (*)	0	3	3	#DIV/0! #DIV/0!
TOTAL	3,401	3,591	196	5.76%
	5, 101	5,501	.50	0070

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

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

NLACRC TOTAL (ALL SERVICES) MONTHLY CONSUMER GROWTH ALL VALLEYS

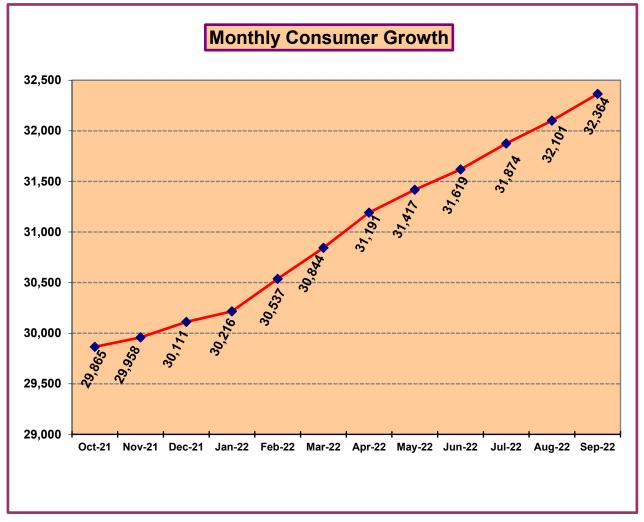
Month	Consumers	Growth	% Change
Oct-21	29,865	93	0.31%
Nov-21	29,958	153	0.51%
Dec-21	30,111	105	0.35%
Jan-22	30,216	321	1.06%
Feb-22	30,537	307	1.01%
Mar-22	30,844	347	1.13%
Apr-22	31,191	226	0.72%
May-22	31,417	202	0.64%
Jun-22	31,619	255	0.81%
Jul-22	31,874	227	0.71%
Aug-22	32,101	263	0.82%
Sep-22	32,364		
	Total	2,499	

227

8.37%

Average

Percent Chg



September 2022 CSC Caseload Ratio

	eptembe		oo ous	olouu i	ulio			
San Fernando Valley								
Adult Services			Case Ratio		Hold	Floater	OD	Assoc.
Adult Unit I	738	8		1				
Adult Unit II	956	11	86.9			1		
Adult Unit III	4		20.0					
Adult Unit IV	953	11	86.6					
Adult Unit V	869	9	96.6	1				
Adult Unit VI	861	8		2				
Adult Unit VII	1013	10	101.3	2				
Adult Unit VIII	896	10	89.6	1		4		
Total	-,	67	93.9	7	11-14	1	0.0	
Transition Services		Ser. Coor.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Transition Unit I	941	7	134.4	4		1		
Transition Unit II	1,056	11	96.0					
Transition Unit III	1,210	13						
	3,207	31	103.5	4		1		
School Age Services	Consumers		Case Ratio	Opening	Hold	Floater	OD	Assoc.
School Age III	1,157	12	96.4					
School Age IV	1,090	11	99.1	1				
School Age V	1,061	9	117.9	3				
School Age VI	1,134	10	113.4	2				
School Age VII	1,017	12	84.8					
School Age VIII	849	9	94.3	1				
Total		63		7				
Early Start Services	Consumers	Ser. Coor.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Early Start 1 (Status 1 & 2)	599							
Early Start 1 Intake	114							
Early Start I Total	713	9	79.2	1				3
Early Start 2 (Status 1 & 2)	599							
Early Start 2 Intake	124							
Early Start 2 Total	723	9	80.3	1				
Early Start 3 (Status 1 & 2)	606							
Early Start 3 Intake	74							
Early Start 3 Total	680	10	68.0	1				
Early Start 4 (Status 1 & 2)	591							
Early Start 4 Intake	69							
Early Start 4 Total	660	7	94.3	2				
Early Start 5 (Status 1 & 2)	356							
Early Start 5 Intake	58							
Early Start 5 Total	414	5	82.8	1				
Status 1 Over 36 mo.	50							
Total		40	79.8	6				3
	Consumers		Case Ratio	Opening	Hold	Floater	OD	Assoc.
Total Non-Early Start		161	98.2	18		2		
Total Early Start		40	79.8	6				3
Total		201	94.5	24		2		Ū
SEV Self Determination Specialist*	15							
SFV Self Determination Specialist*	15 723		#DIV/0!	2				2
Intake Services	723	9	#DIV/0! 80.3	2	Hold		OD	2 Assoc
Intake Services Antelope Valley	723 Consumers	9 Ser. Coor.	#DIV/0! 80.3 Case Ratio	2 Opening	Hold	Floater	OD	2 Assoc.
Intake Services Antelope Valley Adult Unit I	723 Consumers 1,039	9 Ser. Coor.	#DIV/0! 80.3 Case Ratio 103.9	Opening 1	Hold		OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II	723 Consumers 1,039 1,094	9 Ser. Coor. 10	#DIV/0! 80.3 Case Ratio 103.9 121.6	Opening 1 3	Hold		OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III	723 Consumers 1,039 1,094 457	9 Ser. Coor. 10 9	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3	2 Opening 1 3 1	Hold		OD	
Intake Services Antelope Valley Adult Unit II Adult Unit III Total	723 Consumers 1,039 1,094 457 2,590	9 Ser. Coor. 10 9 4 23	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3	2 Opening 1 3 1 5	Hold		OD	
Intake Services Antelope Valley Adult Unit II Adult Unit II Adult Unit III Total Transition Unit I	723 Consumers 1,039 1,094 457 2,590 1,018	9 Ser. Coor. 10 9 4 23	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8	2 Opening 1 3 1 5	Hold		OD	
Intake Services Antelope Valley Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II	723 Consumers 1,039 1,094 457 2,590 1,018 838	9 Ser. Coor. 10 9 4 23 10	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8 93.1	2 Opening 1 3 1 5 3 1	Hold		OD	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Transition Unit III	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856	9 Ser. Coor. 10 9 4 23 10 9	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8 93.1 97.7	2 Opening 1 3 1 5 3 1 4	Hold		OD	
Intake Services Antelope Valley Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II Total School Age I	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103	9 Ser. Coor. 10 9 4 23 10 9 19	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8 93.1 97.7	Opening 1 3 1 5 3 1 4 3 3	Hold			
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II School Age I School Age II	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856	9 Ser. Coor. 10 9 4 23 10 9	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8 93.1 97.7	2 Opening 1 3 1 5 3 1 4	Hold	Floater	OD 2	
Intake Services Antelope Valley Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II Total School Age I	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069	9 Ser. Coor. 10 9 4 23 10 9 19	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8 93.1 97.7 122.6 106.9	2 Opening 1 3 1 5 3 1 4 4 3 3	Hold	Floater	2	
Intake Services Antelope Valley Adult Unit II Adult Unit III Total Transition Unit I Transition Unit II Total School Age I School Age II School Age III Total	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069	9 Ser. Coor. 10 9 4 23 10 9 19	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8 93.1 97.7	Opening 1 3 1 5 3 1 4 3 3	Hold	Floater		
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II School Age I School Age II School Age III AV Early Start 1 (Status 1 & 2)	723 Consumers 1,034 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524	9 Ser. Coor. 10 9 4 23 10 9 19	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8 93.1 97.7 122.6 106.9	2 Opening 1 3 1 5 3 1 4 4 3 3	Hold	Floater	2	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake	723 Consumers 1,039 4,57 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116	9 Ser. Coor. 10 9 4 23 10 9 19 10	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8 93.1 97.7 122.6 106.9	2 Opening 1 3 1 5 3 1 1 4 4 3 3 6	Hold	Floater	2	
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Transition Unit II School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640	9 Ser. Coor. 10 9 4 23 10 9 19	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8 93.1 97.7 122.6 106.9	2 Opening 1 3 1 5 3 1 4 4 3 3	Hold	Floater	2	
Intake Services Antelope Valley Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II School Age I School Age II School Age III AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2)	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244	9 Ser. Coor. 10 9 4 23 10 9 19 10	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8 93.1 97.7 122.6 106.9	2 Opening 1 3 1 5 3 1 1 4 4 3 3 6	Hold	Floater	2	
Intake Services	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244 173	9 Ser. Coor. 100 9 4 233 100 9 9 119 100 199 6	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8 93.1 97.7 122.6 106.9	2 Opening 1 3 3 1 1 5 5 3 3 1 1 4 4 4 3 3 3 3 3 6 6	Hold	Floater	2	
Intake Services	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 1116 640 244 173	9 Ser. Coor. 10 9 4 23 10 9 19 10	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8 93.1 97.7 122.6 106.9	2 Opening 1 3 1 5 3 1 1 4 4 3 3 6	Hold	Floater	2	
Intake Services	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244 173 417 29	9 Ser. Coor. 100 9 4 4 233 100 9 9 199 9 100 10 6 6	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8 93.1 122.6 106.9 114.3	2 Opening 1 3 3 1 1 5 5 3 3 1 1 4 4 3 3 3 3 3 1 6 6		Floater 2 2 2	2 2	Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Transition Unit II Total School Age I School Age II School Age III School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo.	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244 173 417 29 Consumers	9 Ser. Coor. 100 9 4 233 100 9 109 109 109 5 6 5 Ser. Coor.	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 97.7 122.6 106.9 114.3 106.7 Case Ratio	2 Opening 1 3 1 5 3 1 4 4 3 3 3 1 1 Opening	Hold	Floater		
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244 173 417 29 Consumers 6,618	9 Ser. Coor. 100 9 4 233 100 9 9 19 19 5 5 Ser. Coor.	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8 93.1 97.7 122.6 106.9 114.3 106.7 Case Ratio 108.5	2 Opening 1 3 3 1 1 5 5 3 3 1 1 1 4 4 4 3 3 3 3 1 1 1 1 1 1 1 1		Floater 2 2 2	2 2	Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total School Age I School Age II School Age III Total School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total AV Early Start 2 Total Status 1 Over 36 mo.	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 1116 640 244 173 417 29 Consumers 6,618 1,057	9 Ser. Coor. 100 9 4 233 100 9 9 109 100 109 109 55 Ser. Coor. 61 111	#DIV/0! 80.3 2ase Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 122.6 106.9 114.3 Case Ratio	2 Opening 1 3 3 1 1 5 5 3 3 3 3 1 1 4 4 3 3 3 3 3 1 1 1 1 1 1 1		Floater 2	2 2 2 OD 2	Assoc.
Intake Services Antelope Valley Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II Total School Age II School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo.	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244 173 417 29 Consumers 6,618 1,057 7,675	9 Ser. Coor. 100 9 4 233 100 9 9 19 19 5 5 Ser. Coor.	#DIV/0! 80.3 Case Ratio 103.9 121.6 114.3 112.6 101.8 93.1 97.7 122.6 106.9 114.3 106.7 Case Ratio 108.5	2 Opening 1 3 3 1 1 5 5 3 3 3 6 6 5 5 6 6 6 6 6 6 6 6 6 6 6		Floater		Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Transition Unit II Total School Age I School Age II School Age III School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total AV Self Determination Specialist*	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244 173 417 29 Consumers 6,618 1,057 7,675	9 Ser. Coor. 100 9 4 233 100 9 9 109 100 109 109 100 109 100 100 100 10	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 97.7 122.6 106.9 114.3 106.7 Case Ratio	2 Opening 1 3 3 1 1 5 5 3 3 3 3 1 1 4 4 3 3 3 3 3 1 1 1 1 1 1 1		Floater 2	2 2 2 OD 2	Assoc.
Intake Services Antelope Valley Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Transition Unit II School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo.	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244 173 417 29 Consumers 6,618 1,057 7,675	9 Ser. Coor. 100 9 4 233 100 9 9 109 100 109 109 55 Ser. Coor. 61 111	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 97.7 122.6 106.9 114.3 106.7 Case Ratio	2 Opening 1 3 3 1 1 5 5 3 3 3 6 6 5 5 6 6 6 6 6 6 6 6 6 6 6		Floater 2	2 2 2 OD 2	Assoc.
Intake Services Antelope Valley Adult Unit II Adult Unit III Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total School Age I School Age II School Age III School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 (Status 1 & 2) AV Early Start 2 Total AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start AV Self Determination Specialist* AV Intake Services	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425	9 Ser. Coor. 100 9 4 233 100 9 9 109 109 109 109 109 109 109 100 119 100 110 11	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 122.6 106.9 114.3 Case Ratio 108.5 96.1 106.6	2 Opening 1 3 1 1 5 3 3 1 1 4 3 3 3 1 1 Opening 1 1 Opening 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater 2 2 2 2 2 2	2 2 2 OD 2 2 2	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Transition Unit II Transition Unit II Total School Age II School Age II School Age III School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425	9 Ser. Coor. 100 9 4 233 100 9 109 100 109 100 100 110 110 110 1	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 17.7 122.6 106.9 114.3 Case Ratio 106.7 Case Ratio 108.5 96.1 1106.6 Case Ratio	2 Opening 1 3 3 1 1 5 5 3 3 3 6 6 5 5 6 6 6 6 6 6 6 6 6 6 6		Floater 2	2 2 2 OD 2 2 2 OD	Assoc.
Intake Services Antelope Valley Adult Unit II Adult Unit III Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total School Age I School Age II School Age III School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 (Status 1 & 2) AV Early Start 2 Total AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start AV Self Determination Specialist* AV Intake Services	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425	9 Ser. Coor. 100 9 4 233 100 9 9 109 109 109 109 109 109 109 100 119 100 110 11	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 122.6 106.9 114.3 Case Ratio 108.5 96.1 106.6	2 Opening 1 3 1 1 5 3 3 1 1 4 3 3 3 1 1 Opening 1 1 Opening 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater 2 2 2 2 2 2	2 2 2 OD 2 2 2	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II Total School Age II School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Total AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425 Consumers	9 Ser. Coor. 100 9 4 233 100 9 9 109 109 109 109 109 109 5er. Coor. 611 72 5 Ser. Coor. 11	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 122.6 106.9 114.3 106.7 Case Ratio 108.5 96.1 106.6 85.0 Case Ratio 86.4	2 Opening 1 3 1 1 5 3 3 1 1 4 3 3 3 1 1 Opening 1 1 Opening 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater 2 2 2 2 2 2	2 2 2 OD 2 2 2 OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit II Transition Unit I Transition Unit I Transition Unit II Total School Age I School Age II School Age III School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425 Consumers	9 Ser. Coor. 100 9 9 4 233 100 9 9 100 100 100 199 100 100 100 100 100 10	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 97.7 122.6 106.9 114.3 Case Ratio 106.7 83.4 Case Ratio 108.5 96.1 106.6 Case Ratio 86.4	2 Opening 1 3 1 1 5 3 3 1 1 4 3 3 3 1 1 Opening 1 1 Opening 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater 2 2 2 2 2 2	2 2 2 OD 2 2 2 OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II Total School Age II School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 1116 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425 Consumers Consumers 950 1000 565	9 Ser. Coor. 100 9 4 233 100 9 9 109 109 109 109 109 109 5er. Coor. 611 72 5 Ser. Coor. 11	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 122.6 106.9 114.3 106.7 Case Ratio 108.5 96.1 106.6 85.0 Case Ratio 86.4	2 Opening 1 3 1 1 5 3 3 1 1 4 3 3 3 1 1 Opening 1 1 Opening 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater 2 2 2 2 2 2	2 2 2 OD 2 2 2 OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II School Age I School Age II School Age III School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit I Transition Unit II Total	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 640 2,172 524 116 640 2,172 29 Consumers 6,618 1,057 7,675 13 425 Consumers 950 100 5655 665	9 Ser. Coor. 100 9 4 4 233 100 9 9 109 109 109 109 109 109 109 109 109 10	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 112.6 106.9 114.3 Case Ratio 108.5 96.1 106.6 85.0 Case Ratio 86.4 100.0 94.2	2 Opening 1 3 1 1 5 3 3 1 1 4 3 3 3 1 1 Opening 1 1 Opening 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater 2 2 2 2 2 2	2 2 2 OD 2 2 2 OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I I Adult Unit II I Adult Unit III Transition Unit I I Transition Unit II Transition Unit II Total School Age I School Age II School Age III AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit II Total School Age Unit I	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425 Consumers 950 100 565 665 925	9 Ser. Coor. 100 9 4 233 100 9 9 109 109 109 109 5 Ser. Coor. 61 111 72 5 Ser. Coor. 11 6 6	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 97.7 122.6 106.9 114.3 Case Ratio 108.5 96.1 100.6 Case Ratio 85.0 Case Ratio 94.2	2 Opening 1 3 1 1 5 3 3 1 1 4 3 3 3 1 1 Opening 1 1 Opening 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater 2 2 2 2 2 2	2 2 2 OD 2 2 2 OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit II Total	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 1116 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425 Consumers Consumers 950 100 565 665 925 429	9 Ser. Coor. 100 9 4 4 233 100 9 9 109 109 109 109 109 109 109 109 109 10	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 97.7 122.6 106.9 114.3 Case Ratio 108.5 96.1 100.6 Case Ratio 85.0 Case Ratio 94.2	2 Opening 1 3 1 1 5 3 3 1 1 4 3 3 3 1 1 Opening 1 1 Opening 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater 2 2 2 2 2 2	2 2 2 OD 2 2 2 OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit I Transition Unit II School Age Unit I School Age Unit I	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 1116 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425 Consumers Consumers 950 100 565 665 925 429	9 Ser. Coor. 100 9 4 233 100 9 9 109 109 109 109 109 55 Ser. Coor. 111 72 55 Ser. Coor. 11 16 66 100 55	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 122.6 106.9 114.3 Case Ratio 6.7 83.4 Case Ratio Case Ratio 6.8 6.0 Case Ratio 94.2 92.5 85.8	2 Opening 1 3 1 1 5 3 3 1 1 4 3 3 3 1 1 Opening 1 1 Opening 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater 2 2 2 2 2 2	2 2 2 OD 2 2 2 OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Transition Unit II Total School Age II School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit I Transition Unit II School Age Unit I School Age Unit I Total Total Total Total Total Total Total School Age Unit I Total	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425 Consumers 950 100 5665 665 925 429 1,354	9 Ser. Coor. 100 9 4 233 100 9 9 109 109 109 109 109 55 Ser. Coor. 111 72 55 Ser. Coor. 11 16 66 100 55	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 122.6 106.9 114.3 Case Ratio 6.7 83.4 Case Ratio Case Ratio 6.8 6.0 Case Ratio 94.2 92.5 85.8	2 Opening 1 3 1 1 5 3 3 1 1 4 3 3 3 1 1 Opening 1 1 Opening 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater 2 2 2 2 2 2	2 2 2 OD 2 2 2 OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total School Age I School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit II School Age Unit I School Age Unit II School Age Unit II Early Start (status 1 & 2)	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 1116 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425 Consumers Consumers 950 100 565 965 925 429 1,354 556 666	9 Ser. Coor. 100 9 4 233 100 9 9 109 109 109 109 109 55 Ser. Coor. 111 72 55 Ser. Coor. 11 16 66 100 55	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 122.6 106.9 114.3 106.7 Case Ratio Case Ratio 0.8 5.0 Case Ratio	2 Opening 1 3 1 1 5 3 3 1 1 4 3 3 3 1 1 Opening 1 1 Opening 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hold	Floater 2 2 2 2 2 2	2 2 2 OD 2 2 2 OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II School Age II School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit I Transition Unit II School Age Unit I School Age Unit I School Age Unit I Early Start Total Early Start Total Early Start Intake Early Start Total	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 1,103 1,069 2,172 524 116 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425 Consumers 950 100 565 665 925 429 1,354	9 Ser. Coor. 100 9 4 233 100 9 9 109 109 109 109 109 109 109 109 109 10	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 122.6 106.9 114.3 106.7 Case Ratio Case Ratio 0.8 5.0 Case Ratio	2 Opening 1 3 3 1 1 5 3 3 1 4 3 3 3 1 1 Opening 1 1 Opening 1 Opening	Hold	Floater 2 2 2 Floater Floater	2 2 2 OD 2 2 2 OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Transition Unit II Total School Age I School Age II School Age III School Age III AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit I School Age Unit I School Age Unit I School Age Unit I Early Start (status 1 & 2) Early Start Intake	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 640 640 640 640 7,675 13 417 7,675 13 425 Consumers Consumers Consumers 100 565 665 925 429 1,354 556 666 622 15	9 Ser. Coor. 100 9 4 233 100 9 9 109 109 109 109 109 109 109 109 109 10	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 122.6 106.9 114.3 106.7 Case Ratio Case Ratio 0.8 5.0 Case Ratio	2 Opening 1 3 3 1 1 5 3 3 1 4 3 3 3 1 1 Opening 1 1 Opening 1 Opening	Hold	Floater 2 2 2 Floater Floater	2 2 2 OD 2 2 2 OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Transition Unit II Total School Age II School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 2 (Status 1 & 2) AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit II School Age Unit I School Age Unit I School Age Unit II Early Start (status 1 & 2) Early Start Intake Early Start Total Status 1 Over 36 mo.	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425 Consumers 100 565 925 429 1,354 556 66 622 15 Consumers 2,969	9 Ser. Coor. 10 9 9 4 4 233 100 9 9 10 10 19 19 5 Ser. Coor. 11 72 5 Ser. Coor. 11 1 6 9 Ser. Coor. 33	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 122.6 106.9 114.3 Case Ratio 108.5 96.1 106.6 85.0 Case Ratio 86.4 100.0 94.2 92.5 85.8 90.3 G9.1 Case Ratio 90.0	2 Opening 1 3 1 1 5 3 1 1 4 3 3 3 1 1 Opening 1 1 Opening 2 Opening	Hold	Floater 2 2 2 Floater 1	2 2 2 OD 2 2 2 OD	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total School Age I School Age II School Age III School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit II Transition Unit II Transition Unit II School Age Unit II Early Start (status 1 & 2) Early Start Intake Early Start Total Status 1 Over 36 mo.	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 640 244 116 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425 Consumers 950 100 565 665 665 925 15 Consumers	9 Ser. Coor. 10 9 4 233 10 9 19 9 10 19 5 5 Ser. Coor. 11 11 6 10 5 5 Ser. Coor. 3 9 Ser. Coor. 3 9 Ser. Coor. 3 9 Ser. Coor.	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 97.7 122.6 106.9 114.3 106.7 Case Ratio 108.5 96.1 100.0 94.2 92.5 85.8 90.3 69.1 Case Ratio 90.0 69.1	2 Opening 1 3 1 5 3 1 4 4 3 3 3 1 Opening 15 4 19 1 Opening 2 Opening	Hold	Floater 2 2 2 Floater 1 1	OD 2 2 2 OD 1 1	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit I Adult Unit II Adult Unit III Transition Unit I Transition Unit II Total School Age II School Age II School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit I Transition Unit I Transition Unit I School Age Unit II School Age Unit II Early Start (status 1 & 2) Early Start Total Status 1 Over 36 mo. Total Non-Early Start Total Status 1 Over 36 mo.	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 640 640 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425 Consumers 950 100 565 665 925 429 1,354 556 666 622 1,55 Consumers	9 Ser. Coor. 100 9 9 4 4 233 100 9 9 109 109 109 109 109 109 100 109 100 100	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 122.6 106.9 114.3 106.7 Case Ratio 108.5 96.1 106.6 Case Ratio 90.0 69.1 Case Ratio 90.0 69.1 85.5	2 Opening 1 3 1 1 5 3 1 1 4 3 3 3 1 1 Opening 1 1 Opening 2 Opening	Hold	Floater 2 2 2 Floater 1	2 2 2 OD 1	Assoc. Assoc.
Intake Services Antelope Valley Adult Unit II Adult Unit II Adult Unit III Transition Unit I Transition Unit II Transition Unit II Total School Age I School Age II School Age III School Age III Total AV Early Start 1 (Status 1 & 2) AV Early Start 1 Intake AV Early Start 1 Total AV Early Start 2 (Status 1 & 2) AV Early Start 2 Total Status 1 Over 36 mo. Total Non-Early Start Total Early Start Total AV Self Determination Specialist* AV Intake Services Santa Clarita Valley Adult Unit Transition Unit II Transition Unit II Transition Unit II School Age Unit II Early Start (status 1 & 2) Early Start Intake Early Start Total Status 1 Over 36 mo.	723 Consumers 1,039 1,094 457 2,590 1,018 838 1,856 640 244 116 640 244 173 417 29 Consumers 6,618 1,057 7,675 13 425 Consumers 950 100 565 665 665 925 15 Consumers	9 Ser. Coor. 10 9 4 233 10 9 19 9 10 19 5 5 Ser. Coor. 11 11 6 10 5 5 Ser. Coor. 3 9 Ser. Coor. 3 9 Ser. Coor. 3 9 Ser. Coor.	#DIV/0! 80.3 Case Ratio 103.9 121.6 1114.3 112.6 101.8 93.1 122.6 106.9 114.3 106.7 Case Ratio 108.5 96.1 106.6 Case Ratio 90.0 69.1 Case Ratio 90.0 69.1 85.5	2 Opening 1 3 1 5 3 1 4 4 3 3 3 1 Opening 15 4 19 1 Opening 2 Opening	Hold	Floater 2 2 2 Floater 1 1	OD 2 2 2 OD 1 1	Assoc. Assoc.

September 2022 CSC Caseload Ratio

All Valleys	Consumers	Ser. Coor.	Case Ratio	Opening	Hold	Floater	OD	Assoc.
Total Non-Early Start	25,392	255	99.6	33		4	3	
Total Early Start	4,869	60	81.2	12		1		3
Sub-total	30,261	316	95.8	48		5	3	
*Self Determination Specialist	39	1		3				
*Total Non Early Start Supervisor	110							
*Total Early Start Supervisor Status 1&2	8							
*Total Early Start Supervisor Intake	31							
Intake Services	1,148	14	82.0					4
Prenatal Services								
Provisional Eligibility	420	6	70.0			1		
Enhanced Caseloads	205	6	34.2					
On-Duty Specialist Unit							4	
AV On-Duty Specialist Unit							2	
Development Center	16							
Enhanced Case Management	34	1						
Specialized 1:25 Caseloads	22	2		1				
Pending Transfer	70							
Total	32,364	345	93.8	49		6	9	7

* Numbers not part of ratio count, but co	unted on			
Total Summary section				
SFV Adult Unit Supervisor*	15			
SFV Transition Unit Supervisor*	19			
SFV School Age Unit Supervisor*	48			
SFV Early Start Unit Supervisor*	5			
SFV Early Start Intake Unit Supervisor*	17			
Provisional Unit Supervisor	14			
SCV Early Start Unit Supervisor*	2			
SCV Early Start Intake Unit Supervisor*	3			
SCV School Age Supervisor*	6			
AV Adult Unit Supervisor*	1			
AV Transition Supervisor*	2			
AV School Age Supervisor*	5			
AV Early Start Unit Supervisor*	1			
AV Early Start Intake Unit Supervisor*	11			

FOR REFERENCE Cases included in Sub-Total above						
(1)Total Status 1 Over 36 mo.	94	Medicaid Wa	iver by Office:			
(2) Shared-in	6	SFVO	6493			
(3)Shared-out	25	SCVO	1363			
Total Early Start (Status 1 & 2)	4,083	AVO	2415			
Total Early Start Intake	825	IRT	21			
		Total	10292			

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

Special Incident Reports in September 2022

Special Incidents	Children	Adults	Total
Other	1	77	78
D 4	0		-
Death	0	6	6

Special Incident Reports From Prior Months Reported in September 2022

Special Incidents	Children	Adults	Total
Other	0	7	7
Death	1	7	8
			15
TOTAL			99

Special Incident Types Report July 2022 through September 2022 & September 2021

Reasonably Suspected Abuse	22-Sep	22-Aug	22-Jul	21-Sep
Physical Abuse/Exploitation	13	5	3	3
Sexual Abuse/Exploitation	1	2	2	0
Fiduciary Abuse/Exploitation	6	1	1	1
Emotional/Mental Abuse/Exploitation	1	3	1	0
Physical and/or Chemical Restraint	3	2	0	1
Neglect Tot	al: 24	13	7	5
Failure to Provide Care to Elderly/Adult	0	0	1	4
Failure to Provide Medical Care	0	1	0	0
Failure to Provide Medical Care Failure to Prevent Malnutrition	0	0	0	0
Failure to Prevent Maintainton Failure to Prevent Dehydration	0	0	0	0
Failure to Protect from H/S Hazards	2	3	_	
	0		2	5 0
Failure to Assist w/ Personal Hygiene Failure to Provide Food/Cloth/Shelter		0	_	
Tot	0 <mark>al: 2</mark>	2	0	0 9
Serious Injuries/Accidents	al. Z	0	3	9
Lacerations	2	Q	6	1
Puncture wounds	3	8	6	4
	0	0	-	_
Fractures	3	5	3	3
Dislocations	0	1	1	0
Bites	0	0	0	0
Internal Bleeding	2	1	1	2
Medication Errors	17	3	4	9
Medication Reactions	1	1	0	0
Burns	0	0	0	0
Tota		19	15	18
Unplanned/Unscheduled Hospitalization	_	4.4	7	40
Respiratory Illness	/	11	7	12
Seizure Related	3	3	4	4
Cardiac Related	4	1	4	2
Internal Infections	13	11	12	8
Diabetes	0	0	1	0
Wound/Skin Care	0	3	3	1
Nutritional Deficiencies	2	1	0	4
Involuntary Psych Admission	4	5	2	5
Tot	al: 33	35	33	36
Victim of Crime	4	•	•	•
Robbery	1	0	0	0
Aggravated Assault	2	1	1	5
Larceny	5	0	1	1
Burglary	0	0	1	0
Rape or Attempted Rape	0	0	1	3
Tot	al: 8	1	4	9
Other	_	_	_	_
Missing Person-Law Notified	2	2	0	5
Death	16	10	7	13
Tot		12	7	18
Total Incidents*	111	86	69	95

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

	Description	Action	Final Disposition
Incidents of Death Children		Incidents from prior	months and reported in September
Age: 7 Inc. Date: 5/5/22	The consumer resided in the family home. He was experiencing medical complications due to chronic health issues. He underwent emergency surgery which resulted in a coma and he passed a few days after.	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.	

	Description	Action	Final Disposition		
Incidents of Death Adults	·				
Age: 21 Inc. Date: 6/19/22	The consumer was admitted to a Skilled Nursing Facility. He was transported to the hospital via ambulance due to organ failure and pneumonia. He passed away in the hospital while under doctor's care.	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.			
Age: 29 Inc. Date: 7/11/22	The consumer resided in the family home. His mother contacted NLARC to provide notification the consumer passed from a self-inflicted gunshot wound.	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.			
Age: 44 Inc. Date: 7/03/22	The consumer resided in the family home. He fell while at home and reported a severe headache. He was taken to the hospital 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.			
Age: 64 Inc. Date: 8/24/22	The consumer was admitted to a SNF. CSC was notified by family of his passing due to aspiration pneumonia. CSC is coordinating with SNF to obtain more information.	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.			

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

	Description	Action	Final Disposition
Age: 67 Inc. Date: 7/29/22	The consumer received Support Living Services. The consumer had been hospitalized due to organ failure and did not recover. She passed while admitted to 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.	
Age: 83 Inc. Date: 1/30/21	The consumer resided in the family home. She passed away in her sleep due to a heart attack and was found by her family.	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.	
Age: 87 Inc. Date: 8/29/22	The consumer resided in a Skilled Nursing Facility. He was placed on palliative care after experiencing a massive heart attack.	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.	

	Description	Action	Final Disposition
Other Incidents Children		Incidents from prior	months and reported in September
UCI:			
FN:			
LN:			
Age:			
Inc. Date:			

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

	Description	Action	Final Disposition
Other Incidents Adults		Incidents from pric	or months and reported in September
Age: 18 Inc. Date: 8/31/22	The consumer resides in a CCF. While on a community outing with his day program the consumer left the premises after asking to use the restroom. Staff were able to locate him and he reported leaving to smoke.	CSC to follow-up. NLACRC Community Services and Law Enforcement were notified of this incident.	
Age: 21 Inc. Date: 6/15/22	The consumer was admitted to a SNF. He was transferred to the hospital due to low oxygen levels and urine in blood. He was admitted to the hospital for further treatment and passed away while admitted.	CSC to follow-up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 34 Inc. Date: 8/4/22	The consumer resides in a CCF. She called 911 and reported she wanted to go to the hospital because she wanted to harm herself. Law Enforcement arrived and the consumer was admitted for Psychiatric treatment.	CSC to follow-up. Community Care Licensing, NLACRC Community Services, Law Enforcement, Psychiatric Consultant were notified of this incident.	
Age: 35 Inc. Date: 8/31/22	The consumer resides in the family home. He brought an alleged prostitute into the home who reportedly stole money and items from him.	CSC to follow-up. NLACRC Community Services were notified of this incident.	
Age: 48 Inc. Date: 5/14/22	The consumer receives SLS services. Staff entered his room without permission and the consumer became verbally aggressive with staff and pushed them out of the room. Staff was observed to have struck the consumer on the head and face with closed hands.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 49 Inc. Date: 9/1/22	The consumer receives SLS services. He reported staff hurt his arm while attempting to prevent him from smoking; staff reported consumer injured her while she was trying to follow him outside to smoke.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	

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

	Description	Action	Final Disposition
Age: 67 Inc. Date: 8/24/22	The consumer receives SLS services. Staff reported concerns regarding the consumer's spouse taking over her finances. He allegedly is not providing the consumer with essentials and is using the funds make large purchases.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	

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

	Description	Action	Final Disposition
Incidents of Death Adults			
Age: 34 Inc. Date: 9/12/22	The consumer resided in his personal residence. He passed away in his sleep due to a suspected heart attack.	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.	

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

	Description	Action	Final Disposition
Age: 35	The consumer resided in an ICF-DD/N.	CSC to follow up and request a copy	
Inc. Date: 9/15/22	She was admitted to the hospital for	of the death certificate. This case will	
	hospice care and pain management due	be forwarded to the Mortality	
	to cancer diagnosis. She passed in the	Review Committee for record	
	hospital while under doctor's care.	review.	
Age: 36	The consumer resided in the family	CSC to follow up and request a copy	
Inc. Date: 9/6/22	home. He was experiencing respiratory	of the death certificate. This case will	
	issues and was found unresponsive by	be forwarded to the Mortality	
	family. 911 was called and they were	Review Committee for record	
	unable to resuscitate him.	review.	
Age: 54	The consumer received Independent	CSC to follow up and request a copy	
Inc. Date: 9/19/22	Living Services. She was taken to the	of the death certificate. This case will	
	hospital for treatment of Pneumonia;	be forwarded to the Mortality	
	she was placed on hospice care while	Review Committee for record	
	admitted and passed in the hospital.	review.	
Age: 76	The consumer received Supported Living	CSC to follow up and request a copy	
Inc. Date: 9/5/22	Services. He was on hospice and was	of the death certificate. This case will	
	found unresponsive by staff. 911 was	be forwarded to the Mortality Review Committee for record	
	called and staff did compressions until		
	medics arrived. Paramedics attempted CPR however he has a DNR order and	review. NLACRC Community Services was notified of this incident.	
	died of natural causes.	was notined of this incident.	
A = 2 : 02	The consumer resided in an ICF/DD-H.	CSC to follow up and request a copy	
Age: 83	She was receiving hospice care and was	of the death certificate. This case will	
Inc. Date: 9/28/22	found unresponsive by staff. CPR was	be forwarded to the Mortality	
	performed and Law Enforcement, and	Review Committee for record	
	paramedics were called. It was	review. NLACRC Community Services	
	determined she had passed away.	was notified of this incident.	

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

	Description	Action	Final Disposition
Other Incidents Children			
Age: 10 Inc. Date: 9/12/22	The consumer resides in the family home. A vendor went to the home to conduct an intake when they observed the consumer receiving services from a different vendor and there were open alcohol containers throughout the home and outside.	CSC to follow up. Child Protective Services and NLACRC Community Services were notified of this incident.	

	Description	Action	Final Disposition
Other Incidents Adults			
Age: 21 Inc. Date: 9/13/22	The consumer resides in an ICF-DD/N. He arrived home from school with a bruise; the consumer had been restrained during a behavioral episode during school hours. The restraint was performed by the school behaviorist	CSC to follow up. Department of Health Services, Adult Protective Services, NLACRC Community Services and NLACRC Clinical were notified of this incident.	
Age: 23 Inc. Date: 9/3/22	The consumer resides in an ICF/DD-H. She missed a dose of her medication due to no medication passer being present on shift during her medication administration timeframe.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 24 Inc. Date: 9/7/22	The consumer resides in a CCF. Staff discovered financial records and funds were missing for multiple consumers in the home; it's believed they had been stolen from the home.	CSC to follow up. Community Care Licensing, Adult Protective Services, Law Enforcement and NLACRC Community Services were notified of this incident.	

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

	Description	Action	Final Disposition
Age: 25 Inc. Date: 9/14/22	The consumer resides in a CCF. He was out in the community and did not return to the facility in time to take his nighttime medication regimen; he did not respond when staff attempted to contact him via telephone.	CSC to follow up. Community Care Licensing, and NLACRC Community Services, and Nurse Consultant were notified of this incident.	
Age: 25 Inc. Date: 9/18/22	The consumer resides in a CCF. He was out in the community and did not return to the facility in time to take his nighttime medication regimen; he did not respond when staff attempted to contact him via telephone.	CSC to follow up. Community Care Licensing, and NLACRC Community Services, and Nurse Consultant were notified of this incident.	
Age: 25 Inc. Date: 9/21/22	The consumer resides in a CCF. He was out in the community and did not return to the facility in time to take his nighttime medication regimen; he did not respond when staff attempted to contact him via telephone.	CSC to follow up. Community Care Licensing, and NLACRC Community Services, and Nurse Consultant were notified of this incident.	
Age: 25 Inc. Date: 9/25/22	The consumer resides in a CCF. He was out in the community and did not return to the facility in time to take his nighttime medication regimen; he did not respond when staff attempted to contact him via telephone.	CSC to follow up. Community Care Licensing, and NLACRC Community Services, and Nurse Consultant were notified of this incident.	
Age: 25 Inc. Date: 9/28/22	The consumer resides in a CCF. He was out in the community and did not return to the facility in time to take his nighttime medication regimen; he did not respond when staff attempted to contact him via telephone.	CSC to follow up. Community Care Licensing, and NLACRC Community Services, and Nurse Consultant were notified of this incident.	
Age: 26 Inc. Date: 9/14/22	The consumer resides in an ICF/DD-N. He was experiencing labored breathing and lowered oxygen levels. Staff called 911 and he was transported to the hospital where he was admitted and treated for sepsis.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	

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

	Description	Action	Final Disposition
Age: 26 Inc. Date: 9/12/22	The consumer resides in the family home. Staff observed redness and a scratch on the consumer, when asked what happened he said a staff members name. He was unable to further express what happened.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 26 Inc. Date: 9/27/22	The consumer receives Supported Living Services. She fell and broke her wrist and reported feeling dizzy. Staff transported her to the ER where she received a cast and underwent further testing.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 27 Inc. Date: 9/6/22	The consumer resides in a CCF. Staff observed several marks on the consumer which resembled shoe prints. He has limited verbal ability and was unable to provide further details regarding the origin of the marks.	CSC to follow up. Community Care Licensing, Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 27 Inc. Date: 9/7/22	The consumer resides in a CCF. Staff discovered financial records and funds were missing for multiple consumers in the home; it's believed they had been stolen from the home.	CSC to follow up. Community Care Licensing, Adult Protective Services, Law Enforcement and NLACRC Community Services were notified of this incident.	
Age: 27 Inc. Date: 9/7/22	The consumer resides in a CCF. Staff discovered financial records and funds were missing for multiple consumers in the home; it's believed they had been stolen from the home.	CSC to follow up. Community Care Licensing, Adult Protective Services, Law Enforcement and NLACRC Community Services were notified of this incident.	
Age: 28 Inc. Date: 9/22/22	The consumer resides in a CCF. He injured himself while working on his bike. Staff transported 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: 28 Inc. Date: 9/29/22	The consumer resides in the family home. He reported being pushed by staff while at the work site for not doing the job properly.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	

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

	Description	Action	Final Disposition
Age: 29 Inc. Date: 9/6/22	The consumer receives Supported Living Services. She experienced a seizure and was given a PRN by staff; staff later discovered the consumer had received her max allotment of PRN's.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 29 Inc. Date: 9/9/22	The consumer resides in a CCF. He hit his head against the wall and received a cut which began bleeding. Staff called 911 and paramedics applied first aid. He was transported to the hospital due to agitation and violent behavior towards staff and responders; he received stitches for the wound at the hospital.	CSC to follow up. Community Care Licensing, NLACRC Community Services, Law Enforcement and Nurse Consultant were notified of this incident.	
Age: 29 Inc. Date: 9/10/22	The consumer receives Supported Living Services. He verbalized suicidal ideation and was transported to the hospital for evaluation and was placed on a psychiatric hold.	CSC to follow up. Psychiatric Consult, and NLACRC Community Services and were notified of this incident.	
Age: 29 Inc. Date: 9/15/22	The consumer receives Supported Living Services. He was having dinner with friends and went outside to smoke a cigarette. An unknown transient approached him for a cigarette and allegedly assaulted him. He was taken to the ER for evaluation; no serious injuries were reported or observed.	CSC to follow up. NLACRC Community Services, Law Enforcement and Adult Protective services were notified of this incident.	
Age: 29 Inc. Date: 9/22/22	The consumer receives Supported Living Services. He banged his head on furniture during a behavioral episode and sustained a scratch. Staff took him to the hospital, and he experienced a seizure while waiting and was admitted for further observation.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 29 Inc. Date: 9/16/22	The consumer resides in a CCF. She reported to day program staff she was kicked in the leg by home staff while having a behavioral episode; home staff	CSC to follow up. Community Care Licensing, Adult Protective Services and NLACRC Community Services were notified of this incident.	

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

	Description	Action	Final Disposition
	reported the consumer fell and told staff she was going to have them fired.		
Age: 33 Inc. Date: 9/19/22	The consumer resides in an ICF/DD-H. While being transported to day program by the vendor, she fell out of her seat and hurt her leg. She was strapped into her seat however the seatbelt was loose.	CSC to follow up. Department of Health Services, Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 34 Inc. Date: 9/4/22	The consumer resides in an ICF/DD-H. Staff observed the consumer moaning and uncomfortable; he had a fever and was taken to the ER. He was admitted and received treatment for UTI and high magnesium levels.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 34 Inc. Date: 9/8/22	The consumer resides in a CCF. He became upset after a call with his girlfriend; he damaged residential and staff property then left the home. He was found by Law Enforcement and returned to the home.	CSC to follow up. Community Care Licensing, Law Enforcement and NLACRC Community Services were notified of this incident.	
Age: 35 Inc. Date: 9/7/22	The consumer resides in an ICF/DD-N. Staff observed her bleeding and called 911. She was taken to the hospital and admitted due to a ruptured tumor.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 35 Inc. Date: 9/6/22	The consumer receives Independent Living services. He was involved in a domestic dispute which resulted in his family member hitting him on the head with a bat. He was transported to the hospital for stitches.	CSC to follow up. NLACRC Community Services, Law Enforcement and Adult Protective services were notified of this incident.	
Age: 35 Inc. Date: 9/27/22	The consumer resides in an ICF-DD/N. He reported stomach pain to staff and vomited; 911 was called and he was transported to the hospital and admitted for treatment of Urinary Tract Infection.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	

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

	Description	Action	Final Disposition
Age: 36 Inc. Date: 9/9/22	The consumer resides in an ICF/DD-H. He experienced a prolonged seizure at day program; staff called 911 and he was transported to the hospital and admitted for further evaluation.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 36 Inc. Date: 9/21/22	The consumer receives Supported Living Services. She reported that recently terminated staff deposited a check from her bank account after being terminated from the agency.	CSC to follow up. Adult Protective Services, Law Enforcement and NLACRC Community Services were notified of this incident.	
Age: 38 Inc. Date: 9/14/22	The consumer receives Independent Living Services. She began experiencing shortness of breath and chest pain; she disclosed to the vendor her family was told about the pain yesterday and didn't care. 911 was called and she was taken to the hospital. She was admitted and treated for low oxygen levels.	CSC to follow up. NLACRC Community Services, Adult Protective Services, and Nurse Consultant were notified of this incident	
Age: 38 Inc. Date: 9/25/22	The consumer resides in a CCF. Staff administered another consumer's medication to him. Staff transported him to the ER for evaluation and bloodwork was completed; there were no adverse reactions.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident	
Age: 39 Inc. Date: 9/7/22	The consumer receives Supported Living Services. He became violent towards staff and punched them; staff threw him to the ground in attempts to perform a restraint however staff did not use proper techniques. The consumer sustained scratches and bruising.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 39 Inc. Date: 9/14/22	The consumer resides in a CCF. He experienced a seizure and staff called 911. He was transported to the hospital and admitted for further observation and testing.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	

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

	Description	Action	Final Disposition
Age: 39 Inc. Date: 9/16/22	The consumer resides in an ICF/DD-H. Home staff discovered she was not administered her morning medication; she was monitored by staff and there were no adverse reactions noted.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 40 Inc. Date: 9/25/22	The consumer resides in a CCF. She was taking out the trash while another resident was also taking out the trash. The other resident put his hands down his shorts and exposed himself to the consumer. She turned and walked away.	CSC to follow up. Community Care Licensing, Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 42 Inc. Date: 9/3/22	The consumer resides in an ICF/DD-H. She missed a dose of her medication due to no medication passer being staffed on shift during her medication administration timeframe.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 46 Inc. Date: 9/11/22	The consumer receives Support Living Services. He was experiencing trouble breathing due to ongoing Pneumonia and called 911. Paramedics transported him to the hospital, and he was admitted for further evaluation.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 47 Inc. Date: 9/9/22	The consumer resides in an ICF/DD-H. He fell while using the restroom and hit his head causing a laceration. He was transported to the hospital and received staples to close the wound and a negative CT scan.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 49 Inc. Date: 9/28/22	The consumer receives Supported Living Services. She reported not feeling well and appeared anxious and tearful. She was taken to the ER for evaluation. She was placed on a Psychiatric Hold for further evaluation.	CSC to follow-up. Community Care Licensing, NLACRC Community Services, Law Enforcement, Psychiatric Consultant were notified of this incident.	
Age: 50 Inc. Date: 9/16/22	The consumer resides in an ICF/DD-H. Staff noticed she was pale and took her vitals. She was taken to urgent care and	CSC to follow up. Department of Health Services, NLACRC Community	

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	Description	Action	Final Disposition
	admitted to the hospital for treatment of Sepsis.	Services and Nurse Consultant were notified of this incident.	
Age: 52 Inc. Date: 9/8/22	The consumer resides in a CCF. She was experiencing a tube blockage and staff called 911 and she was transported to the hospital. She was admitted for tube placement treated for a UTI.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 52 Inc. Date: 9/25/22	The consumer receives Supported Living Services. She was in the community with SLS coach when two unknown individuals with a gun attempted to steal the car. She yelled and kicked them until they left the scene due to her behavior.	CSC to follow up. Law Enforcement and NLACRC Community Services were notified of this incident.	
Age: 52 Inc. Date: 9/28/22	The consumer resides in a CCF. He fell asleep while eating and fell from his chair, bumping his head. He was taken to the ER and tests showed no concussion or injury; his doctor discontinued medications believed to have caused sleepiness.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 53 Inc. Date: 9/21/22	The consumer resides in an ICF/DD-H. Staff discovered she was not administered her morning medication regimen. She missed one dose and there were no adverse reactions noted.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 54 Inc. Date: 9/13/22	The consumer resides in a CCF. Staff made a report against another staff member of the home alleging they yell at, speak inappropriately to the consumer and don't allow her to leave the facility.	CSC to follow up. Community Care Licensing, Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 54 Inc. Date: 9/24/22	The consumer receives Supported Living services. He attempted to physically assault staff and staff responded with an unauthorized hold of the consumer. The staff was observed cursing at the consumer in response to his behavior.	CSC to follow up. Adult Protective Services and NLACRC Community Services were notified of this incident.	

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	Description	Action	Final Disposition
Age: 54 Inc. Date: 9/30/22	The consumer resides in a CCF. After a shower she was resisting staff while they attempted to dress her. Staff was observed ignoring the consumers request to stop and forcefully putting the shirt on her.	CSC to follow up. Community Care Licensing, Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 55 Inc. Date: 9/1/22	The consumer receives Supported Living Services. During a routine doctor's appointment, she was informed her blood pressure was too high and was admitted to the hospital for treatment and observation.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 56 Inc. Date: 9/14/22	The consumer resides in an ICF/DD-H. Staff reported the consumer was administered an extra dose of medicine with her morning regimen. There were no complications or adverse reactions.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 57 Inc. Date: 9/24/22	The consumer resides in a CCF. Staff observed the consumers foot to be swollen and wrapped it. He was transported to the ER where he was diagnoses with a leg fracture and received a splint.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 59 Inc. Date: 9/17/22	The consumer resides in an ICF/DD-H. Staff observed her lethargic and refusing to eat; 911 was called and she was transported to the hospital. She was treated with anti-biotics and kept for observation.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 60 Inc. Date: 9/10/22	The consumer resides in an ICF/DD-H. She was observed by staff to be tired and not eating much with a fever. She was transported to the hospital and admitted for a heart attack.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Inc. Date: 9/19/22	The consumer resides in a CCF. He began vomiting and was refusing food and liquids. Staff transported him to the	CSC to follow up. Community Care Licensing, NLACRC Community	

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

	Description	Action	Final Disposition
	hospital, and he was admitted for further testing and treated with antibiotics.	Services and Nurse Consultant were notified of this incident.	
Age: 60 Inc. Date: 9/27/22	The consumer resides in a CCF. He was vomiting and refusing to eat or drink. Staff transported him to the ER where he was admitted for further testing.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 60 Inc. Date: 9/22/22	The consumer is admitted to a SNF. She reported a former staff member of hers continues to contact her to sign unknown paperwork. Additionally, the former staff member made unauthorized purchases on her card.	CSC to follow up. Law Enforcement, Long-term Care Ombudsman, Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 60 Inc. Date: 9/27/22	The consumer receives Supported Living Services. Staff observed the consumer limping and scheduled a doctor's appointment. Testing showed a foot fracture, and she was placed in a cast.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 61 Inc. Date: 9/6/22	The consumer resides in an ICF/DD-H. Staff observed day program transportation staff tug at the consumer and report she was lifted by her waist and dropped on the floor.	CSC to follow up. Department of Health Services, Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 61 Inc. Date: 9/8/22	The consumer resides in a CCF. He woke up from a nap feeling weak and began vomiting. Staff called 911 and he was taken to the hospital and admitted for further observation.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 61 Inc. Date: 9/15/22	The consumer receives Supported Living Services. He reported having a Urinary Tract Infection and requested staff to take transport him to the hospital. He was admitted and treated with antibiotics.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	

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

	Description	Action	Final Disposition
Age: 62 Inc. Date: 9/20/22	The consumer resides in an ICF/DD-H. She reported to day program staff that she was hit in the head; however, she was unable to provide any additional information to assist with identifying a timeframe, location, or perpetrator.	CSC to follow up. Department of Health Services, Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 63 Inc. Date: 9/23/22	The consumer resides in a CCF. He was observed by staff to have difficulty catching his breath. He went to the ER and received treatment for shortness of breath and discharged. Staff received a call from the ER later stating the consumer was positive for infection and to bring him back for further treatment.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 65 Inc. Date: 9/3/22	The consumer resides in a CCF and is temporarily admitted to SNF. She began vomiting blood and staff called 911. She was transferred to the hospital and admitted for further observation and testing.	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 65 Inc. Date: 9/13/22	The consumer receives Independent Living Services. Staff failed to assist consumer with administering nighttime medication routine. There were no adverse reactions noted.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 66 Inc. Date: 9/17/22	The consumer resides in a CCF. A resident in the home reported staff slapped the consumer on the head	CSC to follow up. Community Care Licensing, Long-term Care Ombudsman, Adult Protective Services and NLACRC Community Services were notified of this incident.	
Age: 66 Inc. Date: 9/21/22	The consumer resides in an ICF-DD/N and was admitted to a Skilled Nursing Facility (SNF). The SNF sent the consumer to the hospital for treatment of septic shock and pneumonia.	CSC to follow up. NLACRC Community Services and Nurse Consultant were notified of this incident.	

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

	Description	Action	Final Disposition
Age: 67 Inc. Date: 9/3/22	The consumer resides in an ICF/DD-H. She missed a dose of her medication due to no medication passer being present on shift during her medication administration timeframe.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 68 Inc. Date: 9/3/22	The consumer resides in an ICF/DD-H. She missed a dose of her medication due to no medication passer being present on shift during her medication administration timeframe.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 68 Inc. Date: 9/12/22	The consumer resides in an ICF/DD-H. She had to use the restroom and attempted to get out of bed independently and fell on her face. She was taken to ER for evaluation and diagnosed with a fracture.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 68 Inc. Date: 9/21/22	The consumer resides in an ICF/DD-H. Staff discovered she was not administered her morning medication regimen. She missed one dose and there were no adverse reactions noted.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 68 Inc. Date: 9/22/22	The consumer resides in an ICF/DD-H. Staff observed him wheezing loudly and took him to the hospital for evaluation. He was admitted and treated for low sodium.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 70 Inc. Date: 9/16/22	The consumer resides in an ICF/DD-N. He was wheezing and staff gave oxygen treatment; staff was concerned about his change of condition and called 911. He was taken to the hospital and admitted for further observation and testing.	CSC to follow up. Department of Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 71 Inc. Date: 9/27/22	The consumer resides in a CCF. During a medical appointment he appeared to be weak, cold, and clammy. He vomited and appeared confused; paramedics	CSC to follow up. Community Care Licensing, NLACRC Community Services and Nurse Consultant were notified of this incident.	

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

	Description	Action	Final Disposition
	transported him to the hospital, and he was admitted for further observation.		
Age: 74	The consumer receives Supported Living	CSC to follow up. NLACRC	
Inc. Date: 9/5/22	Services. Staff observed she was showing signs of a stroke. 911 was called and she was taken to the hospital. CT and MRI confirmed a stoke; she was admitted for irregular heartbeat.	Community Services and Nurse Consultant were notified of this incident.	
Age: 76	The consumer resides in an ICF/DD-H.	CSC to follow up. Department of	
Inc. Date: 9/7/22	She was experiencing breathing issues and requested to go to the hospital. 911 was called and she was admitted for congestive heart failure.	Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 79	The consumer resides in an ICF/DD-H.	CSC to follow up. Department of	
Inc. Date: 9/3/22	She missed a dose of her medication due to no medication passer being present on shift during her medication administration timeframe.	Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	
Age: 83	The consumer lives in an ICF/DD-H.	CSC to follow up. Department of	
Inc. Date: 9/16/22	During her doctor's appointment it was advised she go to the ER due to altered mental state. She was taken to the hospital and admitted for treatment of a Urinary Tract Infection.	Health Services, NLACRC Community Services and Nurse Consultant were notified of this incident.	

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



North Los Angeles County Regional Center

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Self Determination Program Report - Implementation Updates

October 1, 2022

North Los Angeles County Regional Center Statistics

Participants have completed Orientation: 562

Total number of budgets that are certified: 181

Total number of budgets that are in the certification process: 9

Total number of spending plans that are approved: 149

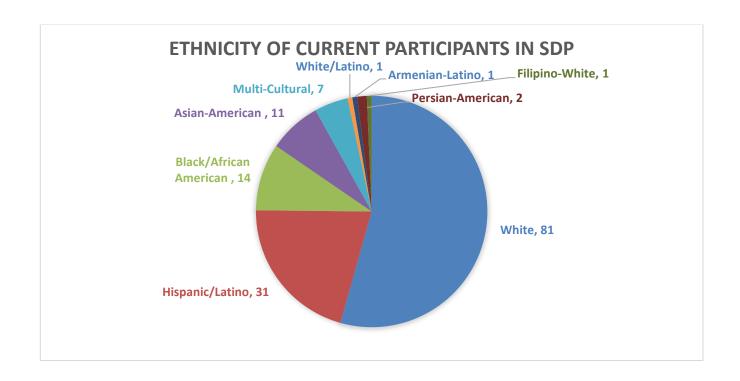
Total number of spending plans in progress: 32

Total number of PCP's completed: 164

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

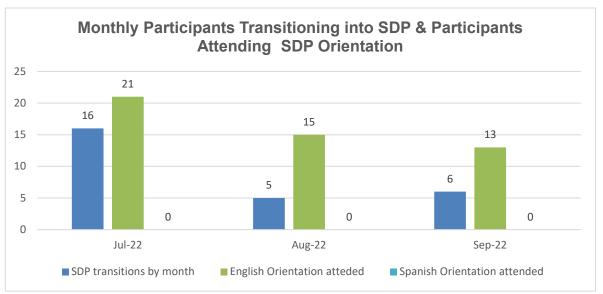
Total number of participants that have fully transitioned into SDP with approved

spending plans and active SDP IPPs: 149

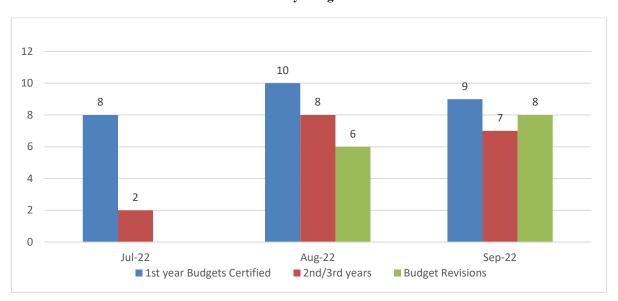




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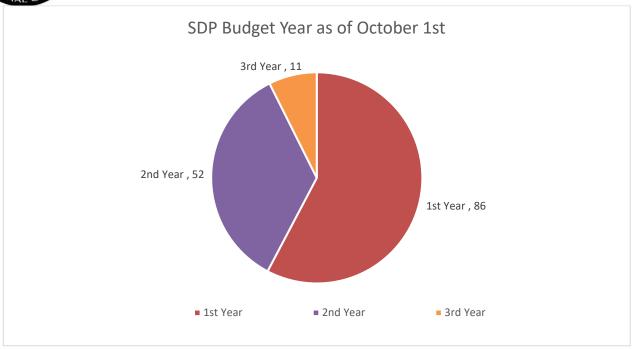


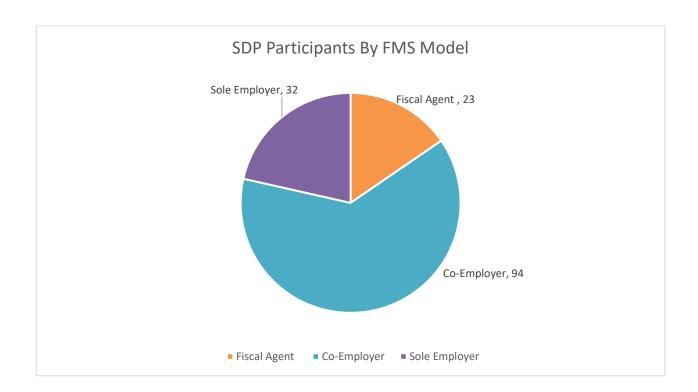
Monthly Budgets Certified





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



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NLACRC Implementation Updates

- Upcoming SDP Trainings led by Disability Voices United:
 10/7 Spending Plan- 4:30-6pm
 10/24 FMS panel- 4:30-6pm
 To register, you may go to Meeting Registration Zoom
- **SDP Resource Fair** will take place in-person on November 19, 2022 at the SFV office. More information to come.
- <u>Pre-enrollment Transition Support:</u> Effective 8/1/2022, participants have two options when it comes to transition supports.
 - Option A- Available only through January 31, 2023. This option is what is currently in place. Under this option, participants can receive a Person Center Plan (PCP) and/or Independent Facilitator (IF) services.
 - ❖ Option B- Will be available as of August 1, 2022 and effective February 1, 2023 this will be the only option. Under option B, the participant receives:
 - 1. PCP (only) service under 024 reimbursement (up to \$1,000)
 - 2. Independent Facilitator (IF) support and or FMS support (40 hours), reimbursed under service code 099, which means the providers must be vendored with NLACRC.
- ** NLACRC is currently recruiting vendors for 099 under an RFV: Self-Directed Supports 099 (nlacrc.org)
 - Effective 7/01/2022 Developmental Services Trailer Bill SB 188 (Chapter 49, Statutes of 2022) amended Welfare and Institutions Code section 4685.8(c)(1), removing the requirement that the cost of financial management services (FMS) be paid by the participant out of the participant's individual budget. Accounting and Case Management are working to ensure that this is implemented as soon as possible. We will be creating a separate authorization for the FMS fee. Participants will need to update their spending plans to allocate the FMS fees available as of July 1, 2022. NLACRC.
 - Department of Developmental Services (DDS) partnered with State Council to develop a statewide orientation. This Orientation is now available: https://scdd.ca.gov/sdp-orientation/
 - Participant Choice Specialists: NLACRC has been allocated funding for 3 positions: all 3 positions have been filles, however we currently have 3 SDP Specialist positions vacant. 1 bilingual position in AV, 2 positions in SFV.
 - Services in the SDP Spending plan must comply with the HCBS Final Rule. Regional Centers along with FMS agencies, must assess and confirm that services comply.

 $\frac{http://www.dds.ca.gov/initiatives/cms-hcbs-regulations}{http://www.dds.ca.gov/initiatives/cms-hcbs-regulations/training-information}$

- Orientation & Information Meetings continue monthly
 - Orientation Meetings:
 - Monday October 3, 2022 & October 10, 2022 (English) from 9AM-12:00PM
 - Monday October 17, 2022 (Spanish) from 9AM-12:00PM
 - Informational Meetings
 - Monday October 3, 2022 (English) at 3:00PM
 - Monday October 17, 2022 (Spanish) at 3:00PM



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- o Participants can now self-register for Orientations and will receive a confirmation upon submission.
- NLACRC has the following allocations to support the implementation of SDP:
 - FY 2019/20: 109,258.00FY 2020/21: 149,328.00
 - o FY 2021/22: 149,331.00 RFP will be posted soon.
 - o FY 2022/23: 127,699.00 (new) RFP will be posted along with FY 2021/22
 - Priorities identified: Recruitment and Training for Independent Facilitators, Joint Training on SDP Principles & Program Logistics, Small Group and Individualized Coaching, SDP Orientation Supports/Workgroups/Resource Fair, and Translation & Interpretation Services.
- Funding Allocations: Disability Voices United, Integrated Community Collaborative, and The Legacy Center have executed contracts for SDP implementation, coaching, andresource fairs.
 - o Partnership meetings held monthly.
- Self Determination Support Group 1st Wednesday of each month
 - o Facilitated by Autism Society of Los Angeles
 - o Next meeting Wednesday November 2, 2022 6:00-7:30PM
- SDP Local Volunteer Advisory Committee- Thursday October 20, 2022 from 6:30PM-8:30PM
 - o The meeting will be held virtually. The Zoom link can be found on NLACRC's calendar.
 - o Everyone is welcomed to attend meetings!
- SDP Local Volunteer Advisory Committee & Disability Voices United Best Practices Subcommittee
 - o The Best Practices Subcommittee is reviewing workflows and processes related to NLACRC's implementation of Self Determination. The committee meets every other week.
- Virtual Orientation is now available at the NLACRC website. Information continues to be sent via SDP News You Can Use monthly.

Resources:

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



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FMS Providers Serving NLACRC Catchment Area:

Available FMS Services	FMS Model	Languages Spoken	Accepting participants?	Employee Burden Cost
Acumen	Bill Payer, Sole Employer	English & Spanish	Has not responded.	14.8%
Aveanna Support Services	Bill Payer and Co- Employer (with nursing through home health agency only)	English, Spanish, Vietnamese, Cantonese, Mandarin and Trieu Chau	Yes, however for November 1, 2022. They have enrollment policies in place. Background checks need to be completed along with spending plan, auth, eBilling and Form 200 by the 15th of previous month.	13.9% + 3.3% sick pay They advise consumers to go with 20% just in case.
Cambrian	Bill Payer, Sole Employer, Co- Employer	English, Spanish, Vietnamese, Tagalog, Farsi	Yes	22%
Casa Fiscal/Essential Pay	Bill Payer, Co- employer	English & Spanish	Yes	To be determined.
GT Independence	Bill Payer, Sole Employer, Co- Employer	All Languages are supported to assist Individuals in the language of their choice	Yes, however spending plan, auth & ebilling must be completed by the 15 th of previous month.	Co-employer 19.5% Sole Employer- Varies depending on workers comp
Mains'l	Bill Payer, Sole Employer, and Co- employer	English Only	No. They have a waitlist and cannot take anyone until 2023.	16.5%

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

North Los Angeles County Regional Center Administrative Affairs Committee Meeting Minutes

August 31, 2022

Present:

David Coe (Chair), Alma Rodriguez, Ana Quiles, Lillian Martinez, Rocio Sigala, Bob Erio, Angelina Martinez – Committee Members

Liliana Windover, Lizeth Chavez, Vini Montague, Ruth Janka, Clarence Foster, Evelyn McOmie, Cristina Preuss, Dr. Michael Fernandez, Tiffani Jones-Newman – Staff Members

Isabel Romero-Interpreter, Nancy Gallardo- Interpreter, Dolly Sharma-Minutes Services, Simone Khanna-Gallagher Insurance, Lety Garcia - Guests

Absent:

I. Call to Order & Introductions

David Coe called the meeting to order at 6:02 pm.

The Committee and NLACRC Staff Members introduced themselves, Guests introduced themselves in the chat.

II. Public Input

No public input

III. Consent Items

A. <u>Approval of Agenda</u> – (Page 2)

Under Committee Business, Leticia Garcia requested moving Item G: Approval of Contracts to be reviewed as Item B. All items following will be adjusted accordingly.

M/S/C (R. Sigala/A. Quiles) To approve the Agenda as revised.

B. <u>Approval of Minutes of the July 27, 2022 Meeting</u> – (Page 4)

M/S/C (A.Quiles/L.Martinez) To approve the July 27th Meeting Minutes as presented.

IV. Committee Business

A. Review Center's Insurance Coverage for FY 2022-23 – Gallagher Insurance (Page 13) Vini introduced Simone Khanna from Gallagher Insurance who will be presenting information related to Insurance Coverage. Insurance policies coincides with July 1st to June 30th. July 1st started a new policy that Simone will review as presented in the

packet.

The majority of NLA's insurance coverage is provided by Non-Profit Insurance Alliance of California (NIAC). NIAC is the most affordable and broadest coverage and specializes in the non-profit sector. NIAC has been used by NLA for many years and each year, Gallagher takes a strategic approach to determine the best insurance policy and NIAC has been a great partner over the years. NIAC covers policies for General/Professional Liability, Automobile Liability, Director's and Officers and Umbrella Liability.

Property Insurance is covered by Great American. Great American offers property insurance that does not require a General Liability policy in order to carry the Property coverage. Pricing has been consistent through the pandemic and through the nature of the non-profit sector.

Earthquake and Flood Coverage is provided by Evanston, provides up to \$5 million per each claim and aggregate. Fiduciary Liability is provided by Hudson, provides up to \$1 million for each claim and aggregate

Cyber Liability is provided by Beazley/Lloyds, this includes up to \$1 million for each categories including Cyber Incident Response, Business Interruption, Digital Data Recovery, Network Extortion, Cyber Privacy and Network Liability, Payment Card Loss, Media Liability and Social Engineering Fraud. Cyber insurance has increased since COVID due to the spike in cybercrimes.

Employed Lawyers Professional Liability is provided by Philadelphia, covers \$1 million per claim and aggregate and Worker's Compensation is provided by Quality Comp. The total cost for all insurance policies is \$977,673.

Simone outlined the 2022-23 Renewal Changes which include:

- Increase in claims for Property resulted in rate increase (impacts Property premium)
- Number of Employees increased 10% from 613 to 677 (impacts Liability, Crime premium)
- Revenues increased by 13% increase from \$572M to \$645M (impacts Cyber, and Liability premiums)
- Experience Modification increased by 8% from 308% to 333% (impacts Workers' Compensation premium)
- Payroll increased by 27% from \$34,386,271 to \$43,762,825 (impacts Workers' Compensation premium)

B. <u>Approval of Contracts</u>— Vini Montague

Vini reviewed the contract as presented in the packet.

Jaravata Northridge Home PL2122-109 (Page 60)
 POS Contract – Provides Supplemental Residential Services Program Support
 5-year contract effective September 1, 2022 through August 31, 2027

Projected total contract amount is \$1,860,736.20 Projected to serve 3 consumers per month.

M/S/C (A. Quiles/L. Garcia) To approve POS Contracts PL2122-109 as presented. It was also decided to review this contract at the August 31st Executive Committee Meeting.

C. <u>Financial Reports</u> – Vini Montague

1. FY2021-2022 Financial Report (Attachment 1)

Vini reviewed the information from this report as presented in the packet.

Expenses through June 2022 - \$13,386

YTD Expenditures- \$663,257,053

Projected Annual Expenditures - \$692,190,619

Projected Annual Surplus-\$39,547,773

The Administrative vs. Direct Allocation Report percentage should be below 15% annually, currently at 14.5%

2. FY2021-2022 Summary of Regional Centers PEP Report (Page 19)

Vini reviewed the information from this report as presented in the packet. Projected Deficit/Surplus - \$41,463,886 NLA ranks #13 among Regional Centers.

Percent of Deficit to Contact- 6.29% NLA ranks #4 in this category.

3. FY2022-2023 Financial Report (Attachment 2)

Preliminary Budget - \$656,642,383

Monthly Expenditures for July - \$45,527,399

YTD Expenditures - \$47,263,697

Currently no projection for surplus/deficit as POS Expenditures Projections will be done in December.

Administrative vs. Direct Allocation Report percentage should be below 15% annually, currently at 16.4%. This will be monitored but is not currently of concern as this FY has just begun.

4. Social Recreation, Camp and Non-Medical Therapies Service Report (Page 21) This report lists the current number of authorizations in the system. There is currently 7 authorizations total. Payments have only been issued for the service month of July thus far. There are around 50 authorizations and payment agreements that are in various phases of processing.

Evelyn McOmie explained that there are currently 33 applications that have not been submitted. Some delays in submission are due to apprehension on the part of the families to provide their Social Security Number. The SSN is obtained for OIG clearance, which is required to check for any previous fraud. After clearance, a payment agreement is signed and the application is sent to accounting for verification. This Service Code became live May 24, 2022. In an ideal situation, reimbursement is issued within 6-8 weeks.

Ana Quiles stated that any time a family has an expenditure from their budget to provide services that NLA is responsible for and has the means to do so, the reimbursement should be expedited in the best interest of the families. She recommended analysis of the process and what other mechanisms can be used to make accessing services in an easier manner. Evelyn stated that solutions to this issue are currently being vetted by DDS. Evelyn will pull data to analyze where delays are happening in each area at any step and report it back to the Committee at the next Committee Meeting along with proposed solutions to overcome the barriers.

Rocio Sigala suggested the creation of an informative visual that explains the process and the importance of compliance with the OIG check. The infographic can also include vendor and service information.

D. Regional Center's Contract with DDS – (Page 22)

There were no significant changes to the contract. The contract as presented in the packet shows edits that were made, including verbiage for guidelines that are required. Anything that is underlined were moved from General Provisions to an attachment. Vini stated that the Gender Identity clause is specific to what the state can and cannot do under the public codes.

- E. 4th Quarter Report on US Bank Transactions (PRMT) (Page 43)
 For the Post-Retirement Medical Trust account, total quarterly fees were \$32,179.28.
- F. 4th Quarter Report on US Bank and Highmark Transactions (UAL) (Page 46) For the CalPERS Unfunded Trust account, total quarterly fees were \$13,178.34.
- G. Review FY 2020-21 Action Log Ruth Janka (Page 47)

This report outlines the actions taken by the Committee in the previous Fiscal Year and Is presented in the packet.

1. Revision of Critical Calendar (Page 58)

For future years, Ruth recommends moving this agenda item to the Annual Orientation in August on the Critical Calendar. Action Item Reviews for this Committee will be conducted at the beginning of the Fiscal Year.

M/S/C (A. Quiles/A. Rodriguez) To approve the updated Critical Calendar.

H. Executed Contracts by NLACRC

Vini reviewed 2 Executed Contracts as presented in the packet.

- 1. No Report: Minimum Wage Increase
- 2. No Report: POS Contract Renewals
- 3. No Report: Addition of new Sub-Code to existing POS Contract
- 4. No Report: Health and Safety Exemptions approved by DDS
- 5. No Report: Addition of CIE and PIP Services to Existing POS Contract
- 6. New POS Service Contracts related to COVID-19 (Page 65)

- 7. Addition of COVID-19 Sub-Code to Existing POS Contracts (Page 66)
- 8. No Report: Service Provider Revision to Existing Program Design
- 9. No Report: April 1, 2022 Rate Increase
- 10. No Report: May 11, 2022 ESBH Consumer Cost Changes

I. <u>Family Resource Center Antelope Valley</u> - Vini Montague (Attachment 3)

Concerns were raised in regards to staffing in Antelope Valley. Vini shared that staff is on-site 2 days per week, working from home 3 days per week. This schedule will rotate between multiple groups to ensure that there will be staff on site at least 4 days per week.

California State University Northridge (CSUN) has an Advisory Committee that meets bi-annually. The next meeting will take place on September 16th and an invitation has been extended to NLA Board Members to attend this meeting. David Coe stated that it could be considered that CSUN report out at future Committee Meetings. Ana Quiles recommended a meeting with CSUN outside of Committee/Board Meetings to allow enough time for discussion. The Committee should also consider a Prep Meeting to outline key questions for the CSUN meeting. Lizeth Chavez will contact CSUN to set up this meeting. David Coe also recommends Board Support assistance in gathering questions from the Board/Committee Members and relaying information to CSUN.

J. <u>Procurement Policy</u> - Vini Montague (Page 67)

Vini reviewed the framework of the policy as presented in the packet. Highlights include: Single or sole source vendors allowable in the following situations:

- 1. Monopolistic environments
- 2. Emergencies
- 3. IT or Specialized Expertise
- 4. Compatibility Reasons
- 5. Maintenance or repair vendors preferred by clients
- 6. Contracts under \$100,000

Vini asked for feedback from the Committee for potential amendments. Ana Quiles proposed that items 1, 4, 5 and 6 be removed from this list for reasons that will allow vendor opportunities to be more easily accessed to the community. Ana also asked that data for previous contract amounts be provided to the Committee and that data related to upcoming vendor expirations to be posted on NLA's website to inform the community that proposals can soon be submitted. Vini will look into the previous contract amounts and report at the next Committee Meeting.

K. Board Contract Policy - Vini Montague (Page 68)

Vini presented the revised policy with the edits recommended by the Committee at a previous meeting. The Committee is being asked to approve the policy for presentation to the Board.

M/S/C (A. Quiles/R. Sigala) To approve the revised Board Contract Policy for presentation to the Board.

L. Intermediate Care Facility (ICF) State Plan Amendment (SPA) Summary

1. ICF/SPA Billing Summary (Attachment 4)

Vini reviewed the report as presented in the packet.

Negative cash impact from ICF/SPA program for FY 2022 is \$650,405.

For FY 2021, the negative cash impact was \$2,214,000.

2. ICF/SPA Receivables (Attachment 5)

This report reflects change in Outstanding Total Receivables from month-to month. From July to August, there have been an increase in total receivables by 16.9%.

M. <u>Human Resources</u> – Clarence Foster

- 1. Ensure personnel policies in compliance with DDS contract Clarence reviewed the 9 policies that have been updated to comply with DDS requirements:
 - a. Maintain personnel records and practices
 - b. Comply with applicable state federal law related to child and family support enforcements
 - c. Zero harassment tolerance policy, mandatory training for all NLA Staff
 - d. Whistleblower policy
 - e. Payment recruit benefits
 - f. Use state funds to promote to assist, promote and deter union organizing
 - g. Employee Retention Requirements
 - h. Mandated reporting, child abuse training
 - i. HIPAA Acknowledgement

2. Monthly Human Resource Report - (Page 71)

Clarence reviewed the report as presented in the packet for June. Categories were modified per requests from the Board. Highlights include:

Overall On Hold Positions - 5

Open Positions Vacant - 78

Positions Filled as of June 30 - 610

FY21-22 Authorized Positions - 692

% Filled - 88.15%

New Hires as of June 30 - 12

Separations as of June 30 - 11

Annual Turnover Rate - 0.18%

San Fernando Open Positions - 56

Antelope Valley Open Positions - 16

Santa Clarita Open Positions - 6

Clarence reviewed the report as presented in the packet for July. Highlights include:

Overall On Hold Positions - 6
Open Positions Vacant - 88
Positions Filled as of July 30 - 608
FY22-23 Authorized Positions - 703
% Filled - 86.49%
New Hires as of July 31 - 12
Separations as of July 31 - 13
Annual Turnover Rate - 0.18%
San Fernando Open Positions - 58
Antelope Valley Open Positions - 22
Santa Clarita Open Positions - 5

Leticia Garcia recommended an amendment to the current qualifications for CSCs. Current requirements are a Bachelor's Degree plus 2 years of work experience. Leticia proposed the removal of the work experience requirement to attract more candidates in an entry-level position. Clarence stated that he will reach out to the ELT Team to further discuss the qualifications for CSCs as well as more part-time positions that can could accommodate a wider variety of candidates. Clarence will also report back data to the Committee in regards to job fairs.

3. 4th Quarter Human Resources Report - (Page 73)

Clarence reviewed the report as presented in the packet. Highlights include:

New Hires-43

Promotions-11

Separations-41

Quarterly Turnover Rate- 0.19%

Clarence stated that HR is reviewing a number of potential barriers to lower turnover rates. Leadership Training will be part of the solution to turnover.

4. Personnel Classification/Salary Schedule Update
Clarence reported that all job descriptions have now been linked to the job
application for better clarification of the position's duties and qualifications.

N. <u>Equity Report Matrix Update</u> – *deferred*

This document is included in the packet for the Committee's Review. Discussion on this item will take place at the next Committee Meeting.

V. Review of Meeting Action Items

- A. Administrative Affairs Committee Action Log (Page 74)
- B. Social Recreation, Camp and Non-Medical Therapies Report: Analyze data related to delays in the Social Rec application process and propose solutions to barriers. (Evelyn McOmie, due by next Committee Meeting)
- C. Family Resource Center Antelope Valley: Schedule Meet and Greet, provide Committee Members with updates/solicit feedback via Board Support (Lizeth 156)

- Chavez, by next Committee Meeting)
- D. Procurement Policy: Determine previous contact amounts to present to Committee (Vini Montague, by next Committee Meeting)
- E. Human Resource Updates: Discuss CSC Qualifications and Part-Time Positions with ELT Team (Clarence Foster, by next Committee Meeting)

VI. Board Meeting Agenda Items

The following items were identified for the committee's section of the August 10th Board Meeting agenda:

- A. Minutes of the August 31st Meeting
- B. FY2021-22 Financial Report
- C. Approval of Contracts moved to Executive Committee
- D. Monthly Human Resources Report
- E. Board Contract Policy

VII. Announcements / Information Items / Public Input

- A. Next Meeting: Wednesday, September 28th, 2022 at 6:00 pm
- B. <u>Committee Attendance</u> (Page 77)

No public input

VIII. Adjournment

David Coe, Committee Chair, adjourned the meeting at 8:00 p.m.

Submitted by:

(*) Lizeth Chavez

Executive Administrative Assistant

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

	Aug-22 HUMAN RESOURCES REPORT							
	Open Positions on Hold	Open Positions Vacant	Positions Filled as of August 31	FY22/23 Authorized Positions	% Filled	New Hires as of August 31	Separations as of August 31	Annualized Turnover Rate
All Locations	16	88	600	703	85.35%	13	12	0.16%

FY22/23 Authorized Positions	Positions Added Based on FY 22/23 Growth	
703	7	

		Open Positions on Hold	Open Positions Vacant	Positions Filled as of August 31	FY22/23 Authorized Positions	% Filled	New Hires as of August 31	Separations as of August 31
	SFV	8	63	442	510	86.67%	8	5
l	AV	8	21	103	136	75.74%	1	5
Ì	scv	0	5	53	57	92.98%	3	2

Open SC Positions:			52
	Consider Consulinations	Department/	Onen ee ef !

Open SC Positions:		52
Service Coordinators	Department/ Location	Open as of Date
CSC-BIL-SPECIALIZED SPECL	AD - SFV	Nov-20
CSC - SDP SPECL	SD - SFV	Feb-22
CSC - BIL	SA - SFV	Mar-22
CSC - SPECIALIZED SPECL	AD - SFV	Apr-22
csc	AD - SFV	May-22
csc	AD - SFV	May-22
csc	AD - SFV	May-22
CSC - BIL	AD - SFV	May-22
CSC - BIL	TRANS - SFV	May-22
CSC - BIL	TRANS - SFV	May-22
csc	SA - SFV	May-22
csc	ES - SFV	May-22
csc	AD - SFV	Jun-22
CSC - BIL	AD - SFV	Jun-22
CSC - BIL	AD - SFV	Jun-22
csc	INTAKE - CS	Jun-22
CSC - BIL	AD - SFV	Jul-22
CSC - BIL	SA - PROV - SFV	Jul-22
csc	SA - SFV	Jul-22
CSC - BIL	ES - SFV	Jul-22
CSC - BIL	AD - SFV	Aug-22
CSC - BIL	AD - SFV	Aug-22
csc	AD - SFV	Aug-22
csc	AD - SFV	Aug-22
csc	TRANS - SFV	Aug-22
csc	TRANS - SFV	Aug-22
csc	SA - SFV	Aug-22
csc	SA - SFV	Aug-22
csc	ES - SFV	Aug-22
csc	ES - SFV	Aug-22
CSC - SDP SPECL	CON SERV - SD	Aug-22

CSC - BIL	SA - AV	Feb-22
csc	AD - AV	May-22
csc	AD - AV	May-22
CSC - BIL	SA - AV	May-22
CSC - OD - BIL	CASE MGT - AV	May-22
CSC - BIL	ES - AV	Jun-22
csc	AD- AV	Jul-22
csc	AD - AV	Jul-22
csc	SA - AV	Jul-22
csc	ES - AV	Jul-22
CSC - OD - BIL	CASE MGT - AV	Jul-22
csc	AD - AV	Aug-22
CSC - BIL	SA - AV	Aug-22
CSC - BIL	SA - AV	Aug-22
csc	TRANSITION - AV	Aug-22
csc	ES - AV	Aug-22

csc	TRANS - SCV	May-22
CSC	AD - SCV	Aug-22
csc	ES - SCV	Aug-22
csc	ES - SCV	Aug-22
csc	ES - SCV	Aug-22

CSC Vacancies by Location						
SFV	28					
AV	17					
scv	5					
Non-CSC Vacancies by I	Non-CSC Vacancies by Location					
SFV	35					
AV	4					
scv	0					

Open Other Positions:

All Other Positions	Department/ Location	Open as of Date
Executive Administrative Assistant - ED*	Executive Admin - SFV	Apr-21
Consumer Svcs Specialist-HCBS	Community Svcs - SFV	May-21
Community Living Specialist	AD - SFV	Oct-21
Psychologist	Clinical - SFV	Oct-21
Accounting Specialist	Accounting - SFV	Nov-21
Deaf Services Specialist	Community Svcs - SFV	Nov-21
Intake Associate	Intake - SFV	Dec-21
Executive Administrative Assistant - Finance*	Finance Admin - SFV	Jan-22
IT Specialist I*	IT - SFV	Mar-22
Office Assistant I	Office Services - SFV	Mar-22
CPP Community Srvcs Specialist	Community Svcs - SFV	Apr-22
Consumer Services Manager	AD - SFV	Apr-22
Consumer Services Manager	SA - SFV	Apr-22
School Transition Liason	ES - SFV	May-22
Employment Services Specialist	Community Svcs - SFV	May-22
Accounting Specialist*	Accounting - SFV	May-22
Accounting Specialist	Accounting - SFV	May-22
IT Director	IT - SFV	Jun-22
Consumer Services Transition Liason	Consumer Services - ES - SFV	Jun-22
Community Services Director	Community Services I - SFV	Jun-22
Administrative Assistant (Reclassified)	Accounting - SFV	Jul-22
Executive Administrative Assistant - HR*	Human Resources - SFV	Jul-22
Nurse Consultant	Clinical - SFV	Jul-22
IDEA Specialist	SA - SFV	Jul-22
Health and Safety Specialist	Community Services - SFV	Jul-22
Health and Safety Specialist	Community Services - SFV	Jul-22
Operations Accounting Supervisor	Accounting - SFV	Aug-22
Outreach Language Specialist - Armenian	DEIB	Aug-22
Outreach Language Specialist - Farsi	DEIB	Aug-22
Outreach Language Specialist - Tag	DEIB	Aug-22

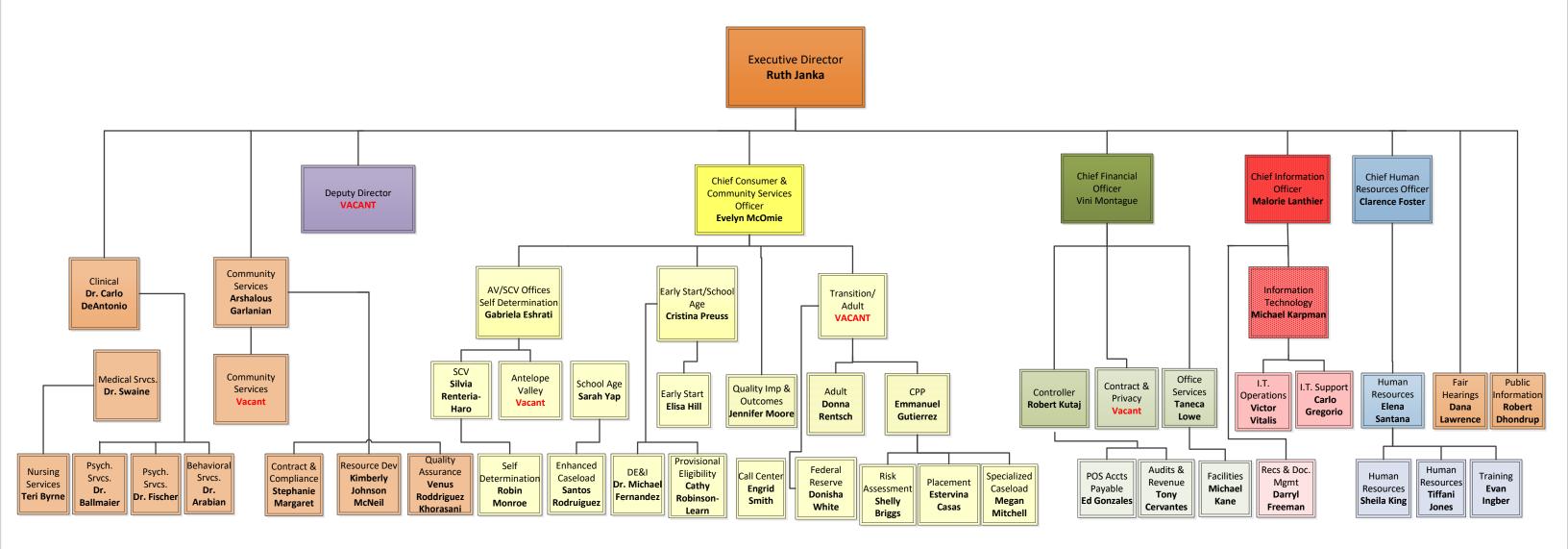
IT Specialist II	IT - AV	Dec-21
Office Assistant II	Intake - AV	Feb-22
Office Assistant II	Office Services - AV	Jun-22
Consumer Services Supervisor - OD/FL	Case Management -AV	Jul-22
Office Services Assistant	Office Services - AV	Aug-22
Consumer Services Supervisor	Adult - AV	Aug-22

Position	Separation Reason	Term Month
CSC	Other	Aug-22
CSC - Self Determination	Other	Aug-22
CSC - BIL	Other	Aug-22
CSC	Personal	Aug-22
csc	Other	Aug-22
CSC	Other	Aug-22
CSC	Personal	Aug-22
csc	Other	Aug-22
Office Services Assistant	Other	Aug-22
CSC	Personal	Aug-22
CSC	Other	Aug-22
CSC - BIL	Other	Aug-22

Hold Positions	Dept/ Location	of Date
Office Assistant II - BIL	Recs & Doc Mgmt - SFV	Nov-21
csc	AD - SFV	Apr-22
Office Assistant I	Office Srvcs - SFV	Apr-22
Technical Support Engineer	IT - SFV	Jul-22
Director of Finance	Finance - SFV	Aug-22
IT Training Specialist	IT - SFV	Aug-22
IT Asset Management	IT - SFV	Aug-22
CSC - Intake	Early Start - AV	Aug-22
CSC - Intake	Early Start - AV	Aug-22
CSC - Intake	Early Start - AV	Aug-22
CSC - Intake	Early Start - AV	Aug-22
CSC - Lead	School Age - AV	Aug-22
CSC - Lead	Transition - AV	Aug-22
CSC - Lead	Transition - AV	Aug-22
CSC - Lead	Transition - AV	Aug-22
Floater Specialist	Early Start - SFV	Aug-22

Release of Positions From Hold:	3
Month FY 22/23	Positions Released From Hold
July	0
August	3
September	0
October	0
November	0
December	0
January	0
February	0
March	1 0

North Los Angeles County Regional Center **Organizational Overview**





Executive Director's Report August 18, 2022

I. Funding and Sustainability

- a. Pursue rate reform for developmental services.
 - i. Discussed with key provider organizations the next steps in pursuing rate model clean-up with DDS.
 - Worked with DDS and the ARCA Community Services
 Directors on recommendations regarding rate-setting for Early
 Start providers and Social Recreation providers.
- b. Advocate for an equitable and sustainable regional center operations funding methodology.
 - To limit regional centers' need to borrow in July each year, met with DDS to explore how General Fund repayments impact DDS cash flow.
 - ii. Negotiated with DDS the allocation of the funds available for the reduction of caseload ratios to ensure it is more heavily weighted towards total population.
 - iii. Highlighted for DDS the need to allocate the funds to allow regional centers to hire case management staff to meet the 1:40 caseload ratios for young children.
 - iv. Provided an analysis to the Assembly Appropriations Committee highlighting the costs of implementing certain elements of SB 1092 (Hurtado).
 - v. Discussed with a local reporter the need to update the Core Staffing Formula.

II. <u>Inclusive Communities</u>

- a. Encourage and empower community members to participate in the legislative process.
 - i. Discussed with the California Policy Center for Intellectual and Developmental Disabilities regarding better organizing the efforts of various family groups throughout the state.
 - ii. Worked with members of the ARCA-Client Advisory
 Committee on a project related to legislative advocacy for

increased affordable housing opportunities for people with developmental disabilities.

b. Increase integrated employment opportunities.

- i. Worked with DDS and a small group of service providers to draft potential survey questions related to job satisfaction for those served by regional centers.
- ii. Worked with DDS and a small group of service providers to discuss incentives for provider staff to receive training to enhance employment outcomes.

c. Increase affordable integrated housing options.

 Met with the Lanterman Housing Alliance regarding better collection of housing needs information and the roles DDS and regional centers could play in this.

d. Enhance regional centers' responses to the needs of individuals and families from culturally and ethnically diverse communities.

 Successfully advocated for later implementation timelines for AB 1957 (Wilson) to allow for the more accurate development of data regarding expenditures for restored services.

III. Flexible and Sustainable Service Models

- a. Increase regional centers' capacity to meet the individual needs of people with developmental disabilities through strategic resource development.
 - i. Discussed with DDS the impact that non-competitive clinical rates have on intake and service timelines.
 - ii. Discussed with DDS funding structures for social recreation services that may overcome community providers' hesitation to accept regional center funding for these services.
 - iii. Consulted with DDS regarding the structure and allocation of funds for the Enhanced Community Integration Grants.

b. Increase community understanding of the value of person-centered thinking and planning.

- i. Consulted with the sponsors of AB 1663 (Maienschein) as well as Assembly Judiciary Committee staff about how to strengthen legal protections for Supported Decision-Making.
- Collected information from regional centers to inform DDS's goalsetting related to Certified Person-Centered Thinking Trainers.

- c. Implementation of the Self-Determination Program (SDP).
 - i. Consulted with DDS staff regarding the evolution of pretransition services for those individuals seeking to enter the Self-Determination Program.



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Minutes ARCA Board of Directors June 17th, 2022 Embassy Suites, Sacramento and via Zoom livestream

Board of Directors Members Present:

Lori Banales, Rita Walker, ACRC Ed Araim, Randy Tellalian, CVRC Gloria Wong, ELARC Melissa Gruhler, Dan Strauss, FNRC Eric Zigman, GGRC Patrick Ruppe, HRC Joshua Souder, IRC Michi Gates, Tracey Mensch, KRC Melinda Sullivan, Larry DeBoer, LRC Gabriel Rogin, Rosemarie Perez, NBRC Ruth Janka, Angelina Martinez, NLACRC Kim Smalley, RCRC Larry Landauer, RCOC Lisa Kleinbub, Kathy Hebert, RCEB Javier Zaldivar, SARC Mark Klaus, Terri Colachis, SDRC Anthony Hill, SG/PRC Dexter Henderson, Jesus Murillo, SCLARC Omar Noorzad, Mark Wolfe, TCRC Tony Anderson, Margaret Heinz, VMRC Jane Borochoff, Zoey Giesberg, WRC

Board of Directors Members Absent:

Audrey deChadenedes, GGRC
Joe Czarske, HRC
Lavinia Johnson, IRC
Tamera Leighton, RCRC
Liza Krassner, RCOC
Sheila James, SG/PRC
Mary Le, SARC

ARCA Advisory Representatives

Michelle Rewerts, ACRC, Chair, ARCA Client Advisory Committee Pamela Crabaugh, TCRC, Co-Chair, Directors of Client Services Aaron Olson, Co-Chair, Community Services Directors

Guests Present:

Nancy Bargmann, Brian Winfield, Jim Knight, DDS
Alex Madrid, GGRC
Mike Sawyer, RCRC
Sandy Martin, RCOC
Glendora Pitre, SARC
Mary Beth Lepkowsky, Helen Sanderson Associates
Ami Sullivan, Kinetic Flow
Jill England, Creative Legal Solutions
Anh Nguyen
Robyn Souder

ARCA Staff Present:

Amy Westling, Darline Dupree, Sidney Jackson, Daniel Savino, Vivian Umenei, Sally Williams, Rick Rollens

Call to Order

The meeting was called to order at 9:00 AM by President Rita Walker.

Introductions

Introductions were made around the room.

Approval of Agenda

The Board of Directors agenda was presented.

M/S/C: To approve the agenda.

Approval of Minutes

The minutes of the March 17, 2022 Board of Directors meeting were presented for approval.

2

M/S/C: To approve the minutes.

Public Comment

None.

President's Report

Rita Walker advised the group that the Executive Director performance review will be done in July, in the usual fashion. Sally Williams will be facilitating the work.

Separately, she reported on the key elements of ARCA's work during the past year, including sponsoring a resolution honoring the community inclusion of people with developmental disabilities, crafting a formal position on conservatorships, and advancing Budget requests to both end family fees and reform the Core Staffing Formula.

Rita Walker closed by thanking the Board members for their service, and the opportunity to lead the Association for the past year.

DDS Report

Nancy Bargmann began by expressing her appreciation of the work of Rita Walker.

In recent months, the Department has been soliciting public comment and stakeholder feedback related to the quality incentive program, with particular interest in developing a deeper understanding of frontline staff issues.

The Department continues its focus on transitioning children in Early Start to education-based services as they age out of Early Start. Collaboration with both the Department of Education and regional centers remains central to this work. The Administration's proposal related to IDEA specialists will support for this work locally.

Outreach to tribal communities related to Early Start is ongoing, with several regional centers in lead roles. It was noted that tribal communities, when compared to the general population, remain underrepresented in Early Start enrollment.

Several CCH and EBSH homes are being developed to serve children from around the state.

Aging-related needs are a new priority for the Department, which will be hiring an aging specialist. Dementia and Alzheimer's risks will be among the areas of work and cross-system collaboration.

Lisa Gonzalez will be the new Deaf Specialist at DDS. Much of her work will be in collaboration with the specialists at the regional centers.

A Self-Determination Advisory Group will soon be re-formed at DDS. Tony Anderson (VMRC) and Rick Wood (KRC) will cochair the Group.

Brian Winfield reported there are close to 1,500 enrollees in the Self-Determination Program. DDS is also working with SCDD on training modules, which will be made available statewide.

Discussions are ongoing with the Centers for Medicare and Medicaid Services (CMS) about California's Statewide Transition Plan for the Home and Community-Based Services Final Rule compliance.

As of May, 2,585 children have been found provisionally eligible for Lanterman Act services.

The Department continues to develop guidelines, based on workgroup input, on its employment grants.

Lastly, Brian Winfield reported that there is now only a single individual placed out-of-state through regional center funds. This reflects the work of regional centers to develop services to meet all needs in-state.

Jim Knight reported on progress in implementing the rate study. Notably, when the multiyear implementation is complete, service providers doing the same work in the same regional center area will have the same rates.

Separately, planning for the replacement of the Uniform Fiscal System and regional center case management software is progressing. Collection of outcome data is one of the features that will be included.

In response to a question from Eric Zigman, Nancy Bargmann confirmed that DDS is strongly interested in ensuring dementia supports are a part of the development of new aging-related programs and services. She also encouraged centers to consider unique strategies to pilot in their catchment areas.

Treasurer's Report - Gloria Wong

With a return to in-person meetings, a minor adjustment to the June budget will be required. Beyond that, the Association's financials remain in good order.

M/S/C: To accept the financial statements for May 2022

ARCA Executive Director's Report - Amy Westling

Introduction

Amy Westling began by thanking Rita Walker for her service, not only in leading the Association, but also for her years of diverse work in the service system.

She also reflected on the evolution of the service system over the past decade, including the major growth of the population and the end of long-term institutional care. The Legislature has approved a Budget, but negotiations with the Governor remain ongoing. Advocacy work will remain critical.

ARCA FY2021-22 Annual Report

The annual report was presented. Major highlights include public webinars and Budget advocacy.

4

M/S/C To approve the FY2021-22 Annual Report

2023 Proposed ARCA Meeting Schedule

The 2023 calendar year meeting schedule was reviewed. It is noted that this schedule is done with consideration of avoiding overlap with the Juneteenth holiday.

M/S/C To approve the 2023 meeting schedule

ARCA Personnel Policy Updates

The ARCA personnel policy is being revised to reflect a new threshold for *pro rata* benefits and to reflect the practice of offering compensation in lieu of group health insurance coverage for those with other coverage. A non-substantive typo will be resolved.

M/S/C To approve the policy, as to be edited

ARCA Bylaws and Board Policies

The Bylaws have been reviewed by legal counsel. Given the extent of the proposed changes, it is more efficient to repeal the existing Bylaws and replace them. New draft bylaws have been reviewed by the Nominating & Bylaws Committee, as well as the Executive Committee, and refined based on their feedback. The proposed changes reflect, as fully as possible, the way the ARCA Board currently works. The most significant functional changes move from each regional center having a vote to each individual having a single vote. Where two individuals from the same regional center are on the Executive Committee, only one would be allowed to cast a vote. The voting member would be predetermined by the regional center that has more than two members on the Executive Committee with allowance for the other to vote in that individual's absence. Several changes in form, but not function, are also proposed, and will have the effect of moving the processes for nominating officers, as well as dues payments, out of the Bylaws and into standalone policies.

M/S/C To repeal the current Bylaws, and replace them with the new Bylaws as presented M/S/C To approve the new policy related to dues M/S/C To approve the new policy related to nomination of officers

FY2022-23 Budget Update

The current Budget proposal approved by the Legislature includes a range of proposals from stakeholders, as well as new initiatives from the May Revision. To the extent they are retained in the final Budget, there will be staffing and resource needs to ensure effective implementation. Supporting service providers through accelerating the rate increase, supporting families by ending fees, and supporting service coordination by reforming the Core Staffing Formula, remain a high priority for the Association. A final Budget will be approved by July 1st, though subsequent revisions (as well as Trailer Bill Language) should be expected through July and August. Advocacy work in the coming weeks will focus on the Governor's office.

ARCA Comments on CCH and EBSH Proposed Regulations

Darline Dupree, in consultation with key regional center staff, has drafted comments on proposed regulations governing Community Crisis Homes and Enhanced Behavioral Supports Homes. Specific recommendations related to training hours, transition planning, and individual behavioral supports planning have all been suggested and detailed in the draft comments.

5

M/S/C To approve the comments

FY2022-23 Draft Strategic Priorities

Revisions to the strategic priorities, based on the ARCA Strategic Plan and meant to guide the work of the Association in the plan's final and bonus year, were reviewed. These changes address recent developments in policy and political priorities, as well as past experience.

M/S/C To approve the FY2022-23 draft Strategic Priorities

Legislative Report – *Eric Zigman*

Budget & Legislative Update

Eric Zigman noted the long-term evolution of the service system, as well as the role of ARCA in advocacy and policy development. He also expressed his appreciation of the impending implementation of both the rate study and progress on Core Staffing Formula rate reform. Rick Rollens noted the significant legislative support for ARCA's Core Staffing Formula rate reform, including by key legislative co-sponsors.

Rick Rollens added that the Legislature continues policy committee work through the end of this month. After a one-month summer recess, it will turn to fiscal committees and floor session.

Federal Update

Campaign season is underway. Current estimates make it more likely than not that Republicans will regain a majority in the House of Representatives, leaving little time in the current year for Democrats to advance their own policy goals. Separately, the odds of a new COVID funding package have become vanishingly small.

Bills – Action Items (change in position)

Three bills that ARCA has been tracking have been amended enough to warrant reconsideration by the Association. AB 2242 (Santiago) would create processes around discharge planning during 5150 holds and other situations, and is recommended for support. SB 1446 (Stern) creates a right to mental health treatment, and is recommended for support in concept. AB 2317 (Ramos) creates children's psychiatric residential treatment facilities; as the potential need to liaise with regional center staff is not explicitly included, it is recommended for support if amended.

M/S/C To take the recommended positions on these three bills

Bills - Informational

The Senate and Assembly Appropriations Committees recently held their suspense hearings; the results were briefly overviewed. Separately, updates were provided on five significant bills that remain active in the legislative process.

Eric Zigman remarked on the importance of continually developing and maintaining relationships with legislators, both new and returning. He also expressed his disappointment that another ARCA-sponsored bill died in the Assembly due to cost concerns; it would have created a tax credit to incentivize the hiring of people with (any) disabilities.

In closing, Amy Westling reported that Sonja Petek, of the Legislative Analyst's Office, will be moving to a different policy portfolio after this Budget season concludes. Ryan Anderson will replace her.

Committee/Task Force Reports

Executive Committee – Rita Walker

All matters discussed at yesterday's meeting were covered in this Board meeting.

Board Delegates Group - Mark Wolfe

The Delegates, during the past fiscal year, spent significant time discussing local concerns. At their most recent meeting, Tracey Mensch (KRC) was elected as Chair for the next year.

Directors Group – *Javier Zaldivar*

The Directors Group continues discussions of many matters, with recent areas of focus including the Self-Determination Program, outreach to diverse communities (including deaf and tribal communities), workforce stabilization, and the roll-out of social recreation and camp services.

Finance Committee - Lisa Kleinbub

The Committee met yesterday, and was joined by several DDS representatives. Updates were provided on cash flow, the UFS system replacement, and the client records management system change. The Committee also spent time speaking with Steven Pavlov, the new DDS accountant, about structural issues underpinning cash flow challenges.

Client Advisory Committee – *Michelle Rewerts*

The ARCA CAC met on Wednesday May 25th. During the meeting, the group discussed the possibility of working with the Lanterman Housing Alliance and regional centers to get more affordable housing for people served. They also talked about the Chair Selection Process because we have to vote on the Chair during the June meeting. The next ARCA CAC meeting is scheduled for 6/24/22.

Strategic Planning Committee – Melinda Sullivan & Omar Noorzad

The Committee is actively planning the upcoming October strategic planning board retreat. Executive Directors will be receiving a survey soon to provide feedback based on their boards' input and priorities. The survey is expected to remain open for five to six weeks.

Nominating & Bylaws Committee - Ruth Janka

A slate of officers is proposed for the 2022-23 fiscal year. It was previously submitted to the Board in March, in the usual fashion.

7

M/S/C To approve the slate

Contract Negotiating Committee – Larry Landauer

The Committee will be meeting on Tuesday to discuss contract language.

Old Business

None.

New Business

None.

Information Sharing

Michelle Rewerts thanked the Board for the gift in appreciation of her service on the CAC. Zoey Giesberg expressed her deep gratitude for the opportunity to represent Westside Regional Center, and the support of the ARCA Board during her tenure.

Angelina Martinez encouraged the Board to continue to connect with local legislators.

Adjournment/Next Meeting

The meeting was adjourned at 11:50 AM. The next meeting will be held on August 19, 2022, at 9:00 a.m. in Irvine.

North Los Angeles County Regional Center Consumer Services Committee Meeting Minutes

DRAFT

August 17, 2022

Present:

Andrew Ramirez, George Alvarado, Jordan Feinstock, Nicholas Abrahms, Rocio Sigala, Sharmila Brunjes, Cathy Blin, Gabriela Herrera, Erica Beall – Committee Members

Robert Dhondrup, Liz Chavez, Dr. Jesse Weller, Evelyn McOmie, Jazmin Zinnerman, Vini Montague, Gabriela Eshrati, Lilliana Windover, Evan Ingber, Jennifer Williamson, Cristina Preuss, Clarence Foster, Dana Lawrence – Staff Members

Ana Quiles, Kimberly Bermudez- 24 Hour Home Care, Leticia Garcia, Lillian Martinez, Anthony - Coach for George Alvarado, Isabel Romero- Interpreter, Nancy Gallardo- Interpreter, Dolly Sharma- Minutes Services - Guests

Absent:

Brian Gatus

I. Call to Order & Introductions

Andrew Ramirez called the meeting to order at 6:01 pm

Liz Chavez took attendance; a quorum was met.

II. Public Input

Erica Beall noted that Senate Bill 1016, a potential change for special education that will allow eligibility under Other Health Impairment for Fetal Alcohol Spectrum Disorder. The bill made it through appropriations and Erica encouraged anyone to is interested in supporting this bill to contact their assemblyperson.

III. Consent Items

A. Approval of Agenda

M/S/C (R. Sigala/ G. Herrera) To approve the agenda as presented.

B. Approval of Minutes of May 18th Meeting

M/S/C (N. Abrahms / R. Sigala) To approve the July 20th Meeting Minutes as presented.

IV. Committee Business

A. <u>Meeting Restructure and Format Discussion</u> – Dr. Jesse Weller

There was previous discussion related to the length of this meeting as it has created some issues with the meeting that follows this Committee Meeting. Proposals for this restructure would include a 1.5-hour timeframe, reviewing reports that are directly related to priorities required by the State. Reports will be presented in an Executive Summary format which is comprised of the reason for report, a highlight of the findings and the status of any action items or recommendations based on the report.

There are also proposals to revise the agenda template which includes; categorization by Committee Business/Actions and Project/Status items with time ranges on discussion, the name of the individual presenting the item and a re-cap of the action items that occurred at the end of each meeting. For this Committee, Dr. Weller, Evelyn McOmie, and Andrew Ramirez will meet on a monthly basis to finalize agenda review items in preparation of the meeting. If approved by the Committee, these changes will take effect at the next Committee Meeting.

M/S/C (G. Herrera/R. Sigala) To approve the revisions to the Committee Meeting structure and agenda as presented.

B. Review Committee Action Log from Previous Fiscal Year – Dr. Jesse Weller The action log highlights all of the actions passed by the Committee during the previous fiscal year and is reviewed each August. Dr. Weller reviewed the items as presented in the packet and a recommendation was made to include this item in the Annual Committee Orientation. In order to do this, there will also be a revision to the Committee Critical Calendar needed.

M/S/C (G. Herrera/C. Blin) To approve the Committee Action Log for FY 2021-22 and to revise the Critical Calendar to consolidate the review of the Committee Action Log with the Annual Committee Orientation.

- C. <u>Finalize Committee Priority Issues for Current Fiscal Year</u> Dr. Jesse Weller Dr. Weller reviewed the priorities as presented in the packet. There was a discussion in regards to revisions that were presented to the Committee for approval.
 - 1. Evaluate progress and implement best practices related to the ongoing success of the SDP with a focus on increasing enrollment and ongoing support and accountability once enrolled.
 - 2. Increase service access and equity for underserved communities; propose and employ strategies to address differences by ethnicity, age, location, living situation and services.
 - 3. Prioritize efforts related to increasing competitive employment opportunities for individuals served, with a focus on increasing employment options by increasing the employer pool; collaborating with Service Providers to have effective measures related to employment goals.
 - 4. Track service delivery progress and support service providers for compliance with the Home and Community-Based Services (HCBS)

- waiver, statutory and regulatory requirements.
- 5. Ongoing recruitment and training of Service Coordinators with a focus on retention by reducing caseload ratios for effective service coordination; continued advocacy to update the core staffing formula.

M/S/C (R. Sigala/G. Herrera) To approve the Priorities for FY 2022-23 as revised.

D. <u>Self-Determination Program Report</u> - Dr. Jesse Weller

As of August 1st, there are 132 individuals who have transitioned into the program with approved spending plans and active SDP IPPs. Orientation and Informational meetings will continue monthly, it was noted that Orientation can now be completed online at the convenience of the participant.

Dr. Weller noted that there is a current issue with some FMS providers are being waitlisted and asking families for certain documents to help support the Onboarding Process. Currently, the SDP team is reaching out to each Provider and are doing active outreach to providers and families to see what support is needed while providers work through these challenges. Silvia Haro will be presenting an update at the SDP Local Advisory Committee Meeting.

E. <u>Self-Determination Local Volunteer Advisory Committee Meet & Greet Status Update</u> – Dr. Jesse Weller

An invitation was extended to the SDP Local Vendor Advisory Committee to attend a future Consumer Services Committee Meeting to be introduced to the Committee to be able to meet and greet as there are a lot of related items in both Committees. It was suggested that an informal meeting be held outside of the Committee Meeting so as to be able to have discussion without formal time constraints. Dr. Weller will come up with potential dates for this meeting.

F. Monthly Consumer Competitive Employment Report – Vini Montague (*Page 26*) This report reflects the number of consumers who are competitively employed and the information is broken down by Residency Type/Age Group and Ethnicity/Age Group. There was a total of 2,119 consumers who were employed in June 2022 and 2,149 employed in July 2022.

The report also contains a section that shows consumers who are not employed, broken down in the same categories. There was a total of 13,592 consumers without employment in June 2022 and 13,698 consumers without employment in July 2022.

The report contains an additional section that shows a comparison from the current month to the previous month of consumers with and without employment, categorized by Ethnicity and Residence Type.

G. <u>Purchase of Service Data Status Update</u> – Dr. Weller

Based on feedback from a previous meeting, data around ethnicity by expenditures are currently being developed with the help of Ruth Janka and the IT department at NLA, updates on this data will be reported as it becomes available.

H. <u>4731 Complaint Data</u> – Dana Lawrence (*Page 30*)

Dana introduced herself as the Fair Hearings and Administrative Procedure Manager for NLA and she reviewed the response to the State audit finding that NLA averaged 52 days for responses to 4731 Complaints.

DDS has not overturned any NLA findings upon review. The findings included a violation of 20-day timeline to respond to 4731 Complaints, IPP pages not signed prior to implementation of services, violation of preferred language availability during fair hearing process and Special Incident Reports were not being submitted within 2 days of information regarding suspected abuse. NLA has been compliant with all required Corrective Action Plans in regards to the findings. So far for 2022, there have been 32 complaints, 75 allegations with a 20-day response average which is in compliance with the required timeline. Dana noted that the average number of pages per response has decreased and will continue to do so as the notes are being streamlined and attachments are being utilized.

Leticia Garcia suggested more transparency and neutrality in regards to the way that the complaints are being reviewed. Per the State Auditor's Report, out of 72 complaints, 60% were findings of "No Violation" and 15% were findings of "Out of Scope". As NLA self-monitoring, it is vital to be as neutral as possible when it comes to investigation determinations.

- I. Workforce Employment Specialist Status Update Dr. Jesse Weller
 This position has been filled and the candidate started work on August 15th and will be introduced to the Committee at the September Committee Meeting.
- J. <u>COVID-19 Family Support Services Status Update</u> Dr. Jesse Weller NLA continues to track any individual that has Family Support Services in place due to COVID -19 and authorizations have been extended for those who are needing program planning.
- K. <u>Enhanced Service Coordination Unit Website Status Update</u> Dr. Jesse Weller This was an action item from previous Committee Meetings and has been completed. The website has been updated and is now live with current staff members and a flyer included.
- L. <u>Notice of Action (NOA) Update</u> Dr. Jesse Weller

 Each time an NOA goes out regarding eligibility, a list of community-based organizations will be included as an outreach effort to reduce barriers. Dr. Weller will have an implementation update to give at the next Committee Meeting.
- M. <u>Welcome and Access Onboarding Policy Discussion</u> Dr. Jesse Weller The Committee has been tasked to create a Welcome and Access Onboarding policy for new families to encompass the intake process. This policy will be a roadmap to the onboarding process and includes the following components:
 - 1. Application
 - 2. Intake Interview
 - 3. Acceptance/NOA Letters

- 4. Onboarding
- 5. Milestone Education
- 6. Quality Check

Next steps include approving the concept and recommending the creation of an Adhoc Committee to the Board to work on the creation of this policy.

M/S/C (R. Sigala/S. Brunjes) To approve the Welcome and Access Onboarding Policy concept.

M/S/C (R. Sigala/G. Herrera) To recommend the Board create an Ad-Hoc Committee for work on the Welcome and Access Onboarding Policy.

V. Deputy Director Report – Dr. Jesse Weller

Required trainings will facilitate continuous learning and training opportunities for current staff, new staff, board members and service providers. At least one required training will be focused on inclusion, equity and diversity and will be provided quarterly for all NLA staff and offered to service providers that interface with consumers, including members of the vendor advisory committee. Topics identified for future training opportunities will be diverse and intended to meet pressing current needs as determined through the NLA Strategic Plan.

DDS Bulletin - Presentations include Excessive Heat and How to Stay Healthy in the Heat and Preventing Dehydration.

988 Hotline - Dialing 988 will link to the National Suicide Hotline and is designed to help those with a mental-health crisis.

Town Hall - August Town Hall: Individual Rights Under Lanterman Act will take place on Thursday, August 18th at 1:30 pm.

Monthly Groups -

- Alianza de Hombres (Men's Group) Tuesday, August 9, 2022 from 7:00 pm to 8:30 pm
- Cafecito Entre Nos (Coffee Amongst Us) Thursday August 11, 2022 from 11:00 am to 12:30 pm.
- Family Focus Resource Center Support Group Sunday, October 16th from 11am- 3:00pm

VI. Board Meeting Agenda Items

The following items were identified for the Committee's section of the next Board Meeting agenda:

- A. Minutes of the August 17th Meeting
- B. Consumer Services Committee Priority Issues for Current Fiscal Year
- C. Welcome and Access Onboarding Policy Ad-Hoc Committee Recommendation

D. Critical Calendar Revision

VII. Announcements / Information Items / Public Input

A. Next Meeting: Wednesday, September 21, 2022 at 6:00 p.m.

No Public Input

VIII. Adjournment

M/S/C (N. Abrahms/C. Blin) To adjourn the meeting.

Andrew Ramirez adjourned the meeting at 7:40 p.m.

Submitted by:

(*) Lizeth Chavez

Executive Administrative Assistant

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

North Los Angeles County Regional Center **Executive Committee Meeting Minutes**

August 31, 2022

Present:

Ana Quiles (Chair), Alma Rodriguez, David Coe, Leticia Garcia, Lillian Martinez, Rocio Sigala, Angelina Martinez

Liliana Windover, Lizeth Chavez, Vini Montague, Ruth Janka, Clarence Foster, Evelyn McOmie, Cristina Preuss, Dr. Michael Fernandez – Staff Members

Isabel Romero-Interpreter, Nancy Gallardo- Interpreter, Dolly Sharma-Minutes Services - Guests

Absent:

I. Call to Order & Introductions

Ana called the meeting to order at 8:01 pm.

II. Public Input

No public input

III. Consent Items

A. Approval of Agenda

M/S/C (R. Sigala/D. Coe) To approve the agenda as presented.

After the vote, it was decided to add an item under Committee Business. Item: O Jaravata Northridge Home PL2122-109

M/S/C (D.Coe/A.Martinez) To approve the agenda as revised.

B. <u>Approval of Minutes of July 27th Meeting</u>

M/S/C (A.Martinez/D.Coe) To approve the July 27th Meeting Minutes as presented.

IV. Consumer Advisory Committee – Dr. Michael Fernandez

- A. CAC Report Highlights discussed at the August 3rd Committee Meeting:
 - 1. Policies and procedures were discussed
 - 2. The Committee would like to request a Vice-Chair position that is not a seated Board Member but is able to help mitigate the duties of the Chairperson as per the bylaws.
 - 3. Training Presentation Calendar
 - 4. The Committee is seeking clarification from the Board on responsibilities related to employment and opportunities

- 5. Jessica Gould will present on Lanterman Housing Alliance at the November meeting
- 6. Leisure Meetings, informal social gatherings were discussed and are tentatively planned for December and July

Evelyn McOmie will meet with Dr. Fernandez to discuss information on how the Committee can be supported in their inquiries.

B. Report-Out Template - Lizeth Chavez/Ana Quiles

Ana reviewed the template with the Committee Members as presented in the packet. This report is a tool that will allow liaisons between committees to have a framework for what was discussed at the meeting to be able to report out to other committees. This will streamline the communication between committees.

M/S/C (R.Sigala/D.Coe) To approve the Report-Out Template as presented.

V. Committee Business

A. <u>Board Support Policy Revision (Credit Monitoring)</u> - Ruth Janka

The Board Support Policy was amended to include a provision for credit monitoring of Board Members in the event of a breach of personal information.

M/S/C (D.Coe/A.Martinez) To approve the Board Support Policy as revised

B. <u>Board of Trustees Policy Statement Revisions</u> – Ana Quiles

Statement revisions for Board Officers have been amended to assign each officer to a committee responsibility as listed in the bylaws.

- 1. President
- 2. 1st Vice President
- 3. Secretary

M/S/C (R.Sigala/A.Rodriguez) To approve the Policy Statement revisions as presented.

C. <u>Committee Action Log for FY 2021-22</u> – Ruth Janka

The action log highlights all of the actions passed by the Committee during the previous fiscal year and is reviewed each August. Ruth reviewed the items as presented in the packet and a recommendation was made to include this item in the Annual Committee Orientation. In order to do this, there will also be a revision to the Committee Critical Calendar needed.

M/S/C (D.Coe/A.Martinez) To approve the Committee Action Log for FY 2021-22.

D. <u>Proposed Critical Calendar Revision</u>

Ruth outlined the additional revisions to the Critical Calendar as presented in the packet and in addition, to consolidate the review of the Committee Action Log with the Annual Committee Orientation.

178

M/S/C (A. Martinez/D. Coe) To approve the Critical Calendar as revised.

E. <u>CY23 Performance Contract</u> - *deferred*

1. Update: Public Input/Meeting - Jennifer Williamson

F. <u>Annual Board Training Plan Update</u> – Lizeth Chavez

Liz has edited this plan to include asterisk on items that are required by DDS. On November 7, the Lanterman Act training will be presented by the State Council at no cost to NLA. Ana recommended maintaining the same specific trainer for multiple trainings to incorporate consistency in information.

M/S/C (A.Martinez/L.Garcia) To approve the Board Training Plan as revised.

G. <u>Board and Committee List Update</u> – Ana Quiles

Revisions were made to the Board and Committee List to reflect these changes.

M/S/C (R.Sigala/L.Garcia) To approve the Board and Committee List for presentation to the Board at the next Board Meeting.

H. <u>Board and Committee Time and Attendance Requirements</u>

There is not a policy in place at this time. Current practice states that attendance is considered met if the Member is in the meeting for at least 15 minutes. Ana is bringing this issue to the Committee to define the amount of time a member must be at a committee meeting in order to be counted as "present". After much discussion, it was determined that attendance credit at Board and Committee Meetings would be given for members who attend at least half of the scheduled duration of the meeting.

M/S/C/O (A.Rodriguez/R.Sigala/L.Garcia) To approve the creation of a policy for Committee Time and Attendance Requirements. The motion passed with 1 opposition from Leticia Garcia.

Lizeth will collect data related to meeting times and actual duration to determine a baseline for scheduled meeting times to report back at the next Committee Meeting for further discussion.

I. <u>ELARC Boardsmanship Manual</u>

Ana presented a draft of the Boardmanship Manual from East LA Regional Center that can be tailored for NLA to have available as a resource for incoming Board Members. The Manual outlines basic policies as it relates to Board participation and regulations. The Committee will recommend this item to be reviewed by the Nominating Committee.

J. <u>FY2021-22 Board vs Expenditures</u> – Vini Montague

Vini reviewed this information as presented in the packet. This is only an update, there are no action items for the Committee on this item.

K. <u>FY2022-23 Board Budget</u> – Vini Montague

Vini reviewed this information as presented in the packet. This is only an update, there are no action items for the Committee on this item.

L. <u>POS Expenditure Data Report</u> – Ruth Janka

This is a duplicate agenda item on this Committee as well as the Consumer Services Committee. It is for the Committee to decide to keep this item at both meetings, to keep this report as an item on the agenda or to leave it for the Consumer Services Committee to review. Considerations were made for all options.

M/S/C/O (A.Quiles/D.Coe/L.Garcia) To approve the removal of the POS Expenditure Data Report as an agenda item on the Executive Committee agenda. The motion passed with 1 opposition from Leticia Garcia.

M. <u>California State Auditor's Report/June 2022</u> – Ruth Janka

Ruth briefly reviewed the Summary presented in the packet.

1. DDS Quality Incentive Measures

DDS has determined measures in different priority areas to ensure compliance with DDS directives. The areas include; Prevention and Wellness, Employment, Service Access and Workforce Capacity. Desired outcomes and metrics were identified to support the improvement of the measures.

After discussion, it was determined that Ruth Janka would create a summary of all of the actions taken by NLA in response to the findings listed in the Audit Report.

N. <u>ARCA Report Template</u> – Ana Quiles

Ana reviewed the template presented in the packet. This report is a tool that will allow liaisons between the Board and ARCA to have a framework for what was discussed at the meeting to be able to report out at Board Meetings.

Angelina Martinez, ARCA Delegate, stated that her preference would be to write her own report (similar to the report she provided the committee).. A committee member shared concerns that the current reporting does not provide all of the pertinent information from the ARCA meetings.

After much discussion, Ruth Janka summarized the options before the committee, which included a committee member to motion on the proposed ARCA template, a second and then put the issue to vote.

M/S/C/O (D.Coe/R.Sigala/) To approve the Report-Out Template as presented for ARCA Meetings for presentation to the Board. The motion passed with 1 opposition from Angelina Martinez.

During the discussion, Angela Martinez raised an issue concerning her position as an ARCA delegate which she feels entailed retaliation. A separate meeting will be scheduled to address these concerns in a more appropriate forum.

O. <u>Jaravata Northridge Home PL2122-109</u> - Vini Montague

POS Contract – Provides Supplemental Residential Services Program Support 5-year contract effective September 1, 2022 through August 31, 2027 Projected total contract amount is \$1,860,736.20 Projected to serve 3 consumers per month.

M/S/C (D.Coe/A. Rodriguez) To approve POS Contract PL2122-109 as presented.

VI. Center Operations - Ruth Janka

COVID. Updates- COVID numbers are trending downward. Currently, there are 796 hospitalizations since July, positivity rate is at 8.4% on a 7-day average. Masking is still being recommended in indoor spaces.

Route Fire- The route fire is currently at 12% containment and evacuation orders have been lifted. There were 6 Consumers and 8 Employees who live within 10 miles of the Evacuation Zone. Frazier Mountain High School and West Ranch High School are currently serving as Evacuation Centers and NLA will continue to monitor the situation. The fire is not moving towards the area currently.

DDS Directives - A new DDS Directive was received August 26th that provides notice that the extension of Early Start services for children over the age of three, will be rescinded October 3rd. Children will need to make the transition with the support of NLA and any children eligible for services under the Lanterman Act can receive early intervention services as an educational service. This directive also states that alternative service delivery ends December 31, 2022 and will not be extended. Any virtual service delivery that is not allowed by statute will need to re-evaluate.

Staffing - Vini Montague has accepted the permanent CFO position at NLA. Recruiting for the Director of Finance position will begin promptly. Arshalous Garlanian has been promoted to Consumer Services Director and recruiting has begun for her previous role, Consumer Services Manager. Jennifer Williamson has accepted the Quality Improvement and Outcomes Manager position. This role designed to support NLA by analyzing areas for quality improvement and outcomes in Case Management.

CA Early Childhood Special Education has put out an application for their Exemplar Lead Program that will provide support throughout the state to agencies involved in the transition of children from Early Start Programs (Part B) to special education preschool (Part C) services. Under the direction of Cristina Preuss, NLA applied for the program and participated in an interview; NLA is currently waiting for the results.

Cultural Competency and Implicit Bias Training - The Lanterman Act was amended to require all Regional Centers to hold implicit bias training for all NLA staff. Currently, NLA is conducting the 2nd round of training. DDS has approved the curriculum, a requirement in order for regional centers to be found in compliance with this requirement.

DDS has completed their audit of NLACRC's compliance with the Medicaid Waiver program and NLACRC is currently awaiting results.

DDS Employment Grants – A significant number of providers have submitted grant proposals to the department, who will assemble a panel to review all of the applications and select finalists.

Town Halls continue to be held the 3rd Thursday of the month.

VII. Review of Meeting Action Items

- A. Obtain clarity on Committee Priorities, confirm appointment of the Vice-Chair (Dr. Michael Fernandez, due by next Committee Meeting)
- B. Collect past meeting times for Time and Attendance benchmark (Lizeth Chavez, due by next Committee Meeting)
- C. Add the Boardmanship Manual to Nominating Committee Agenda (Lizeth Chavez, due by next Committee Meeting)
- D. Create a comprehensive list of all NLA's action items regarding the CA State Auditor's Report (Ruth Janka, due by next Committee Meeting)
- E. Schedule a time to address concerns brought up by Angelina Martinez (Ruth Janka, as soon as able)

VIII. Board Meeting Agenda Items

The following items were identified for the committee's section of the September Board Meeting Agenda:

- A. Minutes of the August 31st Meeting
- B. Annual Board Training Plan
- C. FY2021-22 Board vs. Expenditures
- D. FY2021-23 Board Budget

IX. Announcements / Information Items / Public Input

- A. Next Meeting: Wednesday, September 28th at 7:30 pm
- B. Committee Attendance (Page 106)
- C. FFRC Taller Basico de IEP, September 6th at 11:00 am
- D. Self Determination Support Group, September 7th at 6:00 pm
- E. Black & African Support Group, September 7th at 6:30 pm
- F. Cafecito Entre Nos, September 8^{th} at 11:00 am
- G. Virtual Alianza de Hombres, September 13th at 7:00 pm
- H. Virtual Town Hall: Parent Perspective/Early Start, September 15that 1:30 pm
- I. Community Based Organization Roundtable, September 15th at 1:30 pm
- J. Filipino Support Group, September 19th at 6:30 pm
- K. Self-Advocacy Group Meeting, September 20th at 10:45 am
- L. Performance Contract Public Meeting, September 20th at 1:00 pm
- M. FFRC Advance IEP, September 21st at 11:00 am
- N. Performance Contract Public Meeting, September 22nd at 1:00 pm

O. Cultivar y Crecer, September 23rd at 6:30 pm

X. Adjournment

Ana Quiles, Committee Chair, adjourned the meeting at 10:23 p.m.

Submitted by:

(*) Lizeth Chavez

Executive Administrative Assistant

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



No.	Description	Contract Summary	
1.	Contract Overview: (New or Amendment) (POS or OPS)	New HCBS Compliance Services Agreements, Purchase of Services (POS)	
2.	The Name of Vendor or Service Provider	Department of Developmental Services ("DDS") approval of funding concepts to comply with the CMS Final Rules ("HCBS Funding Concepts"): 1. Mains'l will provide person-centered thinking training, which will be taught through a symposium for NLACRC staff, virtual training sessions for NLACRC staff and vendors as well as a Train the Trainer model component. 2. Open Futures Learning will provide a virtual platform with self-directed training modules for the Direct Support Professionals providing services at NLACRC vendored service providers 3. Tom Pomeranz will provide Universal Lifestiles Training for Service Providers & NLACRC as well as one (1) year ongoing consultation services for service providers 4. TBD, Consultant for remediation clinic, workshops, and mentorship HCBS Remediation Consultant to assist NLACRC Service Providers in creating and implementing innovative pathways & practices supporting community integration, individual rights & individual choice highlighting a whole-person approach to services. Service code: 999 (non-start up development funds)	
3.	The Purpose of the Contract	The 2021 Budget Act contained \$15 million for service providers to make changes to their services and supports in order to meet the requirements of the federal Centers for Medicare & Medicaid Services ("CMS") Home and Community-Based Services ("HCBS") final regulations, or "Rules". The awarded amount statewide totaled \$9,033,962.00. The remaining \$5,966,308 was split evenly between the 21 regional centers to assist in	

		broader work in each community that promotes HCBS compliance.
		April 21, 2022 NLACRC received initial approval from DDS for \$284,109.00. On August 30, 2022, NLACRC received approval of our plan to award the funds to four (4) funding concepts.
		Funds must be encumbered by September 30, 2022.
4.	The Contract Term	September 1, 2022 through August 31, 2024
	The Total Amount of the Contract	 Mains'l: \$127,617.00 Open Futures Learning: \$54,512.00 Tom Pomeranz: \$36,980.00 TBD, Consultant for remediation clinic, workshops, and mentorship: \$65,000.00
5.		Total approved funding proposals: \$284,109.00* The total amount is a round estimate and the actual allocation per contract is subject to change. The total of all four contracts will not exceed the award amount of \$284,109.00.
6.	The Total Proposed Number of Consumers Served	Currently serving (consumers/month): n/a
7.	The Rate of Payment or Payment Amount	Payment will be reimbursed to Service Providers based on performance milestones or on other such terms as required under DDS's written guidelines.
8.	Method or Process Utilized to Award the Contract.	Collaborative review process with NLACRC's Board of Trustees Vendor Advisory committee, as published by DDS on April 21, 2022. Request for Vendorization for remediation clinic, workshops, and mentorship consultant posted on NLACRC website on September 8, 2022.
9.	Method or Process Utilized to Establish the Rate or the Payment Amount	DDS awarded total amount of funds on April 21, 2022, and approved NLACRC funding plan on August 30, 2022.
10.	Exceptional Conditions or Terms: Yes/No If Yes, provide explanation	Contract is subject to changes recommended by legal counsel and on such further terms and conditions as any Officer of NLACRC may approve. Any change to award amounts per contract will be approved by DDS.

		Fund 2022	ls must be encumber.	red by September 3	30,
Comr ("Cor	North Los Angeles County Requittee reviewed and discussed the ntracts ") and is recommending an oard of Trustees to Approve the Co	above four (action of NI	(4) HCBS Complian	nce Services Agree	ements
			Septe	ember 28, 2022	
	David Coe, Board Treasurer			Date	

The North Los Angeles County Regional Center's ("NLACRC") Executive Committee on behalf of the Board of Trustees reviewed and discussed the Contract Summary for the above four (4) HCBS Compliance Services Agreements and passed the following resolution:

RESOLVED THAT in compliance with NLACRC's Board of Trustees Contract Policy, the NLACRC's Executive Committee on behalf of the Board of Trustees has reviewed and discussed the Contract Summary and hereby authorizes any Officer of the NLACRC to execute the above four (4) HCBS Compliance Services Agreements ("**Agreements**" or "**Contracts**") related to the Department of Developmental Services ("**DDS**") approved HCBS Funding Concepts on **September 28, 2022**.

The NLACRC's Executive Committee on behalf of the Board of Trustees hereby approves all such Contracts that are related to the DDS-approved HCBS Funding Concepts. The NLACRC's Executive Committee on behalf of the Board of Trustees hereby authorized and designates any officer of NLACRC to finalize, execute and deliver the Contract on behalf of NLACRC, in such form as NLACRC's legal counsel may advise, and on such further terms and conditions as such Officer may approve. Changes in the final contract may include adjustment to the allocation of the award per contract, not to exceed \$284,109.00 total award between all four (4) HCBS Compliance Services Agreements. The final terms of the Contract shall be conclusively evidenced by the execution of the Contract by such Officer. For purposes of this authorization, an "Officer" means NLACRC's Executive Director, Deputy Director, Chief Consumer & Community Services Officer, Chief Financial Officer, Chief Human Resources Officer, and Chief Information Officer, and no one else.

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

	September 28, 2022
Lillian Martinez, Board Secretary	Date

No.	Description	Contract Summary
1	Contract Overview:	New,
1.	(New or Amendment) (POS or OPS)	Purchase of Services (POS)
	The Name of Vendor or Service	Casa Fiscal, Inc.
2.	Provider Provider	Vendor Number: TBD
	TTOVIACI	Service Code: 315, FMS Fiscal Agent
3.	The Purpose of the Contract	The service provider will provide Financial Management Services ("FMS") Fiscal Agent services pursuant to Title 17, Section 58887 for NLACRC participants in the Self-Determination Program ("SDP") to get support to help them pay for services they need. A participant in SDP may choose the FMS Fiscal Agent model, also called "Bill Payer" when goods or services are purchased from a business. The FMS providing services in this capacity writes checks and pays for goods and services listed in the IPP. No employer/employee relationship exists between the FMS, the service provider, or the participant. The business is responsible to provide the items or workers and the FMS provider writes the check for the goods or services provider. The business maintains the employer/employee relationship with any workers and therefore is responsible for all applicable employment laws and taxes and to obtain appropriate insurances (i.e. worker's compensation).
4.	The Contract Term	Five (5) year contract effective October 1, 2022 through September 30, 2027.
5.	The Total Amount of the Contract	Projected annual cost is \$316,084.53, or \$1,580,422.64 over the entire five (5) year term of the contract based on similar expenditure of NLACRC's utilization of statewide FMS Fiscal Agent vendorizations. There are currently 10 FMS agencies that provide services to NLACRC consumers and on average NLACRC expenditure per FMS for Fiscal Agent services is \$26,340.38.
6.	The Total Proposed Number of Consumers Served	Current 10 FMS agencies that provide FMS for Fiscal Agent services currently serve on average 56 NLACRC consumers.

TBD-315 Page 1 of 3

7.	The Rate of Payment or Payment Amount	Payment will be reimbursed to service provider based on 1) the actual services authorized; 2) the actual services provided; and 3) the authorized DDS-set rate.
8.	Method or Process Utilized to Award the Contract.	Based on vendorization requirements under statute and regulation for FMS services.
9.	Method or Process Utilized to Establish the Rate or the Payment Amount	The range of maximum DDS-set rates within each model is dependent upon the number of services funded from an SDP participant's individual budget as a part of the individual program plan (IPP). (See attached)
10.	Exceptional Conditions or Terms: Yes/No If Yes, provide explanation	This vendorization is an emergency vendorization pursuant to Title 17, 54324. Contract allows for services to be provided for a maximum of forty-five (45) days pending receipt of vendor application and NLACRC's approval of all Title 18, 54320 vendorization requirements being met. The contract is a "DRAFT" contract and is subject to changes recommended by legal counsel and on such further terms and conditions as any Officer of NLACRC may approve.

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

	September 30, 2022
David Coe, Board Treasurer	Date

TBD-315 Page 2 of 3

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

<u>RESOLVED THAT</u> in compliance with NLACRC's Board of Trustees Contract Policy, the Contract between NLACRC and Casa Fiscal, Inc. was reviewed and approved by NLACRC's Board of Trustees on September 30, 2022.

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

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

	September 30, 2022
Lillian Martinez, Board Secretary	Date

TBD-315 Page 3 of 3

Self-Determination Program Maximum Financial Management Services (FMS) Rates

FMS Model	Number of Services	Max Rate Per Month
	1-3	\$50
FMS as Bill Payer	4-6	\$75
	7+	\$100
	1-2	\$110
Participant as Sole Employer	3-4	\$125
	5+	\$150
	1-2	\$125
Participant & FMS as Co-Employers	3-4	\$140
	5+	\$165

Note: If the FMS provides payments through more than one of the models above for a participant, then the maximum rate for that participant cannot exceed the highest cost model for the total number of services. For example, if a participant is using five services, and the FMS is a "bill payer" for two services and a "co-employer" for three services, the maximum rate charged to the participant cannot exceed \$165 per month. In all cases, the participant and FMS can agree to rates lower than the maximum rates above.

No.	Description	Contract Summary
	Contract Overview:	New,
1.	(New or Amendment) (POS or OPS)	Purchase of Services (POS)
		Casa Fiscal, Inc.
2.	The Name of Vendor or Service Provider	Vendor Number: TBD
	Provider	Service Code: 316, FMS Co-Employer
3.	The Purpose of the Contract	The service provider will provide Financial Management Services ("FMS") Fiscal Co-Employer services pursuant to Title 17, Section 58887 for NLACRC participants in the Self-Determination Program ("SDP") to get support to help them pay for services they need. A participant in SDP may choose the FMS Co-Employer model if they want to share some of the employer roles and responsibilities with an FMS. While the FMS provider in this model is the employer of record, the participant maintains the ability to hire and terminate employees with input from the FMS provider. The FMS provider maintains the primary employer liability and required insurances. The FMS also assists by verifying provider qualifications and processing payroll.
4.	The Contract Term	Five (5) year contract effective October 1, 2022 through September 30, 2027.
5.	The Total Amount of the Contract	Projected annual cost is \$1,012,384.31, or \$5,061,921.55 over the entire five (5) year term of the contract based on similar expenditure of NLACRC's utilization of statewide FMS Coemployer vendorizations. There are currently 6 FMS agencies that provide services to NLACRC consumers and on average NLACRC expenditure per FMS for Coemployer garriages is \$84,265,26
6.	The Total Proposed Number of Consumers Served	Employer services is \$84,365.36. Current 6 FMS agencies that provide FMS for Co-Employer services currently serve on average 118 NLACRC consumers.
7.	The Rate of Payment or Payment Amount	Payment will be reimbursed to service provider based on 1) the actual services authorized; 2) the actual services provided; and 3) the authorized DDS-set rate.
8.	Method or Process Utilized to	Based on vendorization requirements under
0.	Award the Contract.	statute and regulation for FMS services.
9.	Method or Process Utilized to	The range of maximum DDS-set rates within

TBD-316 Page 1 of 3

	Establish the Rate or the Payment Amount	each model is dependent upon the number of services funded from an SDP participant's individual budget as a part of the individual program plan (IPP). (See attached)
10.	Exceptional Conditions or Terms: Yes/No If Yes, provide explanation	This vendorization is an emergency vendorization pursuant to Title 17, 54324. Contract allows for services to be provided for a maximum of forty-five (45) days pending receipt of vendor application and NLACRC's approval of all Title 18, 54320 vendorization requirements being met. The contract is a "DRAFT" contract and is subject to changes recommended by legal counsel and on such further terms and conditions as any Officer of NLACRC may approve.

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

	September 30, 2022
David Coe, Board Treasurer	Date

TBD-316 Page 2 of 3

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

RESOLVED THAT in compliance with NLACRC's Board of Trustees Contract Policy, the Contract between NLACRC and **Casa Fiscal, Inc.** was reviewed and approved by NLACRC's Board of Trustees on **September 30, 2022.**

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

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

	September 30, 2022
Lillian Martinez, Board Secretary	Date

TBD-316 Page 3 of 3

Self-Determination Program Maximum Financial Management Services (FMS) Rates

FMS Model	Number of Services	Max Rate Per Month
	1-3	\$50
FMS as Bill Payer	4-6	\$75
	7+	\$100
	1-2	\$110
Participant as Sole Employer	3-4	\$125
	5+	\$150
	1-2	\$125
Participant & FMS as Co-Employers	3-4	\$140
	5+	\$165

Note: If the FMS provides payments through more than one of the models above for a participant, then the maximum rate for that participant cannot exceed the highest cost model for the total number of services. For example, if a participant is using five services, and the FMS is a "bill payer" for two services and a "co-employer" for three services, the maximum rate charged to the participant cannot exceed \$165 per month. In all cases, the participant and FMS can agree to rates lower than the maximum rates above.

Board Resolution

For City National Bank's Supersedure Agreement (Business)

Resolved that, at a meeting of _____ The North Los Angeles County Regional Center, Inc. Board of Trustees Executive Committee ___ held on the __28th ___ day of __September 2022 __, in accordance with the laws and by-laws of the above organization, City National Bank is authorized to remove __Jesse Weller, Deputy ____ Director, ___ as Authorized Signer from all accounts of the North Los Angeles County Regional Center presently open under the Account Agreement with City National Bank, effective and including __October ____ 7, 2022 __. See Schedule A.

Further resolved that the authorization is in addition to any other authorizations in effect and will remain in full force until the Bank receives written notice of revocation at the address(es) and manner designated by City National Bank.

Schedule A

Account Description	Account Number
Business Checking Account	xxxxx9326
Payroll Account	xxxxx9334
Flexible Spending Account	xxxxx9342
Consumer Group Account	xxxxx9369
Dedicated Consumer Account	xxxxx6104
Help Fund/Donation Account	xxxxx9350
Restricted Funds Account (Prevention)	xxxxx4395

Certification by Secretary: I certify that (1) I am the Secretary of North Los Angeles County Regional Center; and (2) the foregoing Resolution is a complete and accurate copy of the resolution duly adopted by the North Los Angeles County Regional Center's Board of Trustees; and (3) the Resolution is in full force and has not been revoked or changed in any way.

	September 28, 2022
Lillian Martinez, Board Secretary	Date

Board Resolution

For US Bank

Resolved that, at a meeting of the North Los Angeles County Region Executive Committee held on the 28 th day of September 2 and by-laws of the above organization, US Bank is authorized to remote as Authorized Signer from all accounts of the North Los Angeles Count under the Account Agreement with US Bank, effective and including Schedule A.	2022 , in accordance with the laws ove <u>Jesse Weller, Deputy Director</u> nty Regional Center presently open
Further resolved that the authorization is in addition to any other auth in full force until US Bank receives written notice of revocation at the aby US Bank.	
Schedule A	
Account Description	Account Number
North Los Angeles County Regional Center Post-Retirement Medical Trust	xxxxxx3500
North Los Angeles County Regional Center CALPERS Unfunded Accrued Liability Contribution Trust	xxxxx68-000
Certification by Secretary: I certify that (1) I am the Secretary of N Center; and (2) the foregoing Resolution is a complete and accurate of by the North Los Angeles County Regional Center's Board of Trustees; and has not been revoked or changed in any way.	opy of the resolution duly adopted
Lillian Martinez, Board Secretary Date	

Corporate Secretary's Certificate

North Los Angeles County Regional Center

Center, a corporation duly organized and existi	ecretary, of the North Los Angeles County Regional ng under the laws of the State of <u>California</u> , and orth, CA (the "Corporation") do hereby certify that I am stated Corporation.
Resolved, as it is hereby resolved that stated co Bank, N.A.	orporation shall open and maintain accounts with U.S.
_	s authority to transact and to sign for and on behalf of aments regarding transactions with U.S. Bank, N.A shall 7, 2022:
Jesse Weller	Deputy Director
Signature	
Lillian Martinez	
Printed Name	
Board Secretary	
Title	
September 28, 2022	
Date	

Board Resolution

For HighMark Capital Management

Resolved that, at a meeting of _____ the North Los Angeles County Regional Center, Inc. Board of Trustees Executive Committee ("NLACRC") ___ held on the ____ 28th ___ day of ___ September 2022 __, in accordance with the laws and by-laws of the above organization, HighMark Capital Management ("HighMark") is authorized to remove ___ Jesse Weller, Deputy Director ___ as authorized to act on behalf of NLACRC and to communicate with and to provide instructions to HighMark on behalf of NLACRC, on all accounts belonging to NLACRC, effective and including ____ October 7, 2022 __. See Schedule A.

Further resolved that the authorization is in addition to any other authorizations in effect and will remain in full force until HighMark receives written notice of revocation at the address(es) and manner designated by HighMark.

Schedule A

Account Description	Account Number
North Los Angeles County Regional Center Post-Retirement Medical Trust	xxxxxx3500
North Los Angeles County Regional Center CALPERS Unfunded Accrued Liability Contribution Trust	xxxxx68-000

Certification by Secretary: I certify that (1) I am the Secretary of North Los Angeles County Regional Center; and (2) the foregoing Resolution is a complete and accurate copy of the resolution duly adopted by the North Los Angeles County Regional Center's Board of Trustees; and (3) the Resolution is in full force and has not been revoked or changed in any way.

	September 28, 2022
Lillian Martinez, Board Secretary	Date

Board of Trustees Budget vs Expenditures Fiscal Year 2022-2023

Expenditures Paid through September 20, 2022 (August 2022 State Claim) Approved Budget

	Α Α		В	С		D	E
		Approved			Budget	% of Budget	
			Budget	YTD Expenses		Remaining	Utilized
No	Description		FY 2022-23			(B-C)	(C/B)
1	Board Retreat, Board Dinner and CAC Holiday Party	\$	20,000.00	\$ -	\$	20,000.00	0.00%
2	NLACRC Legislative Events	\$	3,500.00	\$ -	\$	3,500.00	0.00%
3	ARCA Meetings, Conferences, & Activities (includes airfare, hotels, cabs, meals, parking, etc.)	\$	5,000.00	\$ -	\$	5,000.00	0.00%
4	Board Member Support to Participate in Meeting & Events (overnight mailing, iPads, supplies, etc)	\$	28,000.00	\$ 3,747.94	\$	24,252.06	13.39%
5	Transportation for Board Members (Keolis)	\$	1,000.00	\$ -	\$	1,000.00	0.00%
6	Child Care/Attendant Care Support for Board Members	\$	12,000.00	\$ 286.10	\$	11,713.90	2.38%
7	Meals for Board and Board Committee Meetings	\$	3,000.00	\$ -	\$	3,000.00	0.00%
8	Board & VAC Member Recruitment Expenses	\$	2,000.00	\$ -	\$	2,000.00	0.00%
9	Board Meeting Supplies (nameplates, flowers, greeting cards, paper goods)	\$	9,000.00	\$ 858.37	\$	8,141.63	9.54%
10	Sponsorships	\$	3,000.00	\$ -	\$	3,000.00	0.00%
11	Board Training	\$	15,000.00	\$ -	\$	15,000.00	0.00%
				\$ -	\$	-	
	Total	\$	101,500.00	\$ 4,892.41	\$	96,607.59	4.82%

DRAFT

North Los Angeles County Regional Center Government & Community Relations Committee Meeting Minutes

August 17, 2022

Present:

Andrew Ramirez, Nicholas Abrahms, Rocio Sigala, Sharmila Brunjes, Sylvia Brooks-Griffin, Cathy Blin, Gabriela Herrera, Jordan Feinstock, George Alvarado – Committee Members

Robert Dhondrup, Lizeth Chavez, Dr. Jesse Weller, Evelyn McOmie, Jazmin Zinnerman, Vini Montague, Gabriela Eshrati, Lilliana Windover, Erica Beall, Evan Ingber, Jennifer Williamson, Cristina Preuss, Clarence Foster – Staff Members

Michelle Heid – Legucator, Ana Quiles- Board President, Kimberly Bermudez- 24 Hour Home Care, Leticia Garcia- Board Member, Lillian Martinez - Board Member, Anthony - Coach for George Alvarado, Isabel Romero- Interpreter, Nancy Gallardo-Interpreter, Dolly Sharma- Minutes Services - Guests

Absent:

Brian Gatus

I. Call to Order & Introductions

Jordan Feinstock, Committee Chair called the meeting to order at 7:42 pm.

Committee Members and NLA Staff Members gave brief introductions, Guests were asked to introduce themselves in the chat.

II. Public Input

George Alvarado introduced himself as the new Board Intern.

Jordan Feinstock made a recommendation for an additional speaker to the upcoming Candidate Forum. For the next Committee Meeting, Jordan Feinstock proposed a Chair Report to be added as a standing agenda item.

III. Consent Items

A. Approval of Agenda (Page 2)

M/S/C (A. Ramirez/S. Brooks-Griffin) To approve the agenda as presented.

B. Approval of Minutes from the August 4th Meeting (Page 4)

M/S/C (R. Sigala/S. Brunjes) To approve the August 4th Meeting Minutes with 1 abstention from S. Brooks-Griffin.

IV. Committee Business

A. Review Committee Action Log from FY 2021-22 - Dr. Jesse Weller (Page 11)

The action log highlights all of the actions passed by the Committee during the previous fiscal year and is reviewed each August. Dr. Weller reviewed the items as presented in the packet and a recommendation was made to include this item in the Annual Committee Orientation. In order to do this, there will also be a revision to the Committee Critical Calendar needed.

M/S/C (A. Ramirez/ S. Brooks-Griffin) To approve the Committee Action Log for FY 2021-22 and to revise the Critical Calendar to consolidate the review of the Committee Action Log with the Annual Committee Orientation with 1 abstention from Jordan Feinstock.

B. Social Media - Robert Dhondrup

- 1. Social Media Analytics July 2022 (Page 18)
 - Facebook Audience Engagement
 - Engagement level of reactions, comments and shares. There were 1255 total Engagements in July for the English page and 365 total Engagements for the Spanish page.
 - Instagram Audience Engagement
 - o 189 Likes, 10 Comments, 188 Posts Sent for the English page
 - o 118 Likes, 23 Comments, 187 Posts Sent for the Spanish page
 - Twitter Audience Engagement
 - 192 Tweets, 9,460 Total Impressions, 5,442 Profile Visits, 10 Mentions and 4 New Followers

Robert noted that there is a decrease in Facebook and Instagram use in young adults (18-35) and NLA is in the process of developing a Tik Toc account to reach this demographic. Also, per a recommendation at the last Committee Meeting, the team is still working on the translation of flyers and is looking at the developing of communications in multiple languages.

C. <u>Legislative Update</u> - Jennifer Williamson

- 1. Finalize Discussion of Board's Legislative Priorities for FY 2022-23 (*Page 36*) The Legislative Priorities were revised per the discussion at the last Committee Meeting and is presented in the packet. Page 36 shows the revisions that were made, Page 37 shows the "clean" version of the draft.
 - **M/S/C** (A. Ramirez/R. Sigala) To approve the Legislative Priorities for presentation to the Board at the next Board Meeting.
- 2. Proposed Legucator Contract (Page 38)

Michele Heid is contracted as a Community and Legislative Educator (Legucator) for NLA. The Committee is being asked to review and determine what legislative activities within the proposal they would like to choose. The new legucator contract will then be developed based on the chosen legislative activities.

Ana Quiles noted that contracts over \$250,000 need to go through the Board Approval Process which would apply to this contract if the estimate is followed.

Michele Heid stated that this contract has always been put through the Board Approval Process. It was recommended that Jennifer return to the Committee with specifics in regard to cost.

M/S/C (A. Ramirez/R. Sigala) To defer this item to the next Committee Meeting pending more specific information.

- 3. Legislative Bills- Jennifer Williamson (Page 73)
 Jennifer reviewed the information as presented in the packet in the interest of time.
- 4. Legucator Report Michelle Heid (*Attachment*)
 Michele reviewed this report as presented in the packet. Links were included in the report for further reading on items.

D. Local Grassroots Marketing and Outreach

1. Proposed Calendar of Distribution for Peachjar Flyer – Jennifer Williamson (Page 111)

The Committee requested a Peachjar Flyer distribution calendar. 2 options were presented:

Option 1: 28-day distribution period Option 2: 14-day distribution period

M/S/C (R. Sigala/A. Ramirez) To approve the 14-day distribution period for the Peachjar flyer.

- 2. Prioritization of School Districts/SELPAs Dr. Michael Fernandez
 The update will be emailed to the Committee by next week as Dr. Fernandez is not present.
- E. <u>Language Access and Cultural Competency Plan</u> Dr. Michael Fernandez
 The update will be emailed to the Committee by next week as Dr. Fernandez is not present.

F. Virtual Town Halls - Robert Dhondrup

Robert outlined a few new strategies to increase attendance at the 4 remaining Town Halls of the year. The flyer has been updated to include all of the events planned for the rest of the year. More outreach is being conducted in Committee Meetings as well as at Community-based organizations.

August Town Hall: Individual Rights Under Lanterman Act will take place on Thursday, August 18th at 1:30 pm.

G. <u>Board Audit Question</u>- Robery Dhondrip and Evan Ingber

Evan introduced himself as the Training Development Supervisor for NLA. Each year, NLA holds mandated trainings on HIPAA, National Voter Registration Act, Mandated 203

Reporting, COVID-19 and Sexual Harassment Prevention. Provide staff with training as needed when new directives are sent from DDS. Trainings are held in-person and/or online based on the needs of the training and On-Demand options are also available to deliver training safely and effectively.

V. Meeting Action Items

- A. Create a Proposed Legucator Contract Cost Breakdown (Item C.2) Jennifer Williamson
- B. Add the Chair Report as a standing agenda item Lizeth Chavez
- C. Send status update reports to the Committee by next week. (Item D.2 & Item E.) Dr. Jesse Weller

VI. Board Meeting Agenda Items

- A. Minutes of the August 3rd Meeting
- B. Minutes of the August 3rd Meeting
- C. Board's Legislative Priorities for FY 2022-23
- D. Critical Calendar Revision

VII. Announcements / Information Items / Public Input

- A. <u>Legislative Training:</u> Wednesday, September 21st at 6 pm.
 - This training will be held in lieu of the Consumer Services and Government and Community Relations Committee Meetings.
- B. Next Meeting: August 17th, 2022 at 7:00 pm.
- C. <u>Monthly Committee Action Log</u> (Page 114)
- D. <u>Committee Attendance</u> (Page 116)

No public input

VIII. Adjournment

M/S/C (A. Martinez /R. Sigala) To adjourn the meeting.

Jordan Feinstock adjourned the meeting at 9:28 pm.

Submitted by:

(*) Lizeth Chavez

Executive Administrative Assistant

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



North Los Angeles County Regional Center Nominating Committee Redacted Meeting Minutes

September 7, 2022

Present:

Ana Quiles, Lillian Martinez, David Coe, Suad Bisogno and Jennifer Koster – Committee Members

Ruth Janka, Lizeth Chavez, Lilliana Windover – Staff Members

Dolly Sharma - Minutes Services - Guests

Absent:

I. Call to Order

Ruth Janka called the meeting to order at 5:38 pm.

II. Consent Items

A. Approval of Agenda

M/S/C (A. Quiles/D. Coe) To approve the agenda as presented

B. Approval of Minutes and Redacted Minutes of the April 6th Meeting

M/S/C (A. Quiles/L. Martinez) To approve Meeting Minutes for the April 6th meeting.

C. Approval of Minutes and Redacted Minutes of the April 18th Meeting

M/S/C (A. Quiles/D. Coe) To approve Meeting Minutes for the April 18th meeting.

III. Committee Business

A. Annual Committee Orientation – Ruth Janka

At the beginning of each board year, Committees are presented with an Annual Committee Orientation that outlines a few key points about Committee processes as presented in the packet.

1. Policies and Procedures (Page 24)

The committee has a membership if at least four individuals, all who are Board Members. Members serve for 2 years with no more than 2 members being replaced annually.

The Nominating Committee is responsible for collecting, categorizing, screening and keeping on file all applications for membership on the Board of Trustees and Vendor Advisory Committee (VAC). The Committee is also responsible for ensuring that qualified and interested persons are nominated for positions on the

Board and VAC and that the composition of the Board/VAC complies with the Lanterman Act.

Ruth also reviewed the Operating Processes for the Nominating Committee and there was discussion explaining the process of the nomination process.

2. Board Recruitment Guiding Principles Ruth reviewed the principles as presented in the packet.

3. Board Internship Policy

The purpose of this policy will establish limited Bord participation opportunities for community members. They are appointed for a 1-year term with the potential for a 1-year extension granted by the Board. Individuals selected for the program will be assigned to serve as non-voting members on selected Committees. Interns will receive non-confidential documents and will be seated at Board meetings as non-voting members.

4. Board Audit Section

This document identifies 4 areas to help the Committee run effectively. These areas include knowledge, skills, dangers and a list of questions for the Committee to determine if the standards are being met to be effective as a group. Ruth reviewed these areas as presented in the packet.

5. Review Committee's Action Log for FY21-22

The action log highlights all of the actions passed by the Committee during the previous fiscal year and is reviewed each August. Ruth reviewed the items as presented in the packet.

6. FY 2022-23 Critical Calendar

The Critical Calendar identifies the items that are to be reviewed by the Committee and when. It also identifies the Board Audit questions that will be answered that month. It was noted that the Critical Calendar is 1 month ahead of schedule in response to DDS asking NLA to meet composition requirements expeditiously. This Critical Calendar was approved at the April Committee Meeting.

B. Confidentiality Statements

The Committee was reminded to sign and return the Confidentiality Statements that were sent by Board Support as soon as possible.

C. Open Board and VAC Positions

1. Open Board Positions in August 2022

The positions were reviewed as presented in the packet.

Ana Quiles requested that the chart be edited to move the Date Re-elected (7-23) for Jennifer Koster and Alma Rodriguez to the Term Expires column. Lizeth Chavez will make the revisions.

2. Open VAC Positions in August 2022

The positions were reviewed as presented in the packet.

Questions were raised regarding the process for re-election. Lizeth stated that Members eligible for re-election will receive an email from Board Support to ask if there is interest in re-election. The Member will accept or decline but upon acceptance, still goes through the review process with the Nominating Committee.

There are 2 criteria areas that have not been met: 1 white individual and 1 individual currently served by NLA. Clarity is needed to determine how many more individuals served are needed to comprise 25% of the Board, currently NLA is at 15%.

D. DDS Composition Survey

1. DDS Composition Letter and Response

The letter from DDS and response from Ruth Janka and Ana Quiles were reviewed as presented in the packet.

E. FY22-23 Board and VAC Applicant Composition

Lizeth included current applications for interested parties who the Committee can contact to conduct interviews if the Committee chooses to do so.

Currently, the closing deadline for re-election responses for current Board Members is December 15th. Ana suggested that the due date for the responses be moved forward so as to give the Committee ample time to review applications and conduct interviews with Board Candidates before termed Members are phased out.

After much discussion, it was determined that Interest letters will be sent on September 16th, with responses required by September 30th. A motion was made to revise the Critical Calendar to reflect these changes.

M/S/C (D. Coe/ A. Quiles) To adjust the Critical Calendar to reflect re-election interest letters and responses being conducted in September moving forward.

F. Review Recruitment Notices

1. Board Recruitment Notice

Lillian reviewed this notice as presented in the packet.

There was much discussion surrounding the list of previous applicants. Applicant 1 was discussed specifically, as being a person who the Committee will interview as a potential candidate for an individual who is served by NLA. Applicant 2 was another individual who was identified for interviews as well as Applicant 3, Applicant 4 and Applicant 5.

M/S/C (S. Bisogno/D. Coe) To approve Applicant 2, Applicant 3, Applicant 4 and Applicant 5 for Board Recruitment Interviews.

There was discussion surrounding George Alvarado, Board Intern as being converted to a traditional Board Member to further meet the composition requirements in the timeliest manner. It was also noted that he has been active in 207

meeting participation. If approved by the Board, he would begin his term as a full Member effective immediately.

M/S/C (A. Quiles/S. Bisogno) To recommend the Board's approval of George Alvarado to be a full Board Member at the next Board Meeting.

2. VAC Recruitment Notice

Lillian reviewed this notice as presented in the packet. Suad Bisogno noted that there is a need on the VAC for group home representation. She recommended that the Nominating Committee re-interview VAC applicant 1 as he represents that category.

G. Elect a Committee Chair - Lillian Martinez volunteered to serve as the Committee Chair.

M/S/C (A. Quiles/D. Coe) To approve Lillian Martinez as the Nominating Committee Meeting Chair

IV. Board Meeting Agenda Items

The following items were identified for the Committee's section of the September 14th Board Meeting agenda:

- A. Minutes of the September 7th Meeting
- B. Board and VAC Member Recruitment Notices
- C. George Alvarado Nomination

V. Announcements / Information

A. <u>Next Meeting:</u> September 20th, 2022 at 5:30pm and September 29th, 2022 at 5:30 pm to conduct applicant interviews.

VI. Adjournment

Lillian Martinez, Committee Chair adjourned the meeting at 7:18 p.m.

Submitted by:

(*) Lizeth Chavez

Executive Administrative Assistant

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

North Los Angeles County Regional Center Nominating Committee Redacted Meeting Minutes

September 20, 2022

Present: Ana Quiles, Lillian Martinez, Suad Bisogno, Jennifer Koster – Committee Members

Lizeth Chavez, Lilliana Windover, and Maddy Gonzalez – Staff Members

Dolly Sharma - Minutes Services - Guest

Absent: David Coe

I. Call to Order

Lillian Martinez called the meeting to order at 5:33 pm.

II. Consent Items

A. Approval of Agenda

M/S/C (A. Quiles/S. Bisogno) To approve the Agenda as presented

B. <u>Approval of Minutes and Redacted Minutes of the September 7th Meeting</u> – *defer*

III. Committee Business

A. Review Recruitment Notices

1. Board Recruitment Notice

This document was reviewed as presented in the packet. Currently, the document states "Our board is currently seeking consumers, family members, or community members, particularly individuals who meet one of the following criteria" followed by a list. It was decided that the document will still include that statement but that the criteria itself be changed to reflect the current needs of the Board which is a White, or Caucasian individual.

Lizeth shared that a disclosure will be included in the document that explains the reasoning for the limited need of applicants. The Committee will review the edited document with the noted changes at the next Committee Meeting.

Ana also recommended the revision of the last bullet point on the notice to reflect "legal, financial, board governance, management, and developmental disability". This will encompass the statute requirements for composition for the Board.

2. VAC Recruitment Notice

This item was reviewed as presented in the packet. There has been no response from previous applicant, VAC applicant 1, in regard to his continued interest in serving on the VAC. Suad mentioned that representation for community care

facilities, or licensed care facilities in the VAC is needed. It was decided to amend this document, similarly to the Board Recruitment Notice, specifying the criteria in most need, and including reasoning. The Committee will review the edited notice at the next Committee Meeting. Suad also requested that this item be added to the agenda for the next VAC Meeting, Lizeth stated that she would make the addition.

B. Nomination of Consumer Advisory Committee Vice-Chair

1. Suzanne Paggi

Volunteers to serve as Vice-Chair for the CAC were requested and Suzanne Paggi was the only nomination. The CAC approved the nomination and it is being presented to the Nominating Committee for final approval. Suzanne is aware and understands that this is a non-Board position.

M/S/C (A. Quiles/L. Martinez) To approve Suzanne Paggi as the Vice-Chair for the Consumer Advisory Committee.

C. Conduct Board Interviews

1. 6:00 pm - Applicant 1(Board)

Prior to the arrival of the applicant, the Committee reviewed the interview questions and discussed how the interview will be conducted.

The Committee entered into the interview session at 6:02 pm.

The Committee exited the interview session at 6:45 pm.

After the interview, the Committee collaborated on changes that can be made for future Board Candidates. It was determined that each Board Applicant should receive the Boardsmanship Manual as well as a copy of a recent Board Meeting Packet as part of the applicant confirmation email. This will allow each applicant to review information about board operations and could perhaps help them understanding the level of commitment needed to provide in order to serve on the board successfully.

On the list of Potential Interview Questions, it was decided to change the questions in Section 1: Background as listed below:

Section 1: Personal Experience (to replace Background as the section title)

- Question: Please give us a brief overview about yourself.
- Question: Why do you want to volunteer to serve on our board? (This question will be amended to the effect of what is your passion or reasoning behind your desire to volunteer on the board)
- Question: What personal, professional, or volunteer experience do you think you could bring to the board? Have you attended any of our board or committee meetings?
- Question: What is your familiarity with Robert's Rules of Order?

The ratings system for scoring applicants that will be separated into personal experience and board experience sections.

It was also determined to add to the introductions from the Committee to the applicant during the interview, to include the Members' experience and passion for serving on the Board.

IV. Board Meeting Agenda Items

The following items were identified for the Committee's section of the next Board Meeting agenda:

- A. Minutes of the September 7th and September 20th Meetings
- B. Board and VAC Member Recruitment Notices

V. Announcements / Information

A. <u>Next Meeting:</u> September 29th, 2022 at 5:30 pm in the event that there are applicants scheduled to be interviewed, if no applicants the next regular Committee Meeting will take place on October 5th, 2022 at 5:30 pm.

VI. Adjournment

Lillian Martinez, Committee Chair adjourned the meeting at 7:16 pm.

Submitted by:

(*) Lizeth Chavez

Executive Administrative Assistant

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

12-Month Attendance	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Total
Administrative Affairs				Dark						Dark				Absences
David Coe, Chair											*P	Р	Р	0
Alma Rodriguez											*P	Р	Р	0
Lety Garcia													Р	0
Ana Quiles	Р	Р	Р		Р	Р	Р	Р	Р		Р	Р	Р	0
Lillian Martinez	Р	Р	Р		Р	Р	Р	Р	Р		Р	Р	Р	0
Rocio Sigala											*P	Р		0
Bob Erio (VAC Rep)											*P	Р	Р	0

P = Present Ab = Absent

North Los Angeles County Regional Center

Consumer Advisory Committee

FY22-23 Meeting Attendance

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	TOTALS
Consumer Attendee *Committee Members	2021	2021	2021	2021	2022	2022	2022	2022	2022	2022	2022	2022	2022	Absences
*Jennifer Koster, Chair							Р		Р			Р	Р	0
*Bill Abramson	Р	Р	Ab		Р	Р	Р	Р	Р	Р		Р	Р	1
*Pam Aiona	Р	Р	Р		Р	Р	Р	Р	Р	Р		Р	Р	0
*Suzanne Paggi	Ab	Р	Р		Р	Р	Р	Р	Р	Р		Р	Ab	2
*Cynthia Samano	Р	Р	Р		Ab	Р	Р	Р	Р	Р		Р	Ab	1
Susan Good			Р			Р		Р	Ab	Ab		Ab	Ab	
Melinda Tannan												Р	Ab	
Lesly Forbes													Р	
Destry Walker													Р	
Alex Phuong													Р	
	P = Preser	nt	Ab = Abser	nt	No Meeting	j	Volu	ntarily Resignation	gned			·		

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

12-Month Attendance	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Total
Consumer Services Committee		Dark			Dark						Dark			Absences
Andrew Ramirez, Chair												*P	P	0
Cathy Blin	*P		P	P		P	P	P	Р	P		Ab	P	1
Brian Gatus												*P	Ab	1
Gabriela Herrera	Ab		Р	Р		Ab	P	P	Ab	P		Ab	Р	4
Sharmila Brunjes												*P	P	0
Nicholas Abrahms	P		Р	Р		Р	P	Р	Р	P		P	Р	0
Rocio Sigala	Ab		Р	Р		P	P	P	Ab	P		Р	P	2
George Alvarado (Bd Intern)												*P	P	0
Erica Beall (VAC Rep)												*P	Р	0

P = Present Ab = Absent * = Joined Committee

12-Month Attendance	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Total
Executive Committee				Dark						Dark				Absences
Leticia Garcia	Р	Р	Ab		Р	Р	Р	Р	Р		Р	Р	Р	1
Lillian Martinez	Р	Р	Р		Р	Р	Р	Р	Р		Р	Р	Р	0
Ana Quiles	Р	Р	Р		Р	Р	Р	Р	Р		Р	Р	Р	0
David Coe											*P	Р	Р	0
Rocio Sigala											*P	Р	Р	0
Alma Rodriguez											*P	Р	Р	0

P = Present Ab = Absent

12-Month Attendance	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Aug-22	Total
Government & Community Relations Committee		Dark			Dark						Dark				Absences
Andrew Ramirez												*P	P	P	0
Cathy Blin	*P		P	P		P	P	P	P	P		Ab	P	P	1
Brian Gatus												*P	P	Ab	1
Nicholas Abrahms	P		P	P		P	P	P	P	P		P	P	P	0
Jordan Feinstock												*P	P	P	0
Sharmila Brunjes												*P	P	P	0
Rocio Sigala	Ab		P	P		P	P	P	Ab	Р		Р	P	P	2
Sylvia Brooks Griffin	*P		P	P		P	Ab	Ab	P	P		Р	Ab	P	3
George Alvarado (Bd Intern)												*P	Ab	P	1

P = Present Ab = Absent * = Joined Committee

12-Month Attendance	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	4/1/2022	4/18/2022	May-22	Jun-22	Jul-22	Aug-22	9/7/2022	9/20/2022	10/5/2022	Total
Nominating Committee		Dark	Dark						Dark	Dark	Dark	Dark				Absences
David Coe													Р	Ab	Р	1
Lillian Martinez													Р	Р	Р	0
Jennifer Koster													Р	Р	Р	0
Ana Quiles					*P	Р	Р	Р					Р	Р	Р	0
Suad Bisogno													Р	Р	Р	0

P = Present Ab = Absent * = Joined Committee

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

12-Month Attendance	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Total
Post-Retirement Medical Trust	Dark	Dark		Dark	Absences									
Ana Quiles			Р			Р			Р			Р		0
Alma Rodriguez												*P		0
David Coe												*P		0

P = Present Ab = Absent ned Committee * = Joined Committee

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

12-Month Attendance	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	31-Jan	Feb-22	Mar-22	Apr-22	2-May	23-May	31-May	Jun-22	Jul-22	Aug-22	Aug-22	Sep-22	Total
Strategic Planning	Dark	Dark							Dark				Dark	Dark				Absences
Sharmila Brunjes																	Р	0
Lety Garcia			Р	Р	Р	Р	Р	Р		Р	Р	Р			Р	Р	Р	0
Brian Gatus																	Ab	1
Lillian Martinez			Р	Р	Р	Р	Р	Р		Р	Р	Р			Р	Р	Р	0
Ana Quiles			Р	Р	Р	Р	Р	Р		Р	Р	Р			Р	Р	Р	0
Alma Rodriguez																	Р	0
Kimberly Bermudez (VAC Rep)															Р	Ab	Ab	2

P = Present Ab = Absent

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

12-Month Attendance	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Total
Vendor Advisory Committee				Dark										Absences
Suad Bisogno, Chair	Р	Р	Р		Р	Р	Ab	Р	Р	Р		Р	Р	1
Alex Kopilevich	Р	Р	Р		Р	Р	Р	Р	Р	Р		Р	Р	0
Andrea Devers												* P	Р	0
Bob Erio	Р	Р	Р		Р	Р	Р	Р	Р	Р		Р	Р	0
Cal Enriquez	Р	Р	Р		Р	Р	Р	Р	Р	Р		Ab	Р	1
Catherine Carpenter	Р	Р	Р		Р	Р	Р	Р	Р	Ab		Р	Р	1
Dana Kalek	Р	Р	Р		Р	Р	Р	Р	Р	Р		Р	Р	0
Daniel Ortiz	Р	Р	Р		Р	Р	Р	Ab	Р	Р		Р	Р	1
Don Lucas	Р	Р	Р		Р	Р	Ab	Р	Р	Р		Р	Ab	2
Erica Beall	Р	Р	Р		Р	Ab	Р	Р	Р	Р		Р	Р	1
Jodi Agnew Navarro	Ab	Р	Р		Р	Р	Р	Р	Р	Р		Р	Р	1
Kimberly Bermudez	Р	Р	Р		Р	Р	Р	Р	Р	Р		Р	Р	0
Lisa Williamsen												* P	Р	0
Nick Vukotic	Р	Р	Р		Ab	Р	Р	Р	Р	Р		Р	Р	1
Rosalyn Daggs												* P	Р	0

P = Present Ab = Absent

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

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

Fiscal Year 2022-2023

(Rounded to the nearest quarter of an hour.)

		Ju	l-22			А	ug-22		Sep-22				
Committee	Start	End	Total Time	Rounded	Start	End	Total Time	Rounded	Start	End	Total Time	Rounded	
New Board Member Orientation	3:00 PM	5:15 PM	02:15	2:15									
Administrative Affairs	6:15 PM	8:31 PM	02:16	2:15	6:02 PM	8:00 PM	01:58	2:00	6:02 PM	7:41 PM	1:39	1:45	
Board Meeting					6:30 PM	8:30 PM	02:00	2:00	6:30 PM	8:21 PM	1:51	1:45	
Consumer Services	6:05 PM	9:44 PM	03:39	3:45	6:01 PM	7:40 PM	01:39	1:45	7:42 PM	9:54 PM	2:12	2:15	
Executive	8:32 PM	10:56 PM	02:24	2:30	8:01 PM	10:23 PM	02:22	2:15					
Government and Community Relations (*)					6:03 PM	8:48 PM	02:45	2:45					
Government and Community Relations	9:51 PM	9:59 PM	00:08	0:15	7:42 PM	9:28 PM	01:46	1:45					
Nominating									5:34 PM	7:18 PM	1:44	1:45	
Nominating									5:33 PM	7:16 PM	1:43	1:45	
Strategic Planning					6:02 PM	8:45 PM	02:43	2:45					
Strategic Planning					6:03 PM	7:33 PM	01:30	1:30	6:04 PM	8:11 PM	2:07	2:00	
Post Retirement Medical Trust	5:30 PM	6:12 PM	00:42	0:45									
Vendor Advisory					9:30 AM	11:46 AM	02:16	2:15	9:31 AM	11:47 AM	2:16	2:15	
Total Hours/Month			11:24	11:45			18:59	19:00			13:32	13:30	

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

Fiscal Year 2022-2023

(Rounded to the nearest quarter of an hour.)

		C	Oct-22			ı	Nov-22		Dec-22			
Committee	Start	End	Total Time	Rounded	Start	End	Total Time	Rounded	Start	End	Total Time	Rounded
New Board Member Orientation												
Administrative Affairs												
Board Meeting												
Consumer Services												
Executive												
Government and Community Relations (*)												
Government and Community Relations												
Nominating	5:31 PM	7:17 PM	01:46	1:45								
Nominating												
Strategic Planning												
Strategic Planning												
Post Retirement Medical Trust												
Vendor Advisory	9:39 AM	11:47 AM	02:08	2:15								
Total Hours/Month			3:54	4:00		Ť				·		Ť

North Los Angeles County Regional Center

ALPHABET SOUP

AAIDD - American Association on Intellectual and Developmental Disabilities

AAP - Adoption Assistance Program

AB - Assembly Bill (State)

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

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

ARCA - Association of Regional Center Agencies

ARFPSHN - Adult Residential Facility for Persons with Specialized Healthcare Needs

BCBA - Board-Certified Behavior Analyst

CAC - Consumer Advisory Committee

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

CASA - Community Advocacy Services Association

CASHPCR - California Association of State Hospitals-Parent Councils for

the Retarded

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

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

CDE - 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 ServicesDHS - Department of Health Services (State)

DOE - Department of Education (State and Federal)

DOF - Department of Finance DOH - Department of Health

DOR/DR - Department of Rehabilitation

DPSS - Department of Public Social Services (County)

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

DSM - Diagnostic and Statistical Manual of Mental Disorders

DSP - Direct Support Professional

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

DRC - Disability Rights California (formerly Protection & Advocacy)

DTT - Discrete Trial Training
DVU - Disability Voices United

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

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

ELARC - Eastern Los Angeles Regional Center

EPSDT - Early and Periodic Screening, Diagnosis, and Treatment

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

FCPP - Family Cost Participation Program FDC - Fairview Developmental Center

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

FHA - Family Home Agency

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

GGRC - Golden Gate Regional Center

HCBS - Home and Community Based Services (Waiver)

HCFA - Health Care Financing Administration (now called CMMS)

HIPAA - Health Insurance Portability and Accountability Act

HOPE - Home Ownership for Personal Empowerment

HRC - Harbor Regional Center

HUD - Housing and Urban Development (Federal)

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

ICC - Integrated Community Collaborative/Intregadoras

ICF - Intermediate Care Facility

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 - Institutes of Mental Disease IMD - Individual Program Plan Ibb **IRC** - Inland Regional Center

KRC - Kern Regional Center

ISP

LACHD - Los Angeles County Health Department

- Individual Service Plan

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

Page 4

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

Page 6

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

Jam	ne:					
Com	nments	s:				
•	Did	the meeting follow the agenda?			Yes	No
•	Did	the meeting begin as scheduled?			Yes	No
	Did	the meeting end as scheduled?			Yes	No
•		you receive written or verbal inf ut the issues on the agenda?	ormation		Yes	No
•		the information received enable te informed decisions?	you to		Yes	No
	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 sp	pecify below)			
	Did	you feel prepared to participate	in the meeting		Yes	No
•	Wha	at would you like more informati	on about?			

NLACRC Public Meeting Attendance FY2022-23

NLACRC										
Public Meetings - 2022	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	Total Attendees
Aprendiendo Entre Nos /										
Learning Amongst Us	60	No Mtg	172	No Mtg	15					247
Alienza de Hombres	73	No Mtg	45	37	43					198
Cafecito Entre Nos	104	72	96	95	126	108				601
Caseload Ratio Public Meeting	No Mtg	41	No Mtg	No Mtg	No Mtg	No Mtg				41
Virtual Town Halls	159	9	27	4	31	31				261
New Consumer Orientation -										
English	31	No Mtg	No Mtg	No Mtg	25	No Mtg				56
New Consumer Orientation -										
Spanish	4	No Mtg	No Mtg	No Mtg	6	No Mtg				10
New Consumer (ES) Orientation -										
English	No Mtg	No Mtg	No Mtg	No Mtg	17	No Mtg				17
New Consumer (ES) Orientation -										
Spanish	No Mtg	No Mtg	No Mtg	No Mtg	0	No Mtg				0
Performance Contract Public										
Meeting	No Mtg	66				66				
SDLVAC	No Mtg	32	24	No Mtg	28	31				115
SDP Informational Meeting -										
English	7	No Mtg	13	8	0	7				35
SDP Orientation Meeting -										
English	29	17	25	21	15	11				118
SDP Informational Meeting -										
Spanish	No Mtg	No Mtg	0	0	8	No Mtg				8
SDP Orientation Meeting -										
Spanish	2	0	0	0	0	No Mtg				2
Supported Living Servies (SLS)										
Orientation	No Mtg	8				8				
Virtual Resource Fair	45	No Mtg				45				