



# North Los Angeles County Regional Center

Main 818-778-1900 • Fax 818-756-6140 | 9200 Oakdale Avenue #100, Chatsworth, CA 91311 | [www.nlacrc.org](http://www.nlacrc.org)

## MEMORANDUM

Date: October 31, 2024

To: **Strategic Planning Committee:** Vivian Seda, Jennifer Koster, Nicholas Abrahms, George Alvarado, Lety Garcia, James Henry, Juan Hernandez, Anna Hurst, Ana Quiles, Evelyn McOmie, Octavia Watkins – VAC Rep.

From: Kimberly Visokey  
Executive Administrative Assistant

Re: Information and materials for Monday, November 4, 2024 at 6:00pm  
Strategic Planning Committee Meeting

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Attached is information for the next committee meeting. Please review this information prior to the meeting.

**The meeting will be held remotely via Zoom. I will send you the Zoom access information via email and calendar invite.**

Please **click the link** below to join the Zoom meeting automatically.

### **Join Zoom Meeting**

<https://us06web.zoom.us/j/82452332196?pwd=2amv5ZSCVLGqONCbmmcANx6pzbS63b.1>

The information below is only needed if you are joining the meeting by phone or for using phone audio.

**Meeting ID: 863 7955 0153**

**Passcode: 130507**

If you have any questions, or if you are unable to attend the meeting, please contact us at [boardsupport@nlacrc.org](mailto:boardsupport@nlacrc.org). Thank you!

Attachments



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## STRATEGIC PLANNING COMMITTEE MEETING

Monday, November 4, 2024 – *Via Zoom*  
6:00 p.m.

- I. **Call to Order & Introductions**
- II. **Agenda (*Page 2*)**
- III. **Public Input – Agenda Items**
- IV. **Consent Items**
  - A. Approval of August 5, 2024 Minutes (*Page 3*)
- V. **Action Item**
  - A. Approval of updated Critical Calendar (*Page 4*)
  - B. Strategic Plan 2022-26 Metric Updates – Angela Pao-Johnson
    1. FY 2024-25 Q1 Update (*Page 7*)
  - C. Performance Contract Quarterly Update – Angela Pao-Johnson
    1. FY 2024-25 Performance Contract Metric Q1 Update (*Page 18*)
- VI. **Committee Business**
  - A. Employee Satisfaction Survey – Betsy Monahan
    1. Timeline Update (*Page 43*)
    2. Executive Summary – Survey Results (*Page 46*)
  - B. Review FY 2023-24 Strategic Plan Implementation Matrix Progress Report (*Page 56*)
- VII. **Review of Meeting Action Items**
- VIII. **Board Meeting Agenda Items**
- IX. **Announcements / Information / Public Input**
  - A. Next Meeting: Monday, February 3, 2025, at 6:00 p.m.
  - B. Committee Attendance (*Page 77*)
- X. **Adjournment**

North Los Angeles County Regional Center  
**Strategic Planning Committee Meeting Minutes**

August 5, 2024

**Present:** Nicholas Abrahms, James Henry, Juan Hernandez, Jennifer Koster, Cristina Preuss, Ana Quiles, Vivian Seda- Committee Members

Betsy Monahan, Arshalous Garlanian, Arezo Abedi, Ana Maria Parthenis-Rivas – Staff Members

Octavia Watkins – VAC Rep., Mark Wolfe – DDS Tech Advisor, Tresa Oliveri – DDS Tech Advisor, ,- Guests

**Absent:** George Alvarado, Lety Garcia, Anna Hurst, Evelyn McOmie

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**I. Call to Order**

Ana Quiles called the meeting to order at 6:01 pm.

**II. Public Input**

No public input

**III. Consent Items**

B. Approval of Minutes of May 6, 2024 Meeting

**M/S/C** (N. Abrahms/V. Seda) To approve the Minutes as presented.

**IV. Committee Business**

A. Annual Committee Orientation – Cristina Preuss

Cristina led the strategic planning committee orientation, reviewing policies, procedures, the committee's role, and the critical calendar. Cristina also provided an overview of the committee's focus on the strategic plan's five areas, quarterly data review, and the performance contract.

1. Committee Policies & Procedures and Bylaws
2. Review Committee Critical Calendar
3. FY 2024-25 Meeting Schedule

B. Election of a Committee Chair

Ana Quiles facilitated the election of Vivian Seda as chair and Jennifer Koster as alternate.

C. Employee Satisfaction Survey – Betsy Monahan

Betsy discussed the implementation of the Work Tango platform by the regional center for employee engagement. Betsy explained that the platform provides an interactive demo, survey, and insights, allowing for analysis of employee survey data at various levels. The team is currently working with the implementation group to determine the attributes or data pieces to capture from the survey respondents. Betsy also mentioned that the system requires a minimum of five responses for a particular analysis to deliver a result and that it can deliver pulse

surveys and conduct trend analysis. She emphasized that the system does not connect to the North LA regional center systems to maintain employee anonymity and shared that the standard 60-question survey covers topics such as job satisfaction, resource provision, company culture, and career potential.

Betsy discussed the upcoming employee survey for the North L.A. County Regional Center, emphasizing its purpose, duration, and the measures being taken to ensure its successful delivery. She also highlighted the importance of a positive work culture, stressing the need for mutual respect, inclusiveness, and open communication. Lastly, she underscored the significance of a healthy work-life balance, a clear understanding of job expectations, and a supportive team environment, as well as the necessity of well-functioning computer information systems for work success.

- D. Performance Contract Quarterly Update - Cristina Preuss  
Cristina provided updates on the performance contract for Q4 and the organization's activities and performance over the past year, as well as the strategic plan for the next fiscal year.
  - E. 2022-2026 Strategic Plan -3<sup>rd</sup> Quarter Status Update – Cristina Preuss  
Cristina reviewed the Strategic Plan – 3<sup>rd</sup> Quarter update as presented in the packet.
  - F. Semi-Annual Community Integrated Employment/Paid Internship Program (CIE/PIP) Report – Arshalous Garlanian  
Arshalous presented the competitive, integrated employment and paid internship program report for the fiscal year 24. The report showed a significant increase in both the number of individuals participating in paid internship programs and the funding allocated for these programs compared to the previous year. Arshalous also highlighted the intention to support individuals in transitioning from paid internships to competitive, integrated employment.
  - G. Annual Program Closures Report – Arshalous Garlanian  
Arshalous presented a summary of the annual program closures, noting that 22 programs decided to close for various reasons, including business decisions and the development of new residential setting.
- V. Review of Meeting Action Items**
- A. Send out employee satisfaction survey in September (Betsy Monahan)
  - B. Provide executive summary of employee satisfaction survey plan for next Board meeting (Cristina Preuss)
  - C. Implement new strategic plan reporting format for November meeting (Ana Maria Parthenis-Rivas)
  - D. Continue monitoring and reporting on competitive integrated employment and paid internship program participation (Arshalous Garlanian)
  - E. to review Q1 performance contract and strategic plan updates at November meeting (SPC)

- F. Continue recruitment efforts to meet hiring goals (Human Resources)
- G. Generate and analyze residential service provider survey on vacancies and needs (Arshalous Garlanian)

**VI. Board Meeting Agenda Items**

- A. 4<sup>th</sup> Quarter Community Integrated Employment/Paid Internship Program (CIE/PIP) Report
- B. Executive Summary of the Employee Satisfaction Survey
- C.

**VII. Announcements / Information Items / Public Input**

- A. Public Input
- B. Next Meeting: Monday November 4, 2024 at 6:00 pm
- C. Committee Attendance

**VIII. Adjournment**

Cristina Preuss adjourned the meeting at 7:25 p.m.

Submitted by:

*Kimberly Visokey*

Executive Administrative Assistant

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



**NLACRC  
Strategic Planning Committee  
CRITICAL CALENDAR  
FY2024-2025**

Month	Activity
<b>August</b>	<ul style="list-style-type: none"> <li>• Orientation for committee members</li> <li>• Committee elects a chairperson for the current fiscal year</li> <li>• Review policies &amp; procedures and meeting schedule</li> <li>• Review Performance Contract June Data</li> <li>• Review 2024 Performance Contract Metrics Status</li> <li>• Semi-Annual Reporting of CIE/PIP,</li> <li>• Annual Reporting of Program Closures</li> </ul>
<b>November</b>	<ul style="list-style-type: none"> <li>• Committee meeting</li> <li>• Review 2024 Performance Contract Metrics Status</li> <li>• 2022-2026 Strategic Plan -1<sup>st</sup> Quarter Status Update</li> <li>• Review the Results of the Employee Satisfaction Survey RFP</li> <li>• Review Semi-Annual Strategic Plan Implementation Matrix Progress Report</li> </ul>
<b>January</b>	<ul style="list-style-type: none"> <li>• Committee meeting</li> <li>• Present to the Board of Trustees the Results of the Employee Satisfaction Survey</li> </ul>
<b>February</b>	<ul style="list-style-type: none"> <li>• Review public policy performance measure year-end data</li> <li>• Review Draft Critical Calendar for next fiscal year</li> <li>• Review 2024 Performance Contract Metrics Status</li> <li>• Review Performance Contract Draft for FY2024</li> <li>• 2022-2026 Strategic Plan -2<sup>nd</sup> Quarter Status Update</li> <li>• Semi-Annual Reporting of CIE/PIP,</li> </ul>
<b>May</b>	<ul style="list-style-type: none"> <li>• Approve Draft Performance Contract for FY2024</li> <li>• Review 2024 Performance Contract Metrics Status</li> <li>• Confirm FY2024-25 Year End reports are posted on website</li> <li>• Select board meeting to present FY2024 performance objectives and outcomes</li> <li>• 2022-2026 Strategic Plan- 3<sup>rd</sup> Quarter Status Update</li> <li>• Review Semi-Annual Strategic Plan Implementation Matrix Progress Report</li> </ul>

**Commented [KV1]:** "Review the Results of" verbiage added

**Commented [KV2]:** Moved from August

**Commented [KV3]:** Verbiage changed

**Commented [KV4]:** Addition

**Commented [KV5]:** Addition

[ccal.2023\_24] Reviewed: 05.06.24/Approved: 06.12.2024

	A	B	C	D	E	F	G	H	I
1	Strategic Plan - Focus Area 1 - Diversity, Equity, Inclusion and Belonging (DEIB)								
2	Sub Area	Specific Strategy #	Specific Strategy	Dept/Position *Interim	Year 1-5	Goal/Objective	Metrics	FY 24-25 Q1 Update (Data from: July 1st - September 30th)	FY 23-24 Q4 Update (Data from: April 1st - June 30th)
3	Inclusion Focus Area 1.A	1.A.1	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.	DEIB Unit Santos Rodriguez Yaneth Parvool HR Sheila King	Year 1 (FY2023) - Upcoming policy Year 2 (FY2024)- Existing policy	Ensure policies and guidelines reflect DEIB values.	<b>Quantitative Metric:</b> Ensure all existing and upcoming policies reflect Inclusion, Equity, and Diversity values.	DEIB and HR departments continue to collaborate in reviewing all policies.	NLACRC's HR department is in the process of reviewing all policies.
4		1.A.2	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.	Administration Board Support	Year 2 (FY2024) - Existing Policy	Promote inclusion in composition, committees, and workgroups.	<b>Quantitative Metric:</b> Ensure Board Composition meets statutory requirements and both Board and committee Compositions reflect Inclusion, Equity, and Diversity values.	Board Composition does not meet white and legal statutory requirement. The Board and Committee Compositions do, however, reflect Inclusion, Equity, and Diversity values.  Comment: The Board is in the process of completing a recruitment plan, as required by DDS.	The Board did not meet the White and Two or More Races requirements.
5		1.A.3	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.	DEIB Unit/ Consumer Services Committee Santos Rodriguez Yaneth Parvool	Year 1 (FY2023)	Partner with stakeholders to reduce disparities and to develop data-driven solutions with metrics and timelines.	<b>Quantitative Metric:</b> Establish focus groups of what is working, what is needed; analyze Purchase of Service Expenditure data by service type and age, ethnicity, location; track the increase in purchase of services in diverse communities. <b>Qualitative Metric:</b> Surveys and feedback from the community and in partnership with support groups and community based organizations.	1) Focus groups of what is working, what is needed have been established. 2) Analysis of POS expenditure data by service type, age, ethnicity, and location been completed as shown in the POS presentation. 3) The increase in POS in diverse communities been tracked as shown in the POS presentation. 4) Survey and feedback have been conducted from the community and in partnership with support groups and community-based organizations.  Comment: Further collaboration to occur at annual POS presentation.	5 Focus Group sessions- 4 in person and 1 virtual were conducted in the following languages: Spanish, Armenian, Tagalog and Farsi. Community members provided feedback on translated materials as well as feedback on the challenges they face when seeking services and or supports from the regional center. A summary has been developed and will be shared during the disparity committee to further our efforts in reducing disparities.  For adult consumers, the self-advocacy group and LGBTQ+ support group have been recently established. We will continue to be part of the collaborative effort to establish focus group sessions in the future.  POS expenditure public meeting(s) were conducted via zoom. Information was provided in plain language, and interpretation was available in the top 5 languages of our communities: (Spanish, Armenian, Tagalog, Farsi and English). The meeting also featured small breakout rooms with interpretation in the preferred languages mentioned above. Breakout rooms were created to allow for public comment and or questions. In addition, a survey was offered in different languages, which were made available for 2 weeks before and after the public meeting.
6		1.A.4	Advocate at the state level for updated approaches to services and service delivery, system level equity, diversity, culturally competent planning, and POS Variance.	DEIB Unit/ Legucator Jose Rodriguez Chris Whitlock	Year 2 (FY2024)	Advocacy will occur at the systems level	<b>Quantitative Metric:</b> Add system level advocacy to NLACRC's legislative platform that reflects equity, diversity, and culturally competent planning; track number of events related to advocacy.	Number of events related to advocacy: July: August: September: 2  Comment: Contacted various legislative representatives to discuss the following: 1. Proposed bills for 2025 2. Housing 3. updates on ongoing efforts in the community.	Grassroots visits with Senators: April: 14 May: 0 June: 2
7		1.A.5	Explore Leadership Training for Self-Advocates/Family Advocates and Board Members to build stronger, diverse self-advocacy base to continually educate community and state leaders.	Administration/DEIB Supervisor Board Support Santos Rodriguez Jose Rodriguez	Year 1 (FY2023)	Self-Advocates and Family-Advocates will be trained to build a diverse community.	<b>Quantitative Metric:</b> Implement Leadership Training for Self-Advocates/Family Advocates and Board Members; track the number of trainings conducted. <b>Qualitative Metric:</b> Pre and Post Survey on knowledge related to leadership training.	1) Trainings/presentations within this period: 2 2) Feedback and discussion occurred within the two above trainings/presentations.	Consumer Advisory Committee hosted a Financial Abuse presentation by the Office of Clients Rights Advocacy (OCRA) on March 6, 2024  During CAC meetings the following presentations were provided: April / Emotional Well-Being and Stress – Samantha Crisanto, Department of Mental Health; July / NLACRC Employment Specialist - Kai Brennan July / NLACRC Emergency Management Specialist - Roy Ortega  Board Trainings included: April / Cultural Competency & Implicit Bias Training - Jaron Schwartz; May & June / Code of Conduct Training
8	1.B.1	Expand training for people served/families that support their education, their rights, and determining their role and relationship with the Regional Center.	Enhanced Supervisor Santos Rodriguez	Year 1-2 (FY2023 & FY2024)	Training and Information will be provided to people served/families.	<b>Quantitative Metric:</b> number of trainings offered. <b>Qualitative Metric:</b> Feedback/Survey on role and relationship with NLACRC.	1) Number of trainings and information provided to people served/families: July: 7 August: 9 September: 10  2) During trainings/workshops consumers and families provide their feedback about the trainings/workshops, and what topics they are interested in learning..	April-Town Hall - Individual Rights under Lanterman Act, Conservatorship, DHH Rights  Parent University has been translated into various languages (Farsi, Tagalog, Armenian and Spanish) and is in the process of being made available through LMS.	

	A	B	C	D	E	F	G	H	I
9	Training, Education & Awareness: Service Access & Equity Focus Area 1.B.	1.B.2	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.	<b>Case Management</b> Donna Rentsch	Year 2 (FY2024) - Add training position (Aging Adult Specialist)	Offer orientations/trainings on transitioning to adulthood.	<b>Quantitative Metric:</b> number of "new orientations" / trainings offered. <b>Qualitative Metric:</b> Survey on knowledge of transition/adult services.	1) Number of new orientations/trainings on transitioning to managing their own services offered: July: 0 August: 1 (Community Learning Forum - Options for Aging Parents) September: 1 (Parent Training Workshop - Cleveland High School)  2) Status of survey on knowledge of transition/adult services: No survey was conducted during this quarter.  The position of Aging Adult Specialist remains vacant at this time.	New NSO trainings have been established in LMS Monthly Community Learning Forums and Town Halls on various topics including Day Programs, College Support, Transitioning to Secondary Education Community Expos took place in May 2024 in AV and SFV Aging Adult Specialist position vacant as of Dec 2023 due to promotion
10		1.B.3	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.	<b>Chief Consumer Services Officer</b> *Evelyn McOmie <b>Case Management</b> Silvia Renteria-Haro	Year 2 (FY2024) - Need to complete Cultural Competency training & secure PCP Consultant/training	Staff will be trained on Person Centered Planning.	<b>Quantitative Metric:</b> Track the total number of Person Centered Plans created. <b>Qualitative Metric:</b> Survey that will include the usefulness of the plan.	1) Number of Person Centered Plans created: July: 23 August: 8 September: 17  2) No survey was conducted in this reporting period.	June 2024 NLACRC launched the IPP feedback survey to all service coordination staff to determine additional staff tools to develop for IPP writing.
11		1.B.4	Develop best practices training and training methods, including training assessments, for staff that builds trust and long-standing relationships between Regional Center staff and consumers with measurable results.	<b>Training Supervisor</b> Evan Ingber <b>DEIB</b> Santos Rodriguez	Year 2 (FY2024) - Empathy training	Expand on Inclusion, Equity, and Diversity to be empathic and sensitive	<b>Quantitative Metric:</b> staff empathy training and ongoing trainings that incorporate themes related to empathy. <b>Qualitative Metric:</b> Survey on satisfaction with experiences with regional center.	1) Staff empathy training and ongoing trainings that incorporate themes related to empathy:  DEIB Training, "Equity & Cultural Humility as Vehicles to Deepen Impact" focuses heavily on empathy and cultural humility. The train-the-trainer for the curriculum is currently being conducted.  2) Status of survey on satisfaction with experiences with the regional center: Surveys will be reviewed and reported for following quarter. Equity Praxis conducted surveys and is compiling the data to be shared with NLACRC.  Comment: No trainings conducted for this quarter. Trainings were completed in June 2024.	Quarterly DEIB Training "Equity & Cultural Humility as Vehicles to Deepen Impact" sessions were completed at the end of June 2024. Total of 4 sessions (3 in-person and 1 virtual). Sessions 2 and 3 are heavily focused on empathy, equity, access to services, and cultural humility as it relates to individuals served and families as well as our colleagues/staff.  Train-the-trainer program on "Equity & Cultural Humility as Vehicles to Deepen Impact" contains 8 NLACRC staff and is in progress with an estimated completion date of August 2024. These trainers will sustain training and provide it to our new hires as a required portion of the new hire learning path.
12	Outreach Focus Area 1.C.	1.C.1	Partner with diverse organizations in our community to help raise awareness of the Regional Center and its services and supports to ensure equal access and opportunity for those that may be eligible for Regional Center services. Outreach may include medical and maternity community and local clinics, school districts and early education programs, Los Angeles LGBT Center, and others.	<b>DEIB</b> Santos Rodriguez Yaneth Parvoel	Year 1-2 (FY2023 & FY2024)	Expand partnerships in the community that will help raise awareness and create access and opportunities.	<b>Quantitative:</b> track the number of organizations where there is partnership or outreach (point in time) prior to the implementation of the Strategic Plan and then track new partnerships or expansion of existing partnerships.	Number of new partnerships (shown below) or expansion of existing partnerships by location: SFV: 60 SCV: 6 AV: 24	SFV: 108 contacts, SCV: 16 contacts, AV: 41 contacts
13		1.C.2	Develop 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 (never too early!).	<b>Case Management</b> Elisa Hill <b>Public Information</b> Chris Whitlock	Year 1-2 (FY2023 & FY2024) - Video production is time consuming 12-18 months. - Coord. Parent Bureau requires staffing	NLACRC will continue to develop outreach materials, both electronically and physically to ensure access in areas where technology is limited.	<b>Quantitative Metric:</b> implement recommended strategies and recommendations for new outreach areas; track the number of materials and locations <b>Qualitative Metric:</b> Survey or Feedback from Community or Board Members at Government and Community Relations Committee or Consumer Services Committee.	1) Number of ES outreach postcards/materials by location: SFV: 83 Eng, 43 Spa SCV: 25 Eng AV: 30 Eng, 28 Spa  2) <u>Status/Updates:</u> 2.a. ES educational and testimonial video (PSA): Arlene Tapia and Erica Cabali, Early Start CSC's have completed their testimonials and it is currently being edited by PI.  2.b. Creation of a Parents Speaker Bureau: FRC is Early Start's parent speaker bureau. 324 referrals this quarter.  2.c. Target genetic counsel centers and services: SFV 1, AV 1  2.d. Feedback and/or updates are shared with the respective board committees during regularly scheduled meetings.	ES outreach Transition brochures in English and Spanish, regarding a child transitioning from Early Start to the school district by age 3, was created. It is distributed by CSC's and DEIB outreach specialists to the community. Early Start educational video is on the website titled 'early start orientation'. It is in English and Spanish. At the initial IFSP, families are referred to Family Focus Resource Center (FFRC). They are all parents of consumers and are experienced in providing supports and resources to our families. 341 families have been referred to FFRC during Q4. Regarding medical centers, we maintain a collaborative relationship with the NICU's in our catchment area and NLA holds a yearly roundtable meeting where NLACRC staff provide information regarding referral process and IFSP services to ensure that parents with medically involved babies coming from NICU's, have accurate information about regional centers. Outreach to other specialty clinics/centers are completed by an NLACRC DEIB outreach specialist and during Q4, 8 contacts/meetings took place.



A	B	C	D	E	F	G	H	I
14	1.D.1	Define a Multi-cultural Communication Plan that embraces target audience.	DEIB Unit Santos Rodriguez	Year 1 (FY2023)	Increase Awareness of Multi-Cultural Language Access Plan	<b>Quantitative Metric:</b> implement a Cultural Competency and Language Access Plan; track the number of materials and resources available by language. <b>Qualitative Metric:</b> Utilize existing feedback and surveys for areas of need and implement specific strategies and timelines for implementation.	1) Number of resources available by language: Disparity Committee members tasked with providing feedback on focus areas for target audience to include a focus on activities and resources on Emergency Preparedness, Competitive Employment Opportunities, and Healthcare Access. 1.a. Armenian: 1.b. Farsi: 1.c. Spanish: 1.d. Tagalog:  2) Status/Update: Summary shared at the Disparity Committee Meeting in May 2024. Materials and resources developed will be available in various languages and in a plain language.	Outreach language specialists conducted a series of focus sessions in each of the different languages ( Armenian, Farsi, Tagalog and Spanish) to receive feedback regarding publications that have been translated and what improvements we could have. A summary has been developed and will be shared during the disparity committee to determine future activities for the organization.  Various internal documents and publications have been translated into the following languages: Farsi, Tagalog and Armenian. Pending printing of consumer and family guides and service standards.  Please note: Consumer and Family Guides are now available in Farsi.
15	1.D.2	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. REWORDED	DEIB Unit Santos Rodriguez	Year 1 (FY2023) - Plain language consultant	Increase Staff Awareness on Language Access and Commonly Used Verbiage	<b>Quantitative Metric:</b> track the number of trainings, handouts, guidelines available for staff.	Number of trainings, handouts, and guidelines available for staff.  Comments: No trainings took place during this reporting period.	Staff (including new hires) completed the required cultural proficiency trainings at the end of June 2024. Total of 4 sessions (3 in-person and 1 virtual).  In addition, Train-the-trainer program on "Equity & Cultural Humility as Vehicles to Deepen Impact" contains 8 NLACRC staff and is in progress. This program will sustain training and provide it to our new hires.  Plain Language trainings - All 5 cohorts, which included 4 sessions per cohort were completed by select staff in May.
16	1.D.3	Create focus groups to review and evaluate major communication efforts for individuals and families to ensure materials are meeting the Multi-cultural Communication Plan. REWORDED	DEIB Unit Santos Rodriguez	Year 2 (FY2024)- Language Access & Cultural Competency Plan	Communications, brochures, pamphlets, and materials will be in easy to read format and be culturally sensitive.	<b>Quantitative Metric:</b> track the number of materials that are utilized by name. <b>Qualitative Metric:</b> Feedback from focus groups, Language Access Plan, or from NLACRC's Disparity Committee.	1) Number of materials utilized by name: Brochures: 1. Early Start 2. School Age 3. Transition 4. Adult 5. NLA Services and Descriptions 6. General Information 7. Consumer & Family Guide * Various internal forms  2) Status/Update on feedback from focus groups, Language Access Plan, or NLACRC's Disparity Committee: NLACRC's Disparity Committee has developed a plan to focus on the following areas for individuals and families served: Emergency Preparedness, Competitive Employment Opportunities, and Healthcare Access	Outreach language specialists conducted a series of focus sessions in each of the different languages ( Armenian, Farsi, Tagalog and Spanish) to receive feedback regarding publications that have been translated and what improvements we could have. A summary has been developed and will be shared during the disparity committee to determine future activities for the organization.  Future efforts include an ongoing evaluation of plain language translations in the following languages : Armenian, Farsi, Tagalog and Spanish.
17	1.D.4	Conduct quality assurance for a sampling Individual Program Plans for training opportunities. Case management for the position.	Case Management Jennifer Moore	Year 2 (FY2024)	Quality assurance	<b>Quantitative Metric:</b> Sample IPPs for training opportunities	Between 7/1/24-9/30/24: NLACRC has continued to conduct ongoing quality assurance audits during this period. Additionally: *A total of 33 onboarding CSCs have been enrolled in the Person Centered IPP Writing NSO that was implemented in January 2024. *Staff workgroups were created and are in the process of developing additional tools to support CSCs to write person centered IPPs *A total of 358 staff (consisting of CSCs, Case Management Supervisors, and 9 Community Services staff) completed a training on Person Centered Conversations (this does not include the makeup session, which was held on 10/2/24)	As of 6/30/24: NLACRC has continued to conduct ongoing quality assurance audits during this period, including: *Providing regular reminders to CSCs of the available reference tools to assist with IPP writings *A total of 74 onboarding CSCs have been enrolled in the Person Centered IPP Writing new staff orientation that was implemented in January 2024. *Continuing to audit IPPs that are written after the reference tools were rolled out, in an effort to compare the quality improvement, with a goal of auditing an additional 150 IPPs by 12/31/24. *Developed reference materials for Early Start CSCs to assist with writing person centered IFSPs.  During this time period, NLACRC has been in the process of developing additional QA activities which will begin in the next quarter.

	A	B	C	D	E	F	G	H	I								
1	<b>Strategic Plan - Focus Area 2 - Development &amp; Growth of an Engaged Workforce</b>																
2	<b>Sub Area</b>	<b>Specific Strategy #</b>	<b>Specific Strategies</b>	<b>Dept/Position</b>	<b>Year 1-5</b>	<b>Goal/Objective</b>	<b>Metrics</b>	<b>FY 24-25 Q1 Update (Data from: July 1st - September 30th)</b>	<b>FY 23-24 Q4 Update (Data from: April 1st - June 30th)</b>								
3	<b>Training and Development Focus Area 2.A.</b>	2.A.1	Provide formal training within each department – initial & ongoing training in skill development, education and system knowledge, etc. ensuring accuracy in communicating with individuals, families, and other key stakeholders regarding services and supports policies, procedures and changes to policies, as well as reflecting the organization’s core values.	Training Evan Ingber	Year 2 (FY2024)	Increase knowledge, skills, and abilities of all employees.	<b>Quantitative Metric:</b> Track number of training hours via Human Resource Scorecard/Learning Management System. <b>Qualitative Metric:</b> Training Evaluation Pre/Post Surveys	1. <u>Data Totals for FY24-25 (from July 1, 2024 through September 30, 2024):</u> FY24-25 Q1 Total Technical training hours: 3,521 FY24-25 Q1 Non-technical training hours: 2,979  2. Status of Pre/Post surveys: Sent to the Executive Team.	Data for FY23-24 (from April 1 through March 31, 2024): *FY23-24 Q4 Total Technical training hours: 10,357 *FY23-24 Q4 Non-technical training hours: 5,761  Data Totals for FY23-24 (from July 1, 2023 through March 31, 2024): *FY23-24 Total Technical training hours: 26,116 *FY23-24 Non-technical training hours: 17,848  *Pre/Post survey data sent to exec team.								
4		2.A.2	Develop consistency in onboarding procedures across departments.	Administration/Deputy Director Evelyn McOmie Training Evan Ingber	Year 1 (FY2023)	Consistency in Onboarding Process	<b>Quantitative Metric:</b> Formalize procedures, track current NSO classes per month. <b>Qualitative Metric:</b> Training Evaluation Pre/Post Surveys	1. Current NSO classes per month: July 2024: 37 August 2024: 37 September 2024: 34  2. Status of Pre/Post surveys: Sent to the Executive Team.	*Day 1 of NSO, staff continue to receive a packet via email of all NSO instructions to access training. Day 2 NSO Training Protocols with Training Unit implemented to go over mandatory training and NSO training learning path. Recap email sent to all trainers with checklist of mandated trainings to complete. (HIPAA, Harassment Prevention, COVID-19, National Voter Registration Act, Mandated Reporter - to applicable staff).								
5		2.A.3	Create/provide and market pathways for career advancement and professional development.	HR Betsy Monahan	Year 2-3 (FY2024 & FY2025)	Provide pathways for careers advancement and professional development.	<b>Quantitative Metric:</b> Create additional pathways for respective positions where feasible organizationally.	Collaborating with Columbus Organization to identify Case Management modifications for career pathing, including assessing required education/experience/skills for a variety of positions.	HR leadership participated in the Career Technical Education (CTE) Advisory Committee for LAUSD’s Division of Adult and Continuing Education (DACE); presented and advocated for a Social Service Coordination career path educational program as alternative experience for entry-level CSCs (and/or a new position not yet established).								
6		2.A.4	Align employee selection, onboarding, training, and evaluations with our organizational values.	HR Betsy Monahan	Year 1 (FY2023)	Promote organizational values in all facets of the onboarding process.	<b>Qualitative Metric:</b> Sample employees to see if they are aware of values; incorporate values into talent acquisition, performance management, and training.	Organizational values of the onboarding process have been promoted as follows:	FY23-24 Staff performance management evaluations identify seven (7) success factors. For those which tie into organizational values:  <table border="0"> <tr> <td><b>Factor #/Name</b></td> <td><b>Core Value Correlation</b></td> </tr> <tr> <td>4 - Relations with People</td> <td>Inclusivity/Belonging</td> </tr> <tr> <td>5 - Initiatives &amp; Judgment</td> <td>Empowerment</td> </tr> <tr> <td>7 - Meeting Work Commitments</td> <td>Creativity/Innovation</td> </tr> </table>	<b>Factor #/Name</b>	<b>Core Value Correlation</b>	4 - Relations with People	Inclusivity/Belonging	5 - Initiatives & Judgment	Empowerment	7 - Meeting Work Commitments	Creativity/Innovation
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4 - Relations with People	Inclusivity/Belonging																
5 - Initiatives & Judgment	Empowerment																
7 - Meeting Work Commitments	Creativity/Innovation																
7	2.B.1	Examine the impact of Healthy Work/Life Balance including remote and hybrid work options on job satisfaction and retention.	HR Betsy Monahan	Year 2 (FY2024)	Increase healthy work life balance and satisfaction.	<b>Quantitative Metrics:</b> Analysis of Health Assessment Index from Broker and retention metrics. <b>Qualitative Metric:</b> Satisfaction Surveys	Status/update Work Tango implementation:  Engagement survey deliverability tests, survey design, pre-launch communications, and employee/user upload to WorkTango system completed by 9/30/24. Survey results to be communicated in Q2.	Sent out to bid for external Satisfaction survey provider and system; selected WorkTango with plans to begin implementation and survey release in Q1 2025.									
8	2.B.2	Review technology to provide quantitative data metrics.	IT Michael Karpman	Year 2 (FY2024)	Assess current systems related to technology.	<b>Quantitative Metric:</b> Review metrics on existing technology to assess effectiveness and limitations.	Infrastructure Changes - <b>ISP</b> - QTR 1 No Activity  <b>VPN</b> - QTR 1 No Activity  <b>Training</b> - QTR 1 Continued educating users on latest cybersecurity threats by providing 3 Ninjo courses.  <b>IT Survey</b> QTR 1 No Activity  <b>IT Trainer</b> QTR 1 No Activity. Position was put on hold.	<b>Infrastructure Changes -</b> <b>ISP</b> - QTR 4 No activity  <b>VPN</b> - QTR 4 Sophos VPN client was discontinued and Palo Alto client has been installed for staff that is unable to use AOVPN solution  <b>Training</b> - QTR 4 Another Phishing test and remediation have been completed. Report was presented to the management team.  <b>IT Survey</b> QTR 4 Survey was conducted with more than double responders vs previous year. IT worked with individuals who responded negatively to understand what their issues are and help to resolve. Executive summary was presented to the Leadership Team.  <b>IT Trainer</b> QTR 4 No Activity. Position was put on hold.									

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9		2.B.3	Interview Staff to find manual-intensive workload areas that can be streamlined.	HR Betsy Monahan	Year 2 (FY2024)	Gather input from staff on how to streamline work	<b>Qualitative Metric:</b> Interview staff for workload efficiencies.	Employee Engagement Survey and Columbus Organization workgroups are identifying process inefficiency areas to analyze for process changes.	<b>Human Resources Process Review</b> - HR department team members interviewed this quarter to identify manual intradepartmental processes and suggestions for automation and/or digital improvement. HR will investigate use of secured and confidential digital filing storage structure applications for HR documents in FY 24-25.
10	Healthy Work/Life Balance Focus Area 2.B.	2.B.4	Support Supervisors to do their job more efficiently by eliminating manual labor.	<b>Administration/Deputy Director</b> Evelyn McOmie <b>Case Management Directors</b> Cristina Preuss Donna Rentsch	Year 2 (FY2024)	Gather input from leadership on how to streamline work	<b>Qualitative Metric:</b> Interview Supervisors for workload efficiencies.	<b>Monthly Meetings and Projects</b> - Ongoing monthly meetings are held to address project activity and upcoming needs. We gathered information and completed the following projects:  <b>Build Out</b> - IT technology has been completed in all three locations (AV/3 rooms, SCV/2 rooms, and SFV/2 rooms).  <b>Trainings conducted by Supervisors</b> - 44 eLearning modules in the LMS eLearning catalog developed to supplement and reinforce trainings for staff and support supervisors.  <b>Case Management - Dashboard and Reporting</b> - Office hours being implemented for management to help with learning curve on using the dashboard.  <b>Internal Processes</b> - Forms are going through revisions and collapsing some forms for multiple use. Project in progress.	<b>Monthly Meetings and Projects</b> - Ongoing monthly meetings are held to address project activity and upcoming needs. We gathered information and completed the following projects:  <b>Build Out</b> - SFV and AV Conference Rooms to be completed by the end of July 2024.  <b>Scrive</b> - Scrive training was rolled out to staff in May 2024 and is available in the eLearning catalogue in LMS. This training is part of the new hire learning path.  <b>Trainings conducted by Supervisors</b> - Additionally, trainings conducted by supervisors are being converted into LMS, no longer requiring it be part of the supervisor workload.  <b>Case Management - Dashboard and Reporting</b> QTR 4 - The PowerBI Dashboard has been published for supervisors to be able to track and pull data made available on the dashboard.  <b>Internal Processes</b> - Forms are being reviewed for workload efficiencies, and as result, will be streamlined for case management processes.
11		2.B.5	Practice quality hiring practices.	HR Betsy Monahan	Year 1 (FY2023)	Expand upon best practices for hiring	<b>Quantitative Metric:</b> Staff retention data <b>Qualitative Metric:</b> Survey from new hires about their onboarding experience.	Turnover rate for this quarter: 2.08%, a decrease of 0.72% from Q4 FY23-24, and a decrease of 4.10% from YOY Q1 FY23-24.  Onboarding experience survey status/update:	Turnover rate for 4th Quarter FY23-24 decreased to 2.8%.  Overall, NLACRC FY24 staff retention improved, year-over-year, by 3.7%.
12		2.B.6	Examine Exit Interviews in depth and create Action Plans from feedback, when possible.	HR Betsy Monahan	Year 1 (FY2023)	Enhance efforts to understand the factors related to exit and apply strategies to foster retention.	<b>Qualitative Metric:</b> review the themes and/or areas reported and apply strategies to address areas that need improvement.	Number of exit interviews conducted in this quarter: 16 Involuntary: 2 Other: 3 Relocation: 2 Retirement: 0 Personal: 11 Education: 0	20 Exit Interviews conducted: Misconduct (2), Other (3), Relocation (1), Retirement (2), Personal (12)
13		2.B.7	Hold an annual Employee celebration to share successes and accomplishments.	HR Betsy Monahan	Year 2 (FY2024)	Employee recognition	<b>Quantitative Metric:</b> Tracking the annual celebration. <b>Qualitative Metric:</b> Successes and accomplishments	The annual employee celebration for FY 24-25 will take place in May or June of 2025.	May 2024 - consolidated all-staff Employee Appreciation event with Service Awards recognition; over 600+ employees attended and recognized staff celebrating 5, 10, 15, 20, 25, and 30+ years of service.
14		2.C.1	Assess workload issues by job classifications and address workload imbalance.	HR Betsy Monahan	Year 1-2 (FY2023 & FY2024)	Review classifications and workload imbalances.	<b>Quantitative Metric:</b> Caseload Ratio Data and measure reduction in caseload by projected staff growth.	1. CSCs hired in this quarter: 40 CSCs hired 2. Open CSC positions in this quarter: 109 open CSC positions as of 9/30/24	*In Quarter 4, NLACRC hired 62 CSCs. As of June 30th, NLACRC had 162 open CSC Positions. Additional qualitative review of positions occurred to identify time-to-fill processing obstacles.
15		2.C.2	Explore team structure by areas of expertise, knowledge, skill-base, and/or experience.	HR Betsy Monahan	Year 1-2 (FY2023 & FY2024)	Assess current team structures	<b>Qualitative Metric:</b> Review current structures based on expertise, knowledge, skill base, and experience.	Status/update on assessment of current team structures throughout the organization:	*No activity this quarter

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16	Promoting Teams and Teambuilding Focus Area 2.C.	2.C.3	Utilize Information Technology to help build/support team structures.	IT Michael Karpman	Year 2 (FY2024)	Increase effective use of technology.	<b>Qualitative Metric:</b> Survey from staff on areas that could benefit from IT solutions	<b>Vendor Portal</b> - IT has taken the responses from the Pilot Group Vendors, Community Services and Accounting departments and made modifications. A group of 500 vendors have been invited to sign up for the Vendor Portal access and IT started the on-boarding process.	<b>Security Awareness</b> - Training continues with monthly Ninjo training and regular emails from IT regarding phishing attempts and other security risks that have been identified through security bulletins, in the news and through our very diligent staff.  <b>SANDIS Sandbox</b> - A training environment was developed in conjunction with DDS and SANDIS to allow for a training environment to assist in the training and testing of incoming staff. We are the only Regional Center that has such capability.  <b>Vendor Portal</b> - IT created a Vendor Portal utilizing SharePoint online to enable secure data sharing with our Vendors. Pilot group of vendors was identified and successfully tested the system for the delivery of POS Authorizations. After Go-Live, IT will work on implementing the same process for other file types.
17		2.C.4	Create training tools database to support supervisors in training their teams.	<b>Training</b> Evan Ingber	Year 1 (FY2023)	Promote training tools and resources for a growing workforce.	<b>Quantitative Metric:</b> Number of training tools available	1. Number of training tools found in NLACRC Training SharePoint: 552  2. Number of training tools found in eLearning Catalog: 44	*As of June 30, 2024 number of training tools are found in two places: <b>1) NLACRC Training SharePoint - 538 active resources (317 archived)</b> (PDF, Doc, Images, Shortcuts/Links, Excel, PowerPoints, Videos/MP4s)
18		2.C.5	Create opportunities for staff to be involved in cross departmental efforts.	<b>HR</b> Betsy Monahan	Year 2 (FY2024)	Solicit staff to be involved and to help improve processes.	<b>Qualitative Metric:</b> Survey staff	Columbus Organization conducting staff/supervisor integrated workgroups to identify process improvements in the areas of: - Office space utilization - Recruiting and retention processes - Case management caseload processes - Self-Determination Program (SDP) caseload processes	June 2024 - Conducted all-staff anonymous survey for input data for Workplace Violence Prevention Program plans for each office; HR received >140 responses and amended plans to reflect requests for training, communications media, etc.

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1	Strategic Plan - Focus Area 3 - Employment and Day Services								
2	Strategy	Specific Strategy #	Specific Strategies	Dept/Position	Year 1-5	Goal/Objective	Metrics	FY 24-25 Q1 Update (Data from: July 1st - September 30th)	FY 23-24 Q4 Update (Data from: April 1st - June 30th)
3	Training, Education and Awareness Focus Area 3.A.	3.A.1	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.	Employment Specialist	Year 1-2 (FY2023 & FY2024)	Increase awareness on potential opportunities	<b>Quantitative Metric:</b> 1) track the number of resources provided on employment and day services through News You Can Use, Social Media, and other employment-related publications; 2) track employment reports in Consumer Services Committee for increase in employment for individuals who want employment.	1) 30 Resources emailed to Employment Group & shared on Media platforms. 2) Employment reports were presented in the September 18, 2024 Consumer Services Committee meeting.	1) 28 Resources emailed to Employment Group & shared on Media platforms 2) Employment Reports tracked in Consumer Services Committee (CSC)
4		3.A.2	Support Individuals to sustain employment, once achieved, including helping individuals understand the benefit of employment support/service to help individuals succeed.	Training	Year 1-2 (FY2023 & FY2024)	Supporting individuals success in employment	<b>Quantitative Metric:</b> 1) review a sample of IPPs for support plans related to employment; 2) track the number of trainings or workshops on benefits of employment.	1) 147 IPPs reviewed this quarter, 134 included an employment goal. 13 did not include an employment goal. 2) Number of trainings/workshops on benefits of employment: 2 WIPA/SSI Webinar (English & Spanish) 7/17 ACRE Training 8/26-8/27 ACRE CES Course 9/16	1) 178 IPPs reviewed this quarter; 134 included an employment goal. 44 did not include an employment goal. 2) Workshops Offered Work is for everyone online training 5/20/24 BuildabilityxSCDD Employment Seminar 4/24/24 DOR Look and Learn 4/23/24
5		3.A.3	Continue to train staff on employment/day opportunities, assessing of employment goals, creative planning and personal growth (life skills, vocational skills, education, job development and growth) for each individual - transition age youth (~14 years of age) through retirement.	Employment Specialist	Year 1-2 (FY2023 & FY2024)	Continued focus on staff training.	<b>Quantitative Metrics:</b> 1) track number of staff trainings and 2) plans created within the IPP.	1) Number of employment staff trainings: 2 WIPA/SSI Webinar (English & Spanish) 7/17/24 2) Number of addendums added to IPPs relating to employment: 120 addendums added to IPPs relating to employment plans/goals	1) Employment staff trainings DOR Look and Learn 4/23/24 Work is for everyone online training 5/20/24 2) 124 Addendums added to IPP's relating to employment plans/goals
6	Developing Employer and Community Connections Focus Area 3.B.	3.B.1	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.	Employment Specialist	Year 1-2 (FY2023 & FY2024)	Partner with local businesses	<b>Quantitative Metric:</b> 1) track the number of partnerships or contacts made; utilize labor market data gathered by Department of Rehabilitation for metrics; track the publications provided. <b>Qualitative Metric:</b> Survey employers to see if they are knowledge of the benefits of hiring consumers.	1) Number of partnership contacts: 113 partnership contacts made at Fall Vendor Fair 7 local business partnerships made 2) Status of survey of employers for knowledge of benefits of hiring consumers: N/A	Partnership Contacts: 7  SCV Mayors Committee. Meeting April 11th to review March employment event as well as discuss potential collaboration opportunities between organizations.  IRI Acre Training Collaboration. IRI to provide Acre training to NLACRC vendor community funded by NLACRC to enhance CCP service.  Local Partnership Agreement. Met on April 24th and discussed employment
7		3.B.2	Help connect the Regional Center with employers in our local communities and educate employers on how NLACRC and people served can benefit their company and their workforce.	Employment Specialist	Year 1-2 (FY2023 & FY2024)	Increase contacts and partnerships with employers	<b>Quantitative Metric:</b> track the number of partnerships or contacts made, including the Chamber of Commerce.	1) Number of partnerships or contacts made: 7	In Person Business Community Outreach  Inclusion Matters by Shanes Inspiration. Discussed potential partnership and vendorization for employment services.
8		3.B.3	Utilize the 1-year workforce grant to hire a specialist level position to do outreach activities in the business community about the benefits of hiring individuals with developmental disabilities and support development of relationships between providers and community employers.	Employment Specialist	Year 1-2 (FY2023 & FY2024)		<b>Quantitative Metrics:</b> track the number of employment outreach activities, employment related workshops, and calls to workforce employment hotline.	1) Number of employment outreach activities/workshops: 30 resources shared 2) Number of calls to workforce employment hotline: 98	28 resources shared 26 calls to employment hotline
9		3.B.4	Increase utilization of incentives to promote employment and vocational outcome.	Employment Specialist	Year 1-2 (FY2023 & FY2024)	NLACRC will increase utilization of incentives to promote employment and vocational outcomes.	<b>Quantitative Metrics:</b> 1) track the number of individuals who are competitively employed; 2) track vendors who receive CIE incentives; 3) sample IPPs to ensure goals/outcomes include vocational goal related to desired work and plan to include training and supports.	1) Numbers of individuals who are competitively employed: - Metric cannot be measured as written. NLACRC is assessing current database functionality 2) Number of vendors who receive CIE incentives: - #4 vendors receiving CIE incentives this quarter 3) Number of IPPs reviewed:  - #147 IPPs reviewed this quarter, 134 included an employment goal. 13 did not include an employment goal.	1) Metric cannot be measured as written. NLACRC is assessing current database functionality 2) 7 vendors requesting CIE incentives this quarter 3) 1) 178 IPPs reviewed this quarter; 134 included an employment goal related to desired work and plan for training and supports.

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10	Improve Information and Needs Assessment Focus Area 3.C.	3.C.1	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.	Employment Specialist	Year 1-2 (FY2023 & FY2024)	Hosting events and partners	<b>Quantitative Metric:</b> track the event(s) held, participation, and resources shared. <b>Qualitative Metric:</b> seek feedback on if the event lead to job creation or development.	Number of events held, participation, and/or resources shared: - #30 resources emailed to Employment Group & shared on Media platforms. - Diversity and Unity Festival 7/28/24 - Pleasant View Employment Group (PEG) Meeting 9/18/24 - Buildability Employment Services Seminar 7/11/24 - 2 WIPA/SSI Webinar 7/17/24 37 participants  Feedback on if the event led to job creation or development: WIPA/SSI Webinar 7/17/24 - 35% of attendees reported great to excellent understanding - 60% of attendees reported good understanding - 5% of attendees reported unsatisfactory understanding	1) 28 Resources emailed to Employment Group & shared on Media platforms.  DOR Look and Learn 4/23/24 86 participants  2) No feedback provided
11		3.C.2	Explore utilization of the 1-year workforce employment grant staff to develop and implement an employment "hotline".	Employment Specialist	Year 1-2 (FY2023 & FY2024)	Service Access and Equity Workforce Grant	<b>Quantitative Metrics:</b> number of calls to the hotline	Number of calls to the hotline:  98 calls to hotline	Service Access and Equity Workforce Grant Closed April  26 calls to the hotline
12	Resource and Fund Development Focus Area 3.D.	3.D.1	Connect people served/families with Small Business Administration (SBA), Los Angeles County (or other vendors) workshops on starting your own business.	Employment Specialist	Year 1-2 (FY2023 & FY2024)	People served/Families/Vendors will partner with Small Business Administration	<b>Quantitative Metric:</b> track the number of contacts with SBAs and number of workshops on starting businesses .	Number contacts with SBAs: No update  Number of workshops on starting businesses: No update	No update
13		3.D.2	Collaborate with service providers and partners to increase independent employment by supporting, where possible, providers to explore grant opportunities for Micro Enterprises.	Employment Specialist	Year 1-2 (FY2023 & FY2024)	Promote Microenterprises	<b>Quantitative Metric:</b> track the number of trainings or connections with providers; track grant opportunities for Microenterprises.	Number of or connections with providers: No update  Number or status of grant opportunities for microenterprises: No update	No update

Strategic Plan - Focus Area 4 - Health and Wellness									
1	A	B	C	D	E	F	G	H	I
2	Sub Area	Specific Strategy #	Specific Strategy	Dept/Position	Year 1-5	Goal/Objective	Metrics	FY 24-25 Q1 Update (Data from: July 1st - September 30th)	FY 23-24 Q4 Update (Data from: April 1st - June 30th)
3	Training, Education and Awareness Focus Area 4.A.	4.A.1	Provide training on general mental health conditions, generic resources and crisis services to individuals and families, Regional Center staff, providers and other community stakeholders and partners.	HR Betsy Monahan	Years 1-2 (FY 2023 & FY2024)	Training on health and wellness topics, generic resources, and crisis services for staff and community partners, including crisis services	<b>Quantitative Metric:</b> number of trainings offered/attendance. <b>Qualitative Metric:</b> pre and post survey	- Provided Back-to-School Planning toolkit for busy parents - online resource delivered August 2024. - Working with NLACRC's benefit brokers, began development of a Well-Being Resource guide to highlight well-being resources to both existing employees and new hires accepting offers of employment.  Status on pre and post survey: Survey launch date October 2024; additional reporting to be provided during Q2 update.	Due to Staff transition, no active activity for Q4, but planning began for Q1 2025 topics including, but not limited to:  1. Meditation basics 2. Summer heat safety 3. Back-to-School Planning
4		4.A.2	Engage individuals/families in mental health discussions through expanding support groups with additional support provided, if requested, via guest speaker, etc.	HR Betsy Monahan	Years 1-2 (FY 2023 & FY2024)	Promote discussions with supports groups and individuals served on health and wellness topics.	<b>Quantitative Metric:</b> number of support groups or trainings that were relevant to health and wellness. <b>Qualitative Metric:</b> Survey from support groups for feedback.	Number of support groups or trainings relevant to health and wellness: Due to HR's focus on Special Contract Language remediation efforts, this activity was deferred for Q1.  Survey launch date October 2024; additional reporting to be provided during Q2 update.	HR began initial planning conversations with ComPsych (a.k.a. Guidance Resources) to provide health/wellness training topics in Q1 2025.  Financial matters (money stress) impact health/wellness concerns, therefore plans for "Financial Wellness" seminar scheduling to occur for Q1 2025 as well.
5		4.A.3	Connect with Family Focus Resource Center (CSUN), State Council on Developmental Disabilities (SCDD), others on existing Health & Wellness resources that can be used in communications for <i>News You Can Use</i> , social media townhall, Cafecito training opportunities or other.	HR Betsy Monahan	Years 1-2 (FY 2023 & FY2024)	Include health and wellness component into grassroots outreach efforts and partnerships with stakeholders.	<b>Quantitative Metric:</b> number of outreach activities or trainings specific to health and wellness, number of materials provided. <b>Qualitative Metric:</b> pre and post survey	Number of outreach activities or trainings related to health and wellness: Due to HR's focus on Special Contract Language remediation efforts, this activity was deferred for Q1.  Number of materials provided: see above  Status of pre and post survey: Survey launch date October 2024; additional reporting to be provided during Q2 update.	Activity to resume in Q1 2025.
6		4.A.4	Develop a taskforce or committee/mental health (or explore existing taskforces).	HR Betsy Monahan	Years 1-2 (FY 2023 & FY2024)	Develop or join existing taskforce or workgroup related to health and wellness.	<b>Quantitative Metric:</b> implement or join an existing taskforce and track the number of meetings. <b>Qualitative Metric:</b> Analyze themes and implement relevant strategies.	As part of Columbus Group consulting engagements, employee workgroup sessions were established and conducted (starting Sept 2024) at Antelope Valley and Santa Clarita Valley locations on the topics of workspace utilization and employee hybrid work schedules.	Due to Staff transition, entry to the LADMH Advisory Taskforce was delayed, with pursuit now targeted for Q1 2025.
7		4.A.5	Explore the feasibility of creating a staff position of mental health specialist position to facilitate engagement with case management to help raise awareness of mental health issues, early warning signs/needs, etc.	HR Betsy Monahan	Year 4-5 (FY2026 & FY 2027)	TBD	<b>Quantitative Metric:</b> Hiring of Mental Health Specialist	Update on status of hiring Mental Health Specialist: Given focus on CSC, Lead Trainer CSCs, and other specialty positions, this recruitment is still deferred until late FY2025.	*Currently Mental Health Specialist work is being completed by the HR Dept. *Goal to hire Mental Health Specialist by FY 2026-2027.
8		4.A.6	Promote use of Human Resource Employee Assistance Program (EAP) services to support employee health and wellness.	HR Betsy Monahan	Year 1 (FY 2023) - Open Enrollment	Promotion of Employee Assistance Program	<b>Quantitative Metric:</b> track the number related to EAP.	2024: First Half (Jan 1 - Jun 30) usage = 17 Combined Access visits  - Promoted usage of ComPsych EAP online sources by sharing EAP's "Back to School" toolkit for busy working parents in August 2024. - Began design of a Well-Being Resources guide with a dedicated section to the EAP provider and the instructions for access and use.	EAP carrier reports usage on calendar year basis. "Combined Access" = confidential EAP counseling, FamilySource childcare assistance, FinancialConnect assistance, Health/Wellness assistance, and LegalConnect (legal forms/attorney assistance)  2022: 25 Combined Access visits 2023: 37 Combined Access visits; 48% increase over 2022 2024: First Half data report pending; not yet available at press time

Strategic Plan - Focus Area 5 - Housing									
Sub Area	Specific Strategy #	Specific Strategy	Dept/Position	Year 1-5	Goal/Objective	Metrics	FY 24-25 Q1 Update (Data from: July 1st - September 30th)	FY 23-24 Q4 Update (Data from: April 1st - June 30th)	
Training, Education and Awareness Focus Area 5.A	5.A.1	Train people served/families of all housing options and generic services.	Community Services Housing Specialist (Vacant)	Year 1 (FY 2023) and Ongoing	The community will be informed of Regional Center housing options, generic resources and supports available for housing.	<b>Quantitative Metrics:</b> Number of housing options, generic resources and supports available for information sessions hosted for community engagement and support groups (4 informational sessions for Year 1, 2 informational sessions annually for Years 2-5. <b>Qualitative Metric:</b> Pre and Post Surveys on knowledge and understanding of residential living options and resources.	NLACRC is working on a video production series that will highlight the various living options vendored by NLACRC. We are currently in the planning phase with the video production agency.	NLACRC Expo on 5/11/2024 in Antelope Valley and on 5/17/2024 in San Fernando Valley with Housing Section consisting of resources and vendors on housing options and breakout panel presentation. Community Learning forum held in May 2024 on the topic of residential services. This position is still vacant.	
	5.A.2	Train CSCs to ensure staff are aware of all housing options and generic services that support housing choices; and that CSCs engage in milestone planning that supports people served as they increase their independence. Milestone planning may include identifying needed resources, skill development, financial considerations, different housing options, and milestones.	Community Services Arsho Garlanian	Year 1 (FY 2023) and Ongoing	All Case Management staff will be competent in facilitation and education on the options of housing.	<b>Quantitative Metrics:</b> All Service Coordinators, Specialists, Case Management Leadership, Inclusion, Equity, and Diversity Staff, including Parent and Family Support Specialists, will receive training (8 Trainings Year 1, 4 Training Years 2-5 on a quarterly basis for new staff, and 1 annual training for all case management.) <b>Qualitative Metric:</b> Pre and Post Surveys on knowledge and understanding of residential living options and resources.	NLACRC had 55 new hires during this quarter who went through New Hire orientation. The LMS training modules on housing options including the various types of residential home settings and Supported Living Services are part of the onboarding of new hires and available for all case management staff ongoing.	New Hires are provided with LMS training modules on housing options including the various types of residential home settings and Supported Living Services. These modules are available for all staff to access once training is complete and can be used for reference.	
	5.A.3	Utilize outreach – brochures, NLACRC.org or other– to increase awareness of information on housing options and generic supports for pursuing housing goals.	Community Services Arsho Garlanian Public Information Chris Whitlock	Year 1 (FY 2023) and Ongoing	Disseminate information on housing options, generic resources and supports available for housing in multiple languages that reflect NLACRC's community.	<b>Quantitative Metrics:</b> Publication of informational materials and resources related to housing on NLACRC website and to create a section on the website to promote housing options, resources, and availability. <b>Qualitative Metric:</b> Survey to assess if the information is useful and resulted in increased knowledge of resources and supports.	1. NEW WEBSITE ANALYTICS STARTED AUGUST 20, 2024 <a href="https://www.nlacrc.org/consumers-families/transition/affordable-housing/">https://www.nlacrc.org/consumers-families/transition/affordable-housing/</a> Page views: 15 <a href="https://www.nlacrc.org/consumers-families/adults/affordable-housing/">https://www.nlacrc.org/consumers-families/adults/affordable-housing/</a> Page views: 33 Community Services continues to provide PI with additional resources as they are discovered. 2. Public Information has begun to track number of visits to the housing section		
Impacting the Availability of Housing Focus Area 5.B	5.B.1	Support and work with ARCA to support legislation that provides for greater housing options , including Additional Dwelling Units (ADUs), for people we serve.	Community Services Arsho Garlanian Public Information Chris Whitlock DEIB Jose Rodriguez	Year 1 (FY 2023) and Ongoing	Collaborate and partner with ARCA to sponsor and address legislation to advocate for increased housing options.	<b>Quantitative Metric:</b> Add Housing to legislative priorities	Public Information has a Legislative Specialist who will be developing a communication plan focusing on housing priorities with elected officials. Public Information and Community Services are also combining resources to ensure that NLACRC's efforts are in sync.	We continue to conduct legislative grassroots visits and the topic of housing options is included.	
	5.B.2	Advocate for updates for Community Care Licensing through Department of Social Services to better take advantage of housing options.	Community Services Arsho Garlanian	Year 1 (FY 2023) and Ongoing	Collaborate and partner with Community Care Licensing to discuss regulations .	<b>Quantitative Metric:</b> Quarterly Partnership Meetings with Community Care Licensing (CCL).	Quarterly partnership meeting held in July with Community Care Licensing (CCL) to discuss applicable changes to regulations.	Quarterly partnership meeting held in April 2024 with Community Care Licensing (CCL) to discuss applicable changes to regulations.	
	5.B.3	Continue to apply for housing development funding through the Department of Developmental Services (DDS), including for use of development of Family Home Agencies (FHA)s, as needed and available.	Community Services Arsho Garlanian	Year 1 (FY 2023) and Ongoing	Secure CRDP Funding for Housing Development from DDS.	<b>Quantitative Metrics:</b> Number of proposals submitted by NLACRC, number of awards granted by DDS to NLACRC, and total number of new developments. <b>Qualitative Metric:</b> Identify Specialized Housing needs through survey and feedback.	Based on the annual needs survey and community input, NLACRC submitted the FY 24-25 CPP/CRDP funding proposal.  Number of proposals: Submitted by NLACRC: # 11 (EBSHs, ARPSHN, Substance Abuse, Forensic SRF,  Behavioral Day Program, Service Provider training Awards granted by DDS: # 4 approved; 7 projects pending approval Total number of new developments: 9 current projects from previous FY funding.	NLACRC published RFP for FY 23/24 CPP/CRDP Proposal Projects. NLACRC conducted Applicants Conference, Interviews, and awarded project funding for the selected candidates. The following projects were selected and awarded funding: HDO for ARFPSHN and HDO EBSH.	
5.C.1	Explore creating a position for a Community Housing Liaison to be a bridge between our community, housing experts and internal needs.	Community Services Arsho Garlanian	Year 2 (FY2024) (if supported by operations budget)	Hire a new position to liaison with community, experts, and with staff.	<b>Quantitative Metric:</b> Recruitment and Fulfilling position	We continue to collaborate with the placement team on living options available within our catchment area.	As we currently have a placement unit, the community services department continues to collaborate with the placement team on living options available within our catchment area.		



	A	B	C	D	E	F	G	H	I
10	Innovation Focus Area 5.C	5.C.2	Collaborate creatively with providers to find solutions to housing options and financial availability.	Community Services Arsho Garlanian	Year 1 (FY 2023) and Ongoing	Develop a Housing Committee comprised of consumers, families, advocates, and providers to collaborate on innovative solutions to the housing needs and resources.	<b>Quantitative Metric:</b> Number of implemented solutions	Community Services continues to participate in VAC Adult Committee and part of the ARCA Housing Committee meetings.	We will explore the implementation of a goal that will include input from parents and consumers in addition to the VAC Adult Committee discussion of housing and Community Services department staff's attendance at the ongoing ARCA Housing Committee meetings.
11		5.C.3	Collaborate with providers to create provider succession planning and retain housing options within our community.	Community Services Arsho Garlanian	Year 1 (FY 2023) and Ongoing	Implement within the Housing Committee .	<b>Qualitative Metric:</b> Survey to seek feedback from providers on succession planning.	The residential service provider survey is at the final stages of review before we publish. We plan to send out to all residential service providers in next quarter.	We are generating a residential service provider survey to collect data on current vacancies, training and support needs, and plan to ask the providers about their interest in succession planning.
12		5.C.4	Develop and promote knowledge and awareness of housing trusts, housing endowments and other.	Community Services Arsho Garlanian	Year 2 (FY2024)	Collaboration with Board of Trustees and Parents on possible housing endowments .	<b>Quantitative Metric:</b> Number of housing options, trusts, or endowments	Please consider revising this goal due to unavailable data to collect based on the recommended metric.	Please consider revising this goal due to unavailable data to collect based on the recommended metric.



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Public Policy Performance Measure (Required)		Statewide Average June 2022	NLACRC June 2022	Statewide Average June 2023	NLACRC June 2023
1.	<b>Number and percent of Regional Center consumers in institutional settings, such as state hospitals, Developmental Centers, etc.</b>  <b>Goal:</b> Decrease the number of individuals who reside in institutional settings.	0.06% 233	0.04% 13		

**ACTIVITIES TO ADDRESS MEASURE/GOAL 1:**

- ◆ NLACRC was able to develop contracts for seven (7) properties to have available residence options for our consumers.
- ◆ The goal is to have more choices for consumers transitioning from state hospitals and developmental centers.

**1.1 Resource Development (Community Services)**

Development #1 FY 20/21

**Name of Provider:** Elwyn California

**Type:** Specialized Residential Facility (SRF)

**Number of Consumers to Be Placed:** 4

Status for period as of 6/30/24: Pre-licensing visit and license pending.

Status for period as of 9/30/24: Licensed effective 9/19/24. Pending executed contract & orientation.

Development #2 FY 20/21

**Name of Provider:** G&C Adult Residential Facility Forbes

**Type:** Specialized Residential Facility (SRF)

**Number of Consumers to Be Placed:** 4

Status for period of 6/30/24: **Project Complete**

Development #3 FY 21/22

**Name of Provider:** G&C Adult Residential Facility

**Type:** Specialized Residential Facility (SRF)

**Number of Consumers to Be Placed:** 4

Status for period of 6/30/24: License and program design being finalized.

Status for period as of 9/30/24: Licensing effective 8/15/24. Pending final program design & contract.

Development #7 FY 22/23

**Name of Provider:** Brilliant Corners

**Type:** Adult Male - Enhanced Behavioral Support Home (EBSH) (delayed egress)

**Number of Consumers:** 4

Status for period of 6/30/24: Architectural plans in week 18 of plan check with County.

Status for period as of 9/30/24: Permits issued by LA County Building & Safety on 9/10/24. Demolition & construction underway.

Development #8 FY 22/23

**Name of Provider:** Free to Be

**Type:** Children's Group Home Level 4I

**Number of Consumers:** 4

Status for period of 6/30/24: Construction completed. Passed dire inspection. License application and program design in review.

Status for period as of 9/30/24: Pending license and vendor contract

Development #9 FY 23/24

**Name of Provider:** Brilliant Corners

**Type:** Adult Residential Facility for Persons with Special Healthcare Needs (ARFPSHN)

**Number of Consumers:** 5

Status for period as of 9/30/24: Escrow closed on 9/26/24



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Development #4 FY 21/22

**Name of Provider:** W&W Joint Ventures  
**Type:** Specialized Residential Facility (SRF)  
**Number of Consumers:** 4  
Status for period of 6/30/24: **Project Complete.**

Development #5 FY 22/23

**Name of Provider:** Brilliant Corners  
**Type:** Children Enhanced Behavioral Support Home (EBSH)  
**Number of Consumers:** 4  
Status for period of 6/30/24: Property identified. Housing Acquisition Request (HAR) approved by DDS. Escrow closed 6/24/24.  
Status for period as of 9/30/24: Architectural plans submitted to LA Building & Safety for approval.

Development #6 FY 22/23

**Name of Provider:** Brilliant Corners  
**Type:** Adult Male - Enhanced Behavioral Support Home (EBSH)  
**Number of Consumers:** 4  
Status for period of 6/30/24: Escrow closed 4/25/24. Architectural plans submitted to LA County for approval 5/27/24.  
Status for period as of 9/30/24: Week 17 of plan check approval with LA County Dept of Building & Safety.

Development #10 FY 23/24

**Name of Provider:** Brilliant Corners  
**Type:** Enhanced Behavioral Supports Home (EBSH) for Adults (Co-ed)  
**Number of Consumers:** 4  
Status for period of 6/30/24: Start-up contract awarded for acquisition and renovation of home.  
Status for period as of 9/30/24: Property search underway.



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Public Policy Performance Measure (Required)		Statewide Average June 2022	NLACRC June 2022	Statewide Average June 2023	NLACRC June 2023
2.	<b>Number and percent of minors living with families (includes own family, foster family, and guardian).</b> <ul style="list-style-type: none"> <li>• Own home - parent/guardian</li> <li>• Foster family</li> </ul> <b>Goal:</b> Maintain the percentage of children who reside with families in their home.	99.60%	99.71%		
		196,913	16,668		
		96.94%	95.35%		
		191,657	15,939		
		2.66%	4.36%		
		5,256	729		

**ACTIVITIES TO ADDRESS MEASURE/GOAL 2:**

- In order to support families of young children, trainings for service coordinators have been developed to provide this information to families during IPP planning.
- By reinforcing their case management skill, and enhancing person centered approach, consumers and parents will be able to have resources and information regarding services as supports within the regional center system.
- Some topics for trainings are Service Standards, Person Centered Planning 1/2/3, Lanterman Act, Self-Determination Program.
- As service coordinators receive trainings, NLACRC also provides learning opportunities for families and consumers through a series of Town Hall meetings/presentation, outreach, community engagement events, and dissemination of materials (Consumer & Family Guides, Common Services Brochures, Insert of Service Definitions, etc.).

**2.1 New Staff Orientation/Training (Training)**

**Training:** New Staff Orientation/Training Classes

**Frequency:** Monthly

**Metric:** Number of new staff trained within first six months of employment.

**Class names:** Service Standards, Person Centered Planning, Lanterman Act Training

Status 7.1.24-9.30.24:

	<u>Service Standards:</u>	<u>CDER/Person Centered Planning</u>	<u>Person Centered Planning 2:</u>
July:	1	11	11
August:	0	7	7
September:	0	13	12

	<u>Person Centered Planning</u>	<u>Lanterman Act:</u>	<u>Self Determination Program:</u>
July:	11	10	11
August:	6	6	7
September:	11	0	12

**2.2 Dissemination of Information (Public Information)**

**Event:** Town Hall – (insert name of respective TH below which took place within the current).

**Metric:** Increase Number of Attendees

Status for period of 4/1/24-6/30/24: N/A

Status 7.1.24-9.30.24: Emergency Preparedness for Individuals with disabilities and those who support them.



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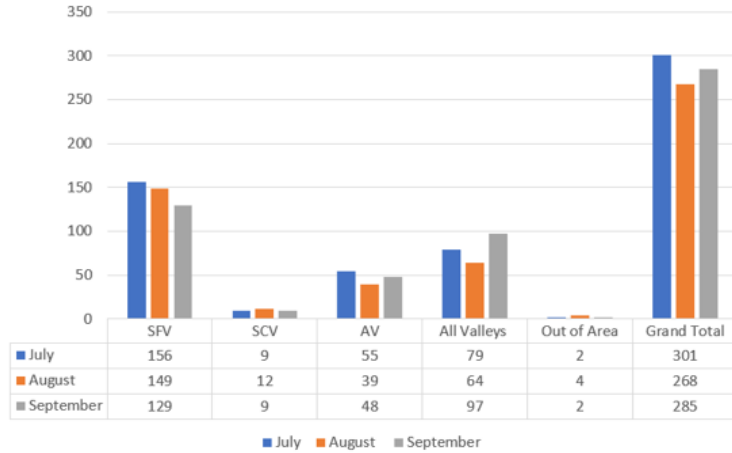
**METRICS UPDATES for Q1 (07.01.24 – 09.30.24)**

**2.3 Outreach & Community Engagement Contacts (DEIB)**

**Frequency:** Monthly

**Metric:** Number of community contacts monthly by geographic area.

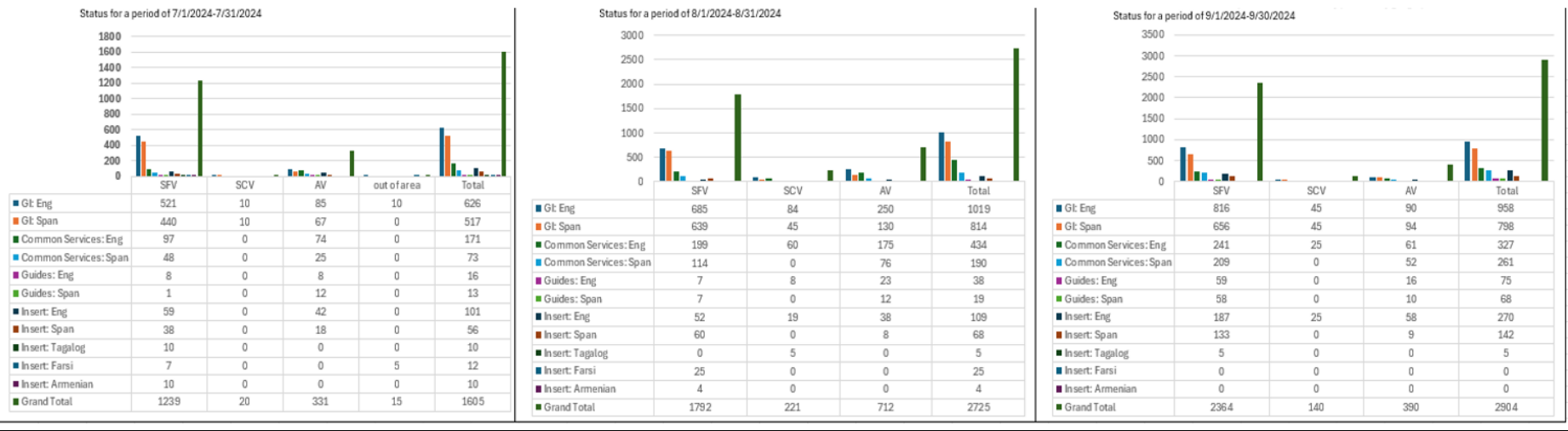
Status 7.1.24-9.30.24:



**2.4 Printed Information Provided to Community (DEIB)**

**Frequency:** Monthly

**Metric:** Number of materials provided to community partners by geographic area.





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Public Policy Performance Measure (Required)		Statewide Average June 2022	NLACRC June 2022	Statewide Average June 2023	NLACRC June 2023
3.	<b>Number and percent of adults residing in homesettings:</b>	154,11	10,817		
		82.75%	85.28%		
	• Independent Living Services (ILS)	17,651	1,130		
		9.48%	8.91%		
	• Supported Living Services (SLS)	9,350	417		
		5.02%	3.29%		
	• Adult Family Home Agency home	1,529	51		
		0.82%	0.40%		
	• Home of Parent or guardian	125,589	9,219		
		67.43%	72.68%		
<b>Goal:</b> Increase the number of adults who reside in home settings.					

**ACTIVITIES TO ADDRESS MEASURE/GOAL 3:**

- ◆ In order to increase the percentage of adult consumers residing in home settings, NLACRC provides support through ILS services, SLS assistance, family support services available for caregivers to provide extra assistance in the care and supervision of consumers.
- ◆ Information is also provided about participant directed services as another option for services.

**3.1 Resource Availability (Community Services)**

**Service:** Independent Living Skills (ILS)  
**Metric:** Current Number of ILS Providers  
 ILS Providers as of 6/30/24: 46  
 ILS Providers as of 9/30/24: 47

**Service:** Family Home Agencies (FHA)  
**Metric:** Current Number of FHA Providers  
 FHA providers as of 6/30/24: 2  
 FHA providers as of 9/30/24: 2

**Service:** Supported Living Services (SLS)  
**Metric:** Current Number of SLS Providers  
 SLS Providers as of 6/30/24: 36  
 SLS Providers as of 9/30/24: 36

**Service:** Participant-Directed Services: Community-Based Straining Service, Day Care, Independent Living, Nursin, Personal Assistant, Personal Assistance, Respite, Socail Rec, Supported Employment, Supported Living, Transportation.

**Metric:** Current Number of Participant Directed Services Vendors  
 Vendors as of 9/30/24:

Community-Based Training Service(475): 2  
 Day Care (455): 1  
 Independent Living (457): 1  
 Nursing (460): 0  
 Personal Assistant (093): 0  
 Personal Assistance (456): 1  
 Respite (465): 2  
 Social Rec (459): 1  
 Supported Employment (458): 1  
 Supported Living (073): 0  
 Transportation (470): 2  
 Total: (13)

Vendors as of 6/30/24:  
 Community-Based Training Service (475): 2  
 Day Care (455): 1  
 Independent Living (457): 1  
 Nursing (460): 0  
 Personal Assistance (093): 0  
 Personal Assistant (456): 1  
 Respite (465): 2  
 Social Rec (459): 1  
 Supported Employment (458): 1  
 Supported Living (073): 0  
 Transportation (470): 2  
 Total: 11



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**3.1a Resource Availability (SDP)**

Number of SDP participants as of 09/30/2024:

Budgets certified: 483

Budgets in the certification process: 5

Participants completed Orientation: 913 (2019-present)

Participants fully transitioned into SDP with approved spending plans and active SDP IPPs:

Participants opted out of SDP after enrolled: 7

PCP's completed: 446

Spending plans approved: 414

Spending plans in progress: 68

Number of SDP participants as of 06/30/2024:

Budgets certified: 438

Budgets in the certification process: 4

Participants completed Orientation: 874 (2019-present)

Participants fully transitioned into SDP with approved spending plans and active SDP IPPs: 381

Participants opted out of SDP after enrolled: 4

PCP's completed: 419

Spending plans approved: 381

Spending plans in progress: 54

**3.2 New Staff Orientation/Training (Training)**

**Training:** New Staff Orientation/Training Classes

**Frequency:** Monthly

**Metric:** Number of new staff trained within first six months of employment.

**Class names:** Independent Living/Supported Living and Residential Living Options

Status 7.1.24-9.30.24:

	Independent <u>Living/Supported Living</u>	<u>Residential Living Options</u>
July:	13	13
August:	9	9
September:	6	6

**3.3 Community Training/Orientation (Case Management)**

**Training:** Supported Living Services Orientation

**Frequency:** Monthly

**Metric:** Number of Orientations Held Annually

**Class names:** Independent Living/Supported Living and Residential Living Options

	<u>7.1.24-9.30.24</u>	<u>4.1.24-6.30.24</u>
July:	# 1	April: # 1
August:	# 1	May: # 1
September:	# 1	June: # 1



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**3.4 Dissemination of Information**

**3.4a Event:** Consumer and Family In-Home Supportive Services Training w/Client Rights Advocate

**Frequency:** Annual

**Metric:** Increase Number of Attendees

Status for period of 1/1/24-3/31/24: N/A

Status 7.1.24-9.30.24: no training during this quarter

Status 4.1.24-6.30.24: no training during this quarter

**3.4b Dissemination of Information (Public Information)**

See metric in 2.2 above.

Public Policy Performance Measure (Required)		Statewide Average June 2022	NLACRC June 2022	Statewide Average June 2023	NLACRC June 2023
4.	<b>Number and percent of minors living in facilities serving greater than 6</b>	0.03%	0.01%		
	• Intermediate Care Facilities (ICF)	54	1		
	• Skilled Nursing Facilities (SNF)	0.02%	0.00%		
	• Community Care Facilities (CCF)	34	0		
	• Skilled Nursing Facilities (SNF)	0.00%	0.00%		
	• Community Care Facilities (CCF)	7	0		
		0.01%	0.01%		
		13	1		
<b>Goal:</b> Decrease the percentage of children living in larger facilities.					

**ACTIVITIES TO ADDRESS MEASURE/GOAL 4:**

- ♦ In order to assist families during the transitions from a large facility to the family home, parents/caregivers are provided with information on behavior intervention services and what type of supports can be provided in the home for the care and supervision of consumers.
- ♦ Family support services (RESPITE, PERSONAL ASSISTANCE, DAYCARE) are another service to assist caregivers during transitioning periods and ongoing.
- ♦ NLACRC staff reviews trainings on services and vendors available for these services.





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**4.1 New Staff Orientation/Training (Training)**

**Training:** Residential Living Options & Service Standards

**Frequency:** Monthly

**Metric:** Number of new staff trained within first six months of employment.

*See metric status above in 3.2*

**4.2 Resource Development (Community Services)**

**Service:** Client/Parent Support Behavior Intervention Training (048) or Parent Coordinated Behavioral Intervention Program (077)

**Metric:** Current Number of vendors

**Data Source:** SANDIS

**Current number of vendors as of 07/01/24-09/30/24**

Client/Parent Support Behavior Intervention Training (048): 0

Parent Coordinated Behavioral Intervention Program (077): 0

Total: 0

**Current number of vendors as of 04/01/24-06/30/24**

Client/Parent Support Behavior Intervention Training (048): 0

Parent Coordinated Behavioral Intervention Program (077): 0

Total: 0

Public Policy Performance Measure (Required)		Statewide Average June 2022	NLACRC June 2022	Statewide Average June 2023	NLACRC June 2023
5.	<b>Number and percent of adults living in facilities serving greater than 6</b> <ul style="list-style-type: none"> <li>• Intermediate Care Facilities (ICF)</li> <li>• Skilled Nursing Facilities (SNF)</li> <li>• Community Care Facilities (CCF)</li> </ul> <p><b>Goal:</b> Decrease the percentage of adults living in larger facilities.</p>	1.71% 3,188  0.41% 755  0.52% 967  0.79% 1,466	2.13% 270  0.88% 111  0.61% 78  0.64% 81		

**ACTIVITIES TO ADDRESS MEASURE/GOAL 5:**

- ◆ NLACRC continues to increase efforts on having residential options available for adult consumers.
- ◆ Information and training about residential options is provided to case management service coordinators.



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**5.1 New Staff Orientation/Training (Training)**

**Training:** Residential Living Options & Service Standards

**Frequency:** Monthly

**Metric:** Number of new staff trained within first six months of employment.

*See metric status above in 3.2*

**Public Policy Performance Measure (Required)**

**6. Increase the percentage of adult consumers that are employed in integrated settings with competitive wages.**  
Separate measures in this category are included below as numbers 6a. through 6d. See below for data on each separate measure.  
**Goal:** Increase the percentage of adult consumers that are employed in integrated settings with competitive wages.

		Jan. - Dec. 2019 CA	Jan. - Dec. 2019 NLACRC	Jan. - Dec. 2020 CA	Jan. - Dec. 2020 NLACRC
<b>6a.</b>	<b>Consumer earned income (ages 16 and above) From Employment Development Department (EDD)</b>				
<b>6.a.1</b>	Quarterly number of consumers with earned income	25,710	1,529	22,772	1,552
<b>6.a.2</b>	Percentage of consumers with earned income	17.17%	15.04%	18.86%	17.73%
<b>6.a.3</b>	Average annual wages for consumers	\$8,772	\$10,121	\$9,733	\$11,067
		<b>2019</b>		<b>2020</b>	
<b>6b.</b>	<b>(From American Community Survey, five-year estimate) Annual earnings of consumers ages 16-64 compared to people with all disabilities in California.</b>	\$25,990		\$26,794	
		July 2017 – June 2018 Statewide	July 2017 – June 2018 NLACRC	July 2020 – June 2021 Statewide	July 2020 – June 2021 NLACRC
<b>6c.</b>	<b>(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.)</b>	29%	26%	35%	27%
		2019-20 CA Avg.	2019-20 NLACRC Avg.	2020-21 CA Avg.	2020-21 NLACRC Avg.
<b>6d.</b>	<b>(From data collected manually from service providers by regional centers) Number of adults who were placed in competitive integrated employment</b>	8	5	6	0



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	<b>following participation in a Paid Internship Program.</b>				
<b>6.d.1</b>	<b>Percentage of adults who were placed in competitive, integrated employment following participation in a Paid Internship Program.</b>	9%	11%	14%	0%
<b>6.d.2</b>	<b>Average hourly or salaried wages and for adults who participated in a Paid Internship Program.</b>	\$13.31	\$13.78	\$14.25	\$14.36
<b>6.d.3</b>	<b>Average hours worked per week for adults who participated in a Paid Internship Program.</b>	16	15	17	16
<b>6.d.4</b>	<b>Average wages for adults engaged in competitive, integrated employment, on behalf of whom incentive payments have been made.</b>	\$13.52	\$14.08	\$14.81	\$15.41
<b>6.d.5</b>	<b>Average hours worked for adults engaged in competitive, integrated employment, on behalf of whom incentive payments have been made.</b>	21	20	23	20
<b>6.d.6</b>	<b>Total # of incentive payments made for the fiscal year for the following amounts.</b>				
	Incentive amount: \$1,500	22	27	17	11
	\$1,250	28	33	19	11
	\$1,000	34	36	33	16

**NLACRC ACTIVITIES TO ADDRESS GOAL 6:**

- ♦ Through NLACRC's Employment Specialist, data is collected on integrated employment and employment opportunities for consumers, as well as paid internship programs (PIP).
- ♦ The Employment Specialists has developed relationships with small business owners, career centers, and service coordinators, along with consumers, develop an IPP goal and objective related to their employment need.
- ♦ We partnered with DOR to conduct a presentation in the near future on processes and available resources.

**6.1 Resource Availability & Development (Community Services)**

**Competitive Integrative Employment (CIE)**

**Metric:** Total Number of Vendors who offer CIE as of 12/31/2021

Progress Measurement: Total Number of Vendors who offer CIE

Vendors who offer CIE/EMPP as of 9/30/24: 27

Vendors who offer CIE/EMPP as of 6/30/24: 26

This does not include EMP6, EMP12/ Effective 7/1/2021 all existing & new CIE converted to EMPP (30-day), EMP6 (6-month), EMP12 (12-month).

**Paid Internship Program (PIP)**

**Metric:** Total Number of Vendors who offer PIP as of 12/31/2021

Progress Measurement: Total Number of Vendors who offer PIP

Vendors who offer PIP/PIPW as of 9/30/24: 39

Vendors who offer PIP/PIPW as of 6/30/24: 35



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**6.2 Increased Employment Opportunities for Consumers**

**Competitive Integrative Employment (CIE)**

Metric: Total Number of Consumers in CIE

Progress Measurement: Total Number of Consumers in CIE

Consumers who are in CIE as of 9/30/24: 20 consumers with Active POS for CIEP/CIE #, EMPP/EMP #, EMP #

Consumers who are in CIE as of 6/30/24: 81 consumers with Active POS for CIEP/CIE6/EMPP/EMP6, EMP12

\*Effective 7/1/2021 all existing & new CIE converted to EMPP (30-day), EMP6 (6-month), EMP12 (12-month).

**6.3 Service Access & Equity Grant (DEIB)**

**Type of Grant:** NLACRC is submitting a request for an Employment Specialist to help build relationships with small business owners in underserved areas.

**Metric:** Total Number of Contacts Made per Month

July: 0 (position is vacant)

August: 0 (position is vacant)

September: 0 (position is vacant)

**6.4 Outreach & Engagement to Increase Employment for Consumers (Arshalous)**

Frequency: Monthly

**Metric:** Total Number of Contacts Made at Colleges and Career Centers

Contracts made per month as of 9/30/24: 0

Contracts made per month as of 6/30/24: 1

**6.5 Individualized Program Plans (Arshalous)**

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

**Metric:** Total Number of IPPs with employment goals/outcomes

**Metric status as of 12/31/22:** It has been identified that this metric cannot be measured as written. Instead, NLACRC will gather the number of consumers participating in Competitive Integrative Employment (CIE), Paid Internship Program (PIP), Work

Number of consumers in CIE as of 9/30/24: 860

Number of consumers in CIE as of 6/30/24: 827

**6.6 Dissemination of Information (Public Info)**

See metric in 2.2 above.

**Paid Internship Program (PIP)**

Metric: Total Number of Consumers in PIP as of 12/31/2021

Progress Measurement: Total Number of Consumers in PIP

Consumers in PIP as of 9/30/24: 372

Consumers in PIP as of 6/30/24: 439



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Public Policy Performance Measure (Required) & Goal																															
<b>7.</b>	<p><b>Indicator showing the relationship between annual authorized services and expenditures by individual’s residence type and ethnicity.</b> Data for this measure that is separated by residence type is included below as number 7a. through 7f.</p> <p><b>Goal:</b> Ensure that consumers and families have access to services and supports regardless of age, diagnosis, ethnicity, or language.</p>																														
	Residence Type	2020-21	2021-22																												
<b>7a.</b>	Home	<table border="1"> <tr><td>American Indian or Alaska Native</td><td>0.40</td></tr> <tr><td>Asian</td><td>0.57</td></tr> <tr><td>Black/African American</td><td>0.63</td></tr> <tr><td>Hispanic</td><td>0.63</td></tr> <tr><td>Native Hawaiian or Other Pacific...</td><td>0.65</td></tr> <tr><td>Other Ethnicity or Race</td><td>0.56</td></tr> <tr><td>White</td><td>0.58</td></tr> </table>	American Indian or Alaska Native	0.40	Asian	0.57	Black/African American	0.63	Hispanic	0.63	Native Hawaiian or Other Pacific...	0.65	Other Ethnicity or Race	0.56	White	0.58	<table border="1"> <tr><td>American Indian or Alaska Native</td><td>0.40</td></tr> <tr><td>Asian</td><td>0.57</td></tr> <tr><td>Black/African American</td><td>0.63</td></tr> <tr><td>Hispanic</td><td>0.63</td></tr> <tr><td>Native Hawaiian or Other Pacific...</td><td>0.65</td></tr> <tr><td>Other Ethnicity or Race</td><td>0.56</td></tr> <tr><td>White</td><td>0.58</td></tr> </table>	American Indian or Alaska Native	0.40	Asian	0.57	Black/African American	0.63	Hispanic	0.63	Native Hawaiian or Other Pacific...	0.65	Other Ethnicity or Race	0.56	White	0.58
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<b>7b.</b>	ILS/SLS	<table border="1"> <tr><td>American Indian or Alaska Native</td><td>0.87</td></tr> <tr><td>Asian</td><td>0.81</td></tr> <tr><td>Black/African American</td><td>0.80</td></tr> <tr><td>Hispanic</td><td>0.82</td></tr> <tr><td>Native Hawaiian or Other Pacific Islander</td><td>0.00</td></tr> <tr><td>Other Ethnicity or Race</td><td>0.78</td></tr> <tr><td>White</td><td>0.78</td></tr> </table>	American Indian or Alaska Native	0.87	Asian	0.81	Black/African American	0.80	Hispanic	0.82	Native Hawaiian or Other Pacific Islander	0.00	Other Ethnicity or Race	0.78	White	0.78	<table border="1"> <tr><td>American Indian or Alaska Native</td><td>0.32</td></tr> <tr><td>Asian</td><td>0.79</td></tr> <tr><td>Black/African American</td><td>0.79</td></tr> <tr><td>Hispanic</td><td>0.75</td></tr> <tr><td>Native Hawaiian or Other Pacific...</td><td>0.00</td></tr> <tr><td>Other Ethnicity or Race</td><td>0.77</td></tr> <tr><td>White</td><td>0.81</td></tr> </table>	American Indian or Alaska Native	0.32	Asian	0.79	Black/African American	0.79	Hispanic	0.75	Native Hawaiian or Other Pacific...	0.00	Other Ethnicity or Race	0.77	White	0.81
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<b>7c.</b>	<b>Institutions</b>	<table border="1"> <tr><td>American Indian or Alaska Native</td><td>0.00</td></tr> <tr><td>Asian</td><td>0.00</td></tr> <tr><td>Black/African American</td><td>0.51</td></tr> <tr><td>Hispanic</td><td>0.41</td></tr> <tr><td>Native Hawaiian or Other Pacific Islander</td><td>0.00</td></tr> <tr><td>Other Ethnicity or Race</td><td>0.00</td></tr> <tr><td>White</td><td>0.81</td></tr> </table>	American Indian or Alaska Native	0.00	Asian	0.00	Black/African American	0.51	Hispanic	0.41	Native Hawaiian or Other Pacific Islander	0.00	Other Ethnicity or Race	0.00	White	0.81	<table border="1"> <tr><td>American Indian or Alaska Native</td><td>0.00</td></tr> <tr><td>Asian</td><td>0.00</td></tr> <tr><td>Black/African American</td><td>0.22</td></tr> <tr><td>Hispanic</td><td>0.24</td></tr> <tr><td>Native Hawaiian or Other Pacific Islander</td><td>0.00</td></tr> <tr><td>Other Ethnicity or Race</td><td>0.00</td></tr> <tr><td>White</td><td>0.01</td></tr> </table>	American Indian or Alaska Native	0.00	Asian	0.00	Black/African American	0.22	Hispanic	0.24	Native Hawaiian or Other Pacific Islander	0.00	Other Ethnicity or Race	0.00	White	0.01
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<b>7d.</b>	<b>Residential</b>	<table border="1"> <tr><td>American Indian or Alaska Native</td><td>0.00</td></tr> <tr><td>Asian</td><td>0.79</td></tr> <tr><td>Black/African American</td><td>0.78</td></tr> <tr><td>Hispanic</td><td>0.81</td></tr> <tr><td>Native Hawaiian or Other Pacific Islander</td><td>0.88</td></tr> <tr><td>Other Ethnicity or Race</td><td>0.76</td></tr> <tr><td>White</td><td>0.74</td></tr> </table>	American Indian or Alaska Native	0.00	Asian	0.79	Black/African American	0.78	Hispanic	0.81	Native Hawaiian or Other Pacific Islander	0.88	Other Ethnicity or Race	0.76	White	0.74	<table border="1"> <tr><td>American Indian or Alaska Native</td><td>0.00</td></tr> <tr><td>Asian</td><td>0.77</td></tr> <tr><td>Black/African American</td><td>0.75</td></tr> <tr><td>Hispanic</td><td>0.80</td></tr> <tr><td>Native Hawaiian or Other Pacific Islander</td><td>0.93</td></tr> <tr><td>Other Ethnicity or Race</td><td>0.80</td></tr> <tr><td>White</td><td>0.73</td></tr> </table>	American Indian or Alaska Native	0.00	Asian	0.77	Black/African American	0.75	Hispanic	0.80	Native Hawaiian or Other Pacific Islander	0.93	Other Ethnicity or Race	0.80	White	0.73
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<b>7e.</b>	<b>Med/Rehab/ Psych</b>	<table border="1"> <tr><td>American Indian or Alaska Native</td><td>0.00</td></tr> <tr><td>Asian</td><td>0.20</td></tr> <tr><td>Black/African American</td><td>0.95</td></tr> <tr><td>Hispanic</td><td>0.53</td></tr> <tr><td>Native Hawaiian or Other Pacific Islander</td><td>0.00</td></tr> <tr><td>Other Ethnicity or Race</td><td>0.84</td></tr> <tr><td>White</td><td>0.57</td></tr> </table>	American Indian or Alaska Native	0.00	Asian	0.20	Black/African American	0.95	Hispanic	0.53	Native Hawaiian or Other Pacific Islander	0.00	Other Ethnicity or Race	0.84	White	0.57	<table border="1"> <tr><td>American Indian or Alaska Native</td><td>0.00</td></tr> <tr><td>Asian</td><td>0.00</td></tr> <tr><td>Black/African American</td><td>0.87</td></tr> <tr><td>Hispanic</td><td>0.53</td></tr> <tr><td>Native Hawaiian or Other Pacific Islander</td><td>0.00</td></tr> <tr><td>Other Ethnicity or Race</td><td>0.98</td></tr> <tr><td>White</td><td>0.68</td></tr> </table>	American Indian or Alaska Native	0.00	Asian	0.00	Black/African American	0.87	Hispanic	0.53	Native Hawaiian or Other Pacific Islander	0.00	Other Ethnicity or Race	0.98	White	0.68
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<b>7f</b> •	<b>Other</b>																												
		<table border="0"> <tr><td>American Indian or Alaska Native</td><td>0.00</td></tr> <tr><td>Asian</td><td>0.90</td></tr> <tr><td>Black/African American</td><td>0.94</td></tr> <tr><td>Hispanic</td><td>0.66</td></tr> <tr><td>Native Hawaiian or Other Pacific Islander</td><td>0.00</td></tr> <tr><td>Other Ethnicity or Race</td><td>0.00</td></tr> <tr><td>White</td><td>0.68</td></tr> </table>	American Indian or Alaska Native	0.00	Asian	0.90	Black/African American	0.94	Hispanic	0.66	Native Hawaiian or Other Pacific Islander	0.00	Other Ethnicity or Race	0.00	White	0.68	<table border="0"> <tr><td>American Indian or Alaska Native</td><td>0.00</td></tr> <tr><td>Asian</td><td>0.87</td></tr> <tr><td>Black/African American</td><td>0.69</td></tr> <tr><td>Hispanic</td><td>0.76</td></tr> <tr><td>Native Hawaiian or Other Pacific...</td><td>0.00</td></tr> <tr><td>Other Ethnicity or Race</td><td>0.74</td></tr> <tr><td>White</td><td>0.81</td></tr> </table>	American Indian or Alaska Native	0.00	Asian	0.87	Black/African American	0.69	Hispanic	0.76	Native Hawaiian or Other Pacific...	0.00	Other Ethnicity or Race	0.74
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**NLACRC ACTIVITIES TO ADDRESS MEASURE/GOAL 7:**

- NLACRC staff have participated in a series of cultural competency training to increase their knowledge in equity and cultural diversity, as well as to enhance their resources as they continue to work with families and consumers. From diverse backgrounds.
- Recruitment of new hires has applicants from various language and ethnic backgrounds as to have available staff that can communicate in the preferred language of our consumers and families.
- NLACRC has hired a Deaf & Hard of Hearing Specialist that provides training, support and information to staff and vendor that is useful when working with individuals that are deaf or hard of hearing.
- Filling up vacant positions is a priority for NLACRC to make sure that families and consumers have a point of contact/service coordinator to assist and conduct IPP planning, as well as access services and supports.
- Through the service access and equity grant, NLACRC has been able to develop a team of outreach language specialists that conduct informational sessions, training, and technical assistance, and provide resources during outreach events in the community and in partnership with community-based organizations.
- For informational and education purposes, NLACRC promotes quarterly community with Spanish speaking families, monthly community learning forums in a variety of topics related to services available in the regional center system, monthly presentations of Different Thinking/Different Learners that gives opportunities for parents to learn about different abilities, and we offer monthly support groups in each language (Armenian, Farsi, Tagalog, and Spanish) where facilitators provide the latest information on directives, services, and clarification of the regional center system.
- During the 2022/2023 period, Spanish speaking families also participated in “Aprendiendo entre Nos/Learning Amongst Us”, which included topics of interest and current updates from the regional center.
- NLACRC continues to provide “Festival Educacional” annually held to ensure participants receive educational information and resources as they continue their involvement with the regional center system. \*2024 event was held as “Unity in Diversity” in lieu of “Festival Educacional.”



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**7.1 Diversity, Equity, and Inclusion Initiative (Training/DEIB)**

**Metric:** All NLACRC staff trained in culture competency, implicit bias, and empathy.

Status 7.1.24-9.30.24

Trainings were completed in June. We will be providing ongoing trainings to new staff members through the “Train the Trainer” program.

**7.2. NLACRC Recruitment of Service Coordinators (HR)**

**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

**July 2024**

CSC Positions filled: 18

CSC Positions lost: 5

CSC vacancies as of 7/31/24: 153

**August 2024**

CSC Positions filled: 9

CSC Positions lost: 2

CSC vacancies as of 8/31/24: 148

**September 2024**

CSC Positions filled: 18

CSC Positions lost: 4

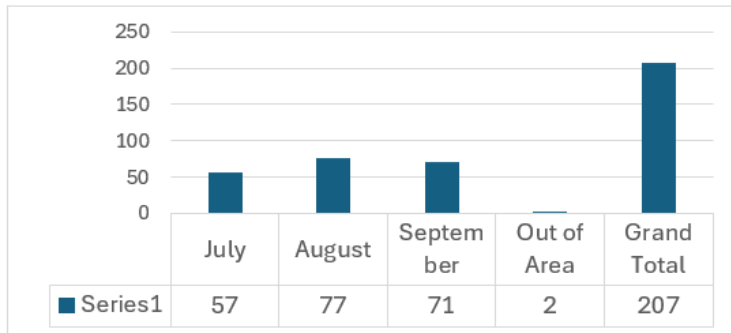
CSC vacancies as of 9/30/24: 146

**7.3 Service Access & Equity Grant (DEIB)**

**Type of Grant:** Grassroots Outreach

**Metric:** Total number of community contacts monthly

Status 7.1.24-9.30.24







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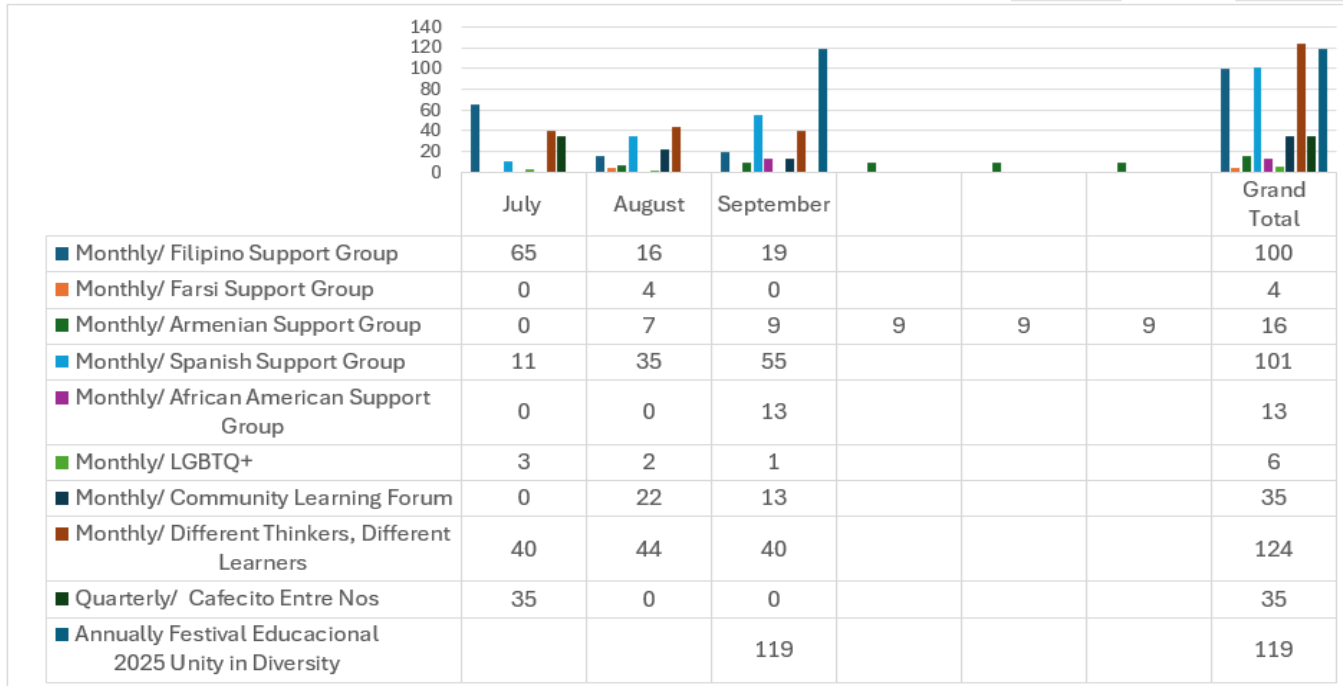
**7.4 Community Engagement & Relationships (DEIB)**

**7.4.a Frequency:** Monthly/Quarterly

**Metric:** Increase Number of community contacts monthly by group and geographic area.

\*The below data includes all community contacts completed throughout our catchment area.

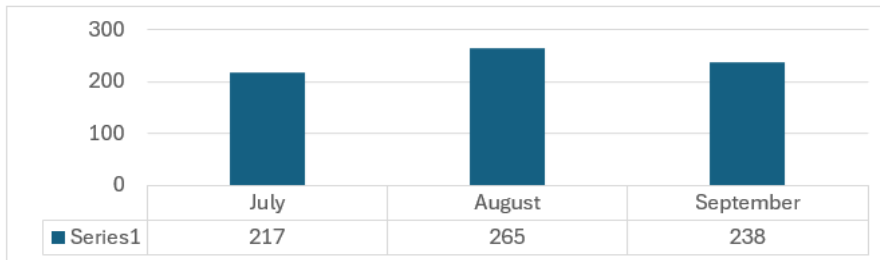
Status 7.1.24-9.30.24:



**7.4.b Frequency:** Monthly

**Metric:** Increase Number of community (consumers or families) contacts monthly by geographic area

Status 7.1.24-9.30.24:

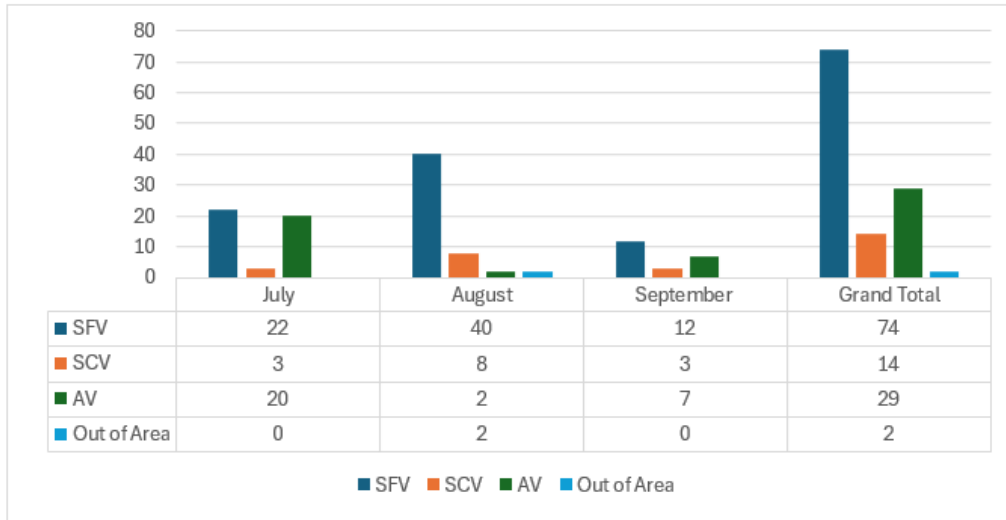




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**7.4.c Frequency: Monthly**

**Metric:** Number of contacts with community partners for materials by geographic area  
Status 7.1.24-9.30.24:

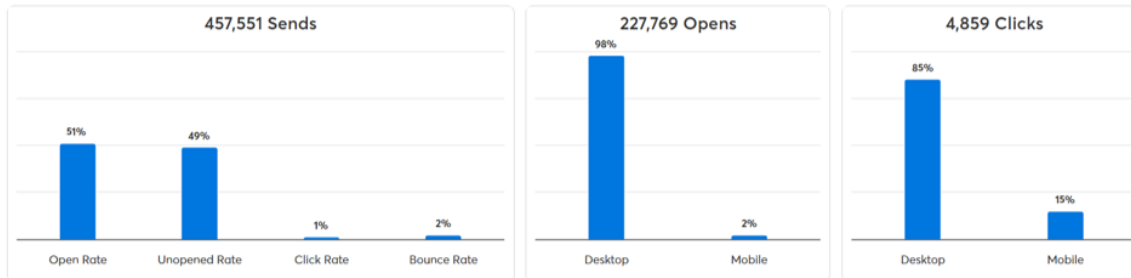


**7.4.d Activity: Electronic information provided to the community**

**Frequency:** Quarterly

**Metric:** Number of opened emails with material provided to the community by geographic area.

Status 7.1.24-9.30.24:





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Public Policy Performance Measure (Required)		
<b>8. Number and percent of individuals receiving only case management services by ethnicity and age.</b> <ul style="list-style-type: none"> <li>• Birth to age two, inclusive</li> <li>• Age three to 21, inclusive</li> <li>• Twenty-two and older</li> </ul> <b>Goal:</b> Ensure that consumers and families have access to services and supports regardless of age, diagnosis, ethnicity, or language.		
Ethnicity	2020-21	2021-22
American Indian or Alaska Native	<ul style="list-style-type: none"> <li>■ Birth to 2: 1 (25%)</li> <li>■ 3 to 21: 7 (37%)</li> <li>■ 22+</li> </ul>	<ul style="list-style-type: none"> <li>■ Birth to 2: 1 (20%)</li> <li>■ 3 to 21: 5 (71%)</li> <li>■ 22+: 8 (40%)</li> </ul>
Asian	<ul style="list-style-type: none"> <li>■ Birth to 2: 111 (19%)</li> <li>■ 3 to 21: 27 (9%)</li> <li>■ 22+: 404 (39%)</li> </ul>	<ul style="list-style-type: none"> <li>■ Birth to 2: 133 (21%)</li> <li>■ 3 to 21: 28 (8%)</li> <li>■ 22+: 394 (36%)</li> </ul>
Black/African American	<ul style="list-style-type: none"> <li>■ Birth to 2: 259 (21%)</li> <li>■ 3 to 21: 25 (8%)</li> <li>■ 22+: 510 (34%)</li> </ul>	<ul style="list-style-type: none"> <li>■ Birth to 2: 286 (23%)</li> <li>■ 3 to 21: 37 (10%)</li> <li>■ 22+: 532 (33%)</li> </ul>
Hispanic	<ul style="list-style-type: none"> <li>■ Birth to 2</li> <li>■ 3 to 21</li> <li>■ 22+: 4 (57%)</li> </ul>	<ul style="list-style-type: none"> <li>■ Birth to 2: 218 (6%)</li> <li>■ 3 to 21: 941 (25%)</li> <li>■ 22+: 3,147 (35%)</li> </ul>
Native Hawaiian or Other Pacific Islander	<ul style="list-style-type: none"> <li>■ Birth to 2: 859 (24%)</li> <li>■ 3 to 21: 179 (6%)</li> <li>■ 22+: 3,008 (35%)</li> </ul>	<ul style="list-style-type: none"> <li>■ Birth to 2</li> <li>■ 3 to 21</li> <li>■ 22+: 5 (57%)</li> </ul>



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White	<ul style="list-style-type: none"> <li>Birth to 2: 1 (25%)</li> <li>3 to 21: 7 (37%)</li> <li>22+: 116 (8%)</li> </ul>	<ul style="list-style-type: none"> <li>Birth to 2: 712 (17%)</li> <li>3 to 21: 1,127 (33%)</li> <li>22+: 116 (8%)</li> </ul>
Other Ethnicity or Race	<ul style="list-style-type: none"> <li>Birth to 2: 85 (23%)</li> <li>3 to 21: 473 (34%)</li> <li>22+: 104 (7%)</li> </ul>	<ul style="list-style-type: none"> <li>Birth to 2: 88 (22%)</li> <li>3 to 21: 499 (32%)</li> <li>22+: 124 (8%)</li> </ul>
Total	<ul style="list-style-type: none"> <li>Birth to 2: 1,939 (20%)</li> <li>3 to 21: 5,709 (35%)</li> <li>22+: 437 (7%)</li> </ul>	<ul style="list-style-type: none"> <li>Birth to 2: 2,165 (21%)</li> <li>3 to 21: 5,872 (34%)</li> <li>22+: 524 (7%)</li> </ul>

**ACTIVITIES TO ADDRESS MEASURE/GOAL 8:**

- Same as activities as in #7.

**Public Policy Performance Measure (Required)**

**9. Percent of total annual purchase of service expenditures by individual's ethnicity and age.**

- Birth to age two, inclusive.
- Age three to 21, inclusive.
- Twenty-two and older

**Goal:** Ensure that consumers and families have access to services and supports regardless of age, diagnosis, ethnicity, or language.

Ethnicity	2020-21		2021-22	
	Consumers	Expenditures	Consumers	Expenditures
American Indian or Alaska Native	Birth to 2, Consumers	0%	Birth to 2, Consumers	0%
	Birth to 2, Expenditures	0%	Birth to 2, Expenditures	0%
	3 to 21, Consumers	0%	3 to 21, Consumers	0%
	3 to 21, Expenditures	0%	3 to 21, Expenditures	0%
	22+, Consumers	0%	22+, Consumers	0%
	22+, Expenditures	0%	22+, Expenditures	0%



**NORTH LOS ANGELES COUNTY REGIONAL CENTER  
PERFORMANCE CONTRACT  
Fiscal Year 2024-25**

**METRICS UPDATES for Q1 (07.01.24 – 09.30.24)**

Asian	Birth to 2, Consumers  5% Birth to 2, Expenditures  5% 3 to 21, Consumers  6% 3 to 21, Expenditures  6% 22+, Consumers  6% 22+, Expenditures  6%	Birth to 2, Consumers  5% Birth to 2, Expenditures  5% 3 to 21, Consumers  6% 3 to 21, Expenditures  6% 22+, Consumers  6% 22+, Expenditures  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  49% Birth to 2, Expenditures  52% 3 to 21, Consumers  53% 3 to 21, Expenditures  46% 22+, Consumers  36% 22+, Expenditures  26%	Birth to 2, Consumers  49% Birth to 2, Expenditures  50% 3 to 21, Consumers  53% 3 to 21, Expenditures  47% 22+, Consumers  37% 22+, Expenditures  27%
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  20% 3 to 21, Expenditures  30% 3 to 21, Consumers  23% 22+, Consumers  42% 22+, Expenditures  54%	Birth to 2, Consumers  20% Birth to 2, Expenditures  21% 3 to 21, Expenditures  28% 3 to 21, Consumers  23% 22+, Consumers  41% 22+, Expenditures  52%



**NORTH LOS ANGELES COUNTY REGIONAL CENTER  
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**METRICS UPDATES for Q1 (07.01.24 – 09.30.24)**

Other Ethnicity or Race	Birth to 2, Consumers		22%	Birth to 2, Consumers		21%
	Birth to 2, Expenditures		18%	Birth to 2, Expenditures		18%
	3 to 21, Consumers		8%	3 to 21, Consumers		9%
	3 to 21, Expenditures		7%	3 to 21, Expenditures		8%
	22+, Consumers		4%	22+, Consumers		4%
	22+, Expenditures		4%	22+, Expenditures		4%
	<b><u>ACTIVITIES TO ADDRESS MEASURE/GOAL 9:</u></b>					
<ul style="list-style-type: none"> <li>Same activities as #7 and #8.</li> </ul>						

Public Policy Performance Measure (Required)			
10.	<b>Number and percent of individuals (Status 1 or 2) Current Client Development Evaluation Report(CDER) or Early Start Report (ESR).</b> <b>Goal:</b> Increase the percentage of individuals with current CDERs.		
<b>Statewide Average June 2022</b>	<b>NLACRC June 2022</b>	<b>Statewide Average July 2023</b>	<b>NLACRC July 2023</b>
98.21% 323,657	98.84% 25,089	97.42% 340,202	98.29% 27,024
<b><u>NLACRC ACTIVITIES TO ADDRESS GOAL 10:</u></b>			
<ul style="list-style-type: none"> <li>All consumers receiving services and supports have a completed CDER as soon as they become part of the NLACRC system.</li> <li>All service coordinators have revised training on how to complete and update ongoing CDER after every visit with consumers.</li> </ul>			



**NORTH LOS ANGELES COUNTY REGIONAL CENTER**  
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**METRICS UPDATES for Q1 (07.01.24 – 09.30.24)**

Compliance Measures (Required)				
11.				
Measures	Audit Compliance in all Regional Centers as of December 2022	NLACRC Audit Compliance as of December 2022	Audit Compliance in all Regional Centers as of December 2023	NLACRC Audit Compliance as of December 2023
<b>I. Passes independent audit</b>	90%	YES		
<b>II. Passes DDS audit</b>	100%	YES		
<b>III. Audits vendors as required (FY2020-21 vs. FY2021-22)</b>	86%	YES		
<b>IV. Did not overspend operations budget</b>	100%	YES		
<b>V. Participates in federal waiver</b>	100%	YES		
<b>VI. CDER/ESR Currency</b>	96%	97%		
<b>*VII. Intake/assessment and IFSP timelines (ages 0-2).</b>	**	**		
<b>VIII. Intake/assessment timelines for consumers ages 3 and above.</b>	83%	96%		
<b>IX. IPP Development (WIC requirements)</b>	99%	90%		
<b>X. Individualized Family Service Plan (IFSP) Requirements Met</b> (The IFSP calculation methodology was changed from composite to average in 2017 in order to more accurately reflect the regional center's performance by only including children reviewed during monitoring and not all Early Start consumers.)	89%	90%		

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



**NORTH LOS ANGELES COUNTY REGIONAL CENTER**  
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**Fiscal Year 2024-25**  
**METRICS UPDATES for Q1 (07.01.24 – 09.30.24)**

“Outside of the Box” Performance Measures	
<b>12.</b>	
<b>12.i.</b>	<p><b>Increase recruitment in San Fernando Valley, Antelope Valley, and Santa Clarita Valley. (HR)</b></p> <p><b>Measurable goal:</b>            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.</p> <p><b>*Supporting Data:</b>            Utilizing Temporary Agencies: No hires during this quarter. (LHH, LA Business Personnel, Randstad, Ultimate Staffing and Ledgent.)            Employee Referrals: Submitted for Referrals/23 – (11) – Hired/8            Partnership with PeopleScout: 2 CSCs hired in the month of July. PeopleScout’s contract ended July 31, 2024.</p>
<b>12.ii.</b>	<p><b>Increase service provider access to trainings to increase quality of services. (Community Services)</b></p> <p><b>Measurable goal:</b>            Conduct or provide information on available external trainings for service providers with reputable subject matter experts to provide growth opportunities</p> <p><b>*Supporting Data:</b>            Status for period of 4/1/24-6/30/24: 9            Status for period of 7/1/24-9/30/24: 10</p>
<b>12.iii.</b>	<p><b>Increase educational opportunities for Community Services staff development. (Community Services)</b></p> <p><b>Measurable goal:</b>            Employment Specialist to attend trainings to be kept informed and up to date of best practices.</p> <p><b>*Supporting Data:</b>            Status for period of 4/1/24-6/30/24: 6            Status for period of 7/1/24-9/30/24: 9</p>
<b>12.iv.</b>	<p><b>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. (Community Services)</b></p> <p><b>Measurable goal:</b>            Measurable goal: Number of respite, SLS, and PA providers by geographic location.</p> <p><b>*Supporting Data:</b>            Status for period of 4/1/24-6/30/24: During this quarter, we vended a personal assistant agency and four respite agencies. Resource development continues to work with SLS, Personal Assistance, and respite agencies that applied in recent development cycles.            Status for period of 7/1/24-9/30/24: Published RFV during this quarter that included Respite and Personal Assistance as this was indicated in annual needs survey.</p>





**NORTH LOS ANGELES COUNTY REGIONAL CENTER  
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**METRICS UPDATES for Q1 (07.01.24 – 09.30.24)**

<b>12.v.</b>	<p><b>Create resources and best practices for service providers to assist consumers with employment preparedness. (Community Services)</b></p> <p><b>Measurable goal:</b> 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.</p> <p><b>*Supporting Data:</b> Status for period of 4/1/24-6/30/24: NLACRC promoted "Work is for Everyone" module training series on Employment. Status for period of 7/1/24-9/30/24: 13 resources shared with providers related to employment opportunities.</p>
<b>12.vi.</b>	<p><b>Gather and assess data to develop responsive strategies. (DEIB)</b></p> <p><b>Measurable goals:</b></p> <ol style="list-style-type: none"> <li>a. Gather Purchase of Service data based on service code.</li> <li>b. Obtain information from the community (surveys, comments, and Q&amp;A during public meetings).</li> <li>c. Log category of needs from walk-ins, and calls to receptionist and Parent &amp; Family Support Specialists.</li> <li>d. Review fair hearings and 4731 complaints to assess areas of need, improvement, and/or clarification.</li> <li>e. Create breakout rooms during Cafecito Entre Nos meetings to directly discuss complaints and other matters.</li> <li>f. Change format of Aprendiendo to promote conversation/discussion rather than a presentation.</li> <li>g. Assess the need for staff training on the client experience (similar to “customer service”).</li> <li>h. Assess through Disparity Committee, Executive Committee, and/or Consumer Services Committee.</li> </ol> <p><b>*Supporting Data:</b></p> <ol style="list-style-type: none"> <li>a. Purchase of Service Data being reviewed through the Disparity Committee and presented at Consumer Services Committee.</li> <li>b. “Community Needs Survey” is posted on our website for the community to provide comments and service needs.</li> <li>c. i. Based on Parent &amp; Family Support Specialists’ Tracking: AV: 68 SFV: 130 SCV:6</li> <li>ii. Category of consultations: 19 Complaints 85 Regional Center Services 50 Follow Ups 3 Camp/Social Rec 80 Resources</li> <li>d. 4731 and Appeals are tracked through the Consumer Services Committee.</li> <li>e. Measure met.</li> <li>f. See supporting data in 7.4.a..</li> <li>g. Surveys were initiated January 2024 and are ongoing.</li> <li>h. The aforementioned committees continue to perform their due diligence in assessing data received through committee.</li> </ol>



**NORTH LOS ANGELES COUNTY REGIONAL CENTER**  
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**Fiscal Year 2024-25**  
**METRICS UPDATES for Q1 (07.01.24 – 09.30.24)**

12.vii.	<p><b>To increase the number of purchase of services related to camp, social recreation, and non-medical therapies for individuals served. (Community Services)</b></p> <p><b>Measurable goal:</b>          POS-Vendors    POS-Parent Reimbursements</p> <p><b>*Supporting Data:</b>          Status for period of 7/1/24-9/30/234: 597 POS- Vendors; 287 POS- Parent Reimbursements; 830 POS-FMS for social rec = Total Social Rec POS 1,714</p>
12.viii.	<p><b>To increase the number of families securing appropriate resources to meet their individualized needs through service coordination. (DEIB)</b></p> <p><b>Measurable goal:</b></p> <ol style="list-style-type: none"> <li>a. Increase partnerships with Community-Based Organizations (CBOs) regarding generic resources.</li> <li>b. Track advocacy assistance for families.</li> <li>c. FFRC Community Navigator Program</li> <li>d. Generic Resource</li> <li>e. Increase virtual generic resource materials for staff.</li> </ol> <p><b>*Supporting Data:</b></p> <ol style="list-style-type: none"> <li>a. DEIB: See metrics above.</li> <li>b. DEIB: See metrics above.</li> <li>c. FFRC Community Navigators Program- Individuals act as specialist and provide support to family’s access and utilize regional center and generic resources.</li> <li>d. NLACRC hosted the NLACRC Expo and Unity in Diversity event. Generic resources from various organizations including the RC were provided to the families in both events.</li> <li>e. There has been a creation of a DEIB Library and Quarterly Newsletter in our website and News You Can Use.</li> </ol>

## NLARCR Project Plan

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### Project Kick-Off and Discovery

Name	Subitems	Status	Owner
Initial implementation call		Completed	WorkTango
Send Follow up Email Post Kickoff Call		Completed	WorkTango

### Employee Attributes

Name	Subitems	Status	Owner
Establish employee attributes		Completed	Customer
Review And Populate Employee File template		Completed	Customer
Upload Employee File		Completed	Customer
Review employee file in platform		Completed	WorkTango+Customer
Employee list update (2 weeks prior to launch if list is loaded prior)		Completed	Customer

### Platform Training

Name	Subitems	Status	Owner
Administrator Platform Training (Reporting, administration, etc.)		Completed	WorkTango
User platform training (webinar for users who require access to data)		Completed	WorkTango

## System Testing and Deliverability

Name	Subitems	Status	Owner
Safelisting WorkTango email servers		Completed	Customer
Prepare participant list for deliverability test		Completed	Customer
Launch Deliverability Test		Completed	Customer
Kiosk set-up and testing (if required)		Completed	Customer

## Employee Voice Strategy and Survey Design

Name	Subitems	Status	Owner
Review Survey Design Templates		Completed	Customer
Survey Design Discussion		Completed	WorkTango+Customer
Review WorkTango recommendations internally and make required decisions		Completed	Customer
Revisit survey design and retrain on survey building		Completed	WorkTango+Customer
Build survey in WorkTango		Completed	Customer
Sign off on survey experience		Completed	Customer

## Communication Strategy

Name	Subitems	Status	Owner
Send draft communication plan		Completed	WorkTango
Communications strategy brainstorm session		Completed	WorkTango
Review Templates and Develop resources		Completed	Customer
Execute against communication plan		Completed	Customer
Share communication plan with WorkTango Team		Completed	Customer

## Survey Administration

Name	Subitems	Status	Owner
Final Review Pre-launch		Completed	WorkTango+Customer
Deployment of surveys across all channels		Completed	Customer
Reminder campaign		Completed	Customer

## User Access and Reporting

Name	Subitems	Status	Owner
User access strategy discussion		Completed	WorkTango+Customer
Grant users access to platform		Completed	WorkTango
Reporting Discussion		Completed	WorkTango+Customer
Deliver Reports		Completed	WorkTango



# NLACRC Employee Engagement Long Assessment Survey (October 2024)

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# Summary of Results



## Responses

51.7%

Response Rate

391  
/756

Employees responded

## Key Results

75.7%

Highest scoring factor:  
Goals & Alignment

23.8%

Lowest scoring factor:  
Compensation & Benefits

85.7%

Highest scoring question:  
My direct manager provides the  
autonomy I need to do my job  
(i.e. does not "micro-manage"  
me)....

20.2%

Lowest scoring question:  
I have seen action in the  
organization as a result of our last  
survey.



# Overall Findings

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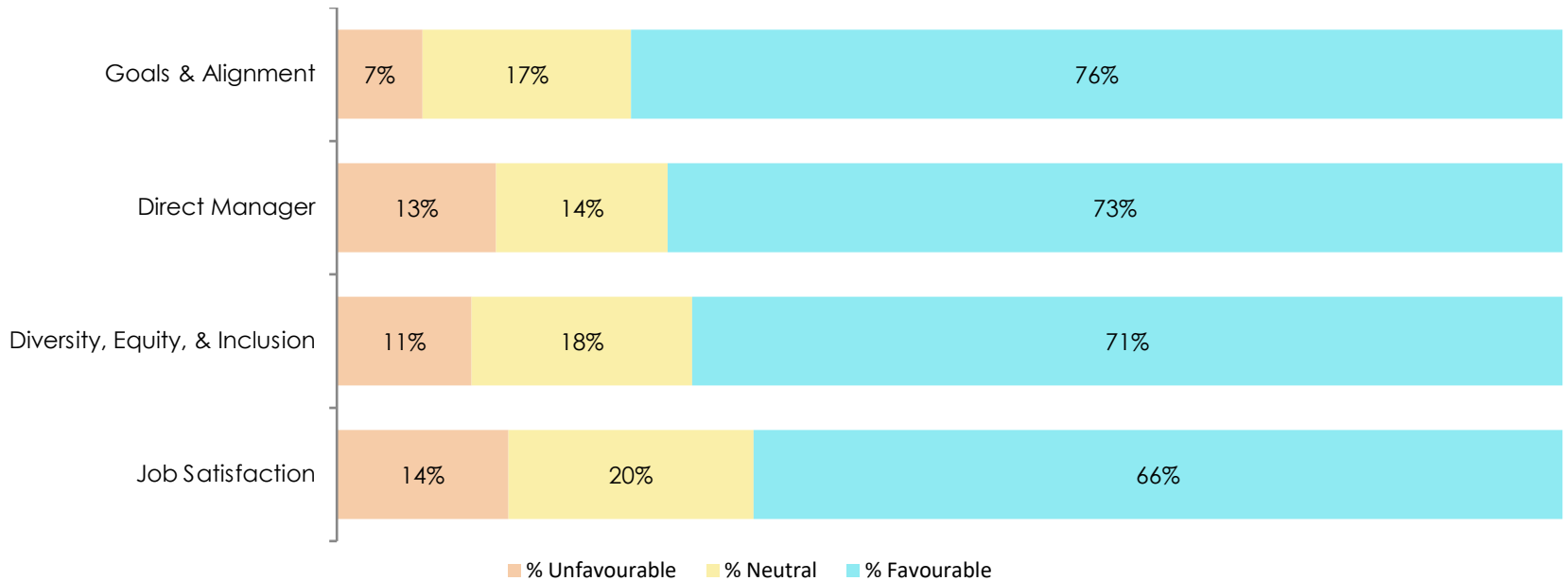


# Overall Findings: By Factor

## Key Factors



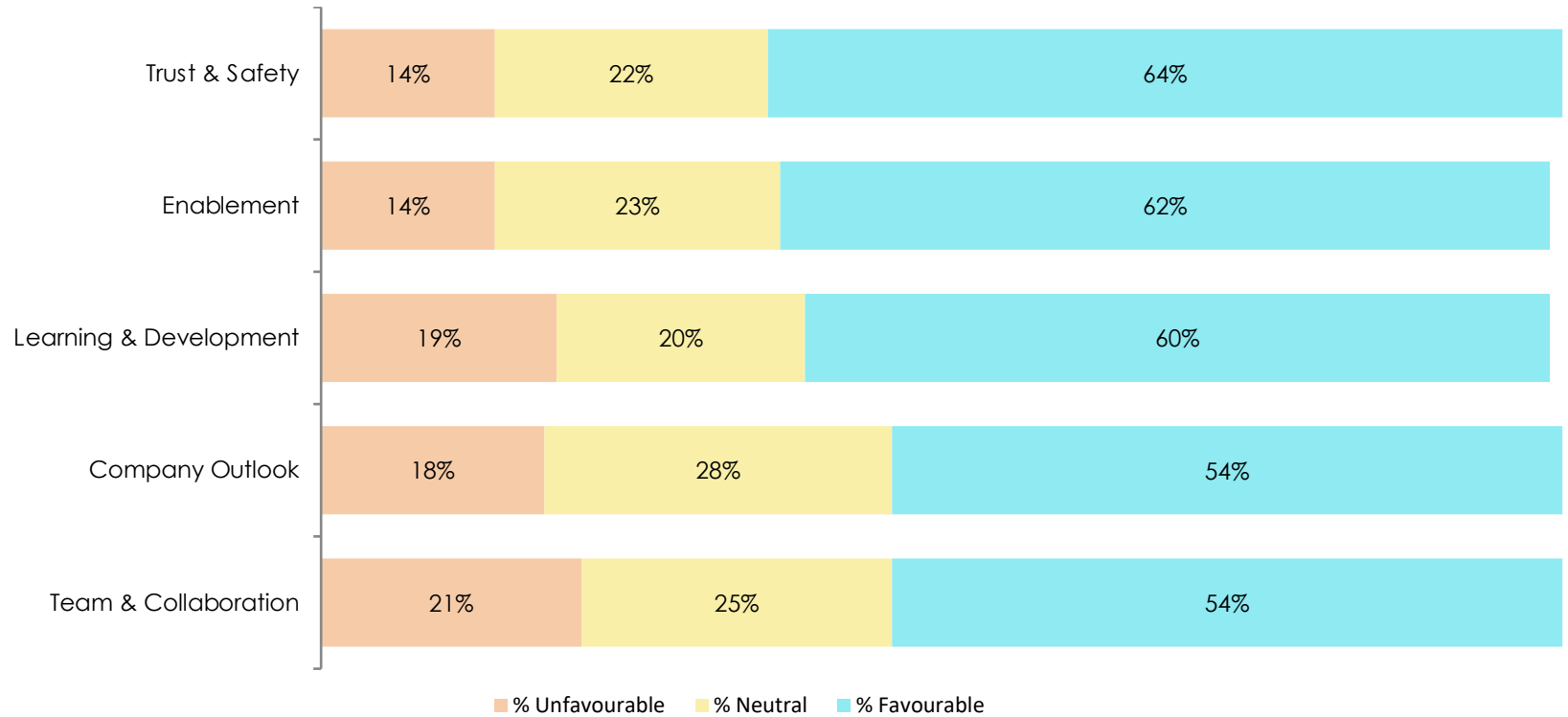
## Factors





# Overall Findings: By Factor

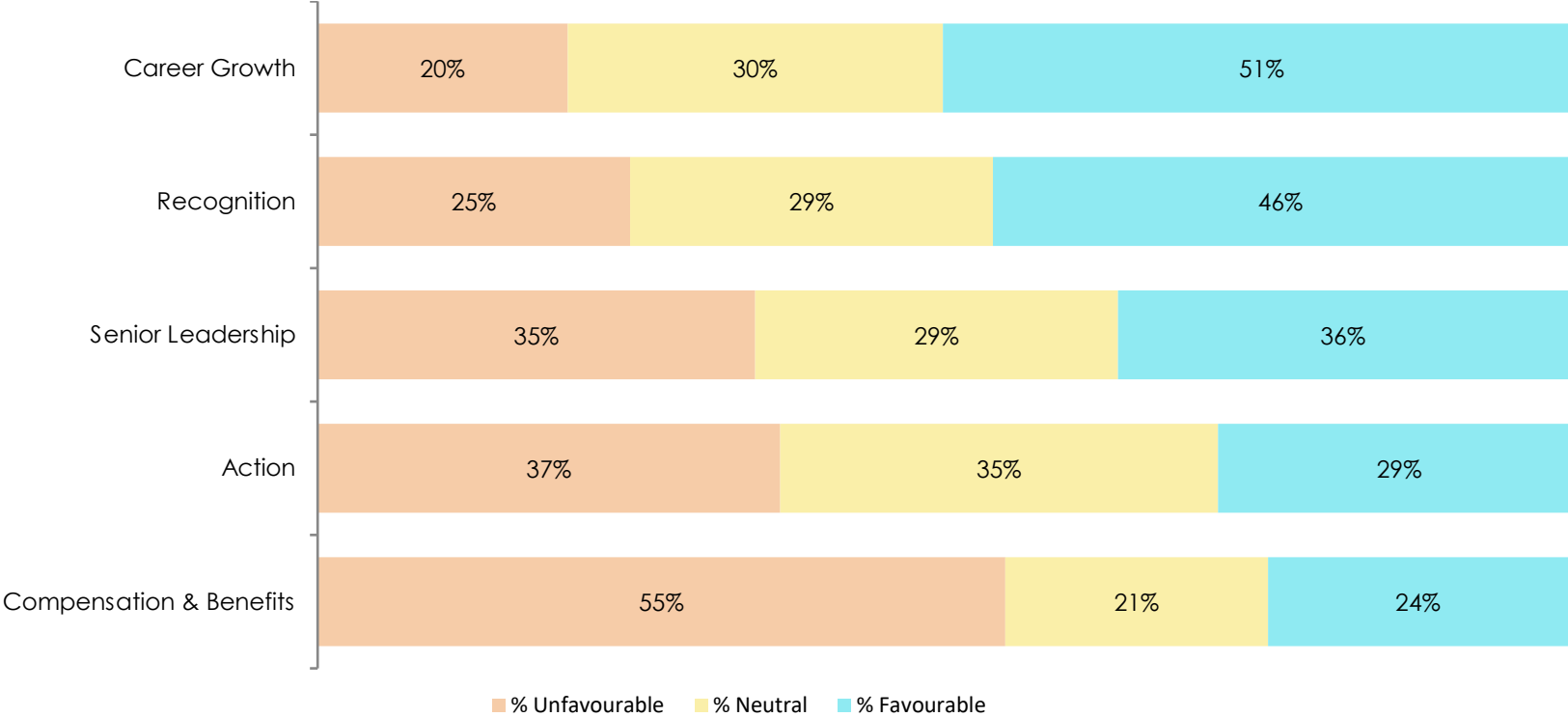
Factors





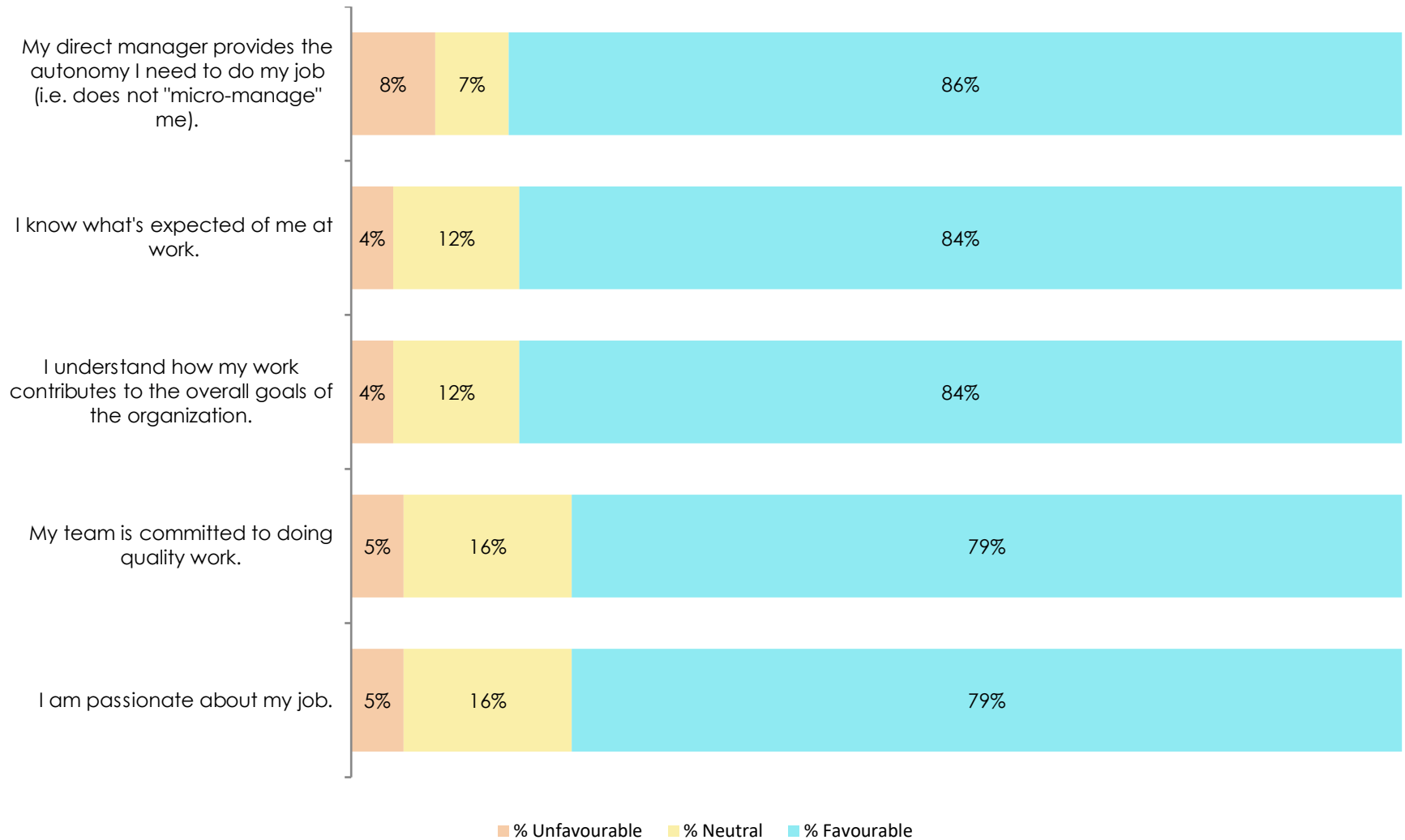
# Overall Findings: By Factor

Factors



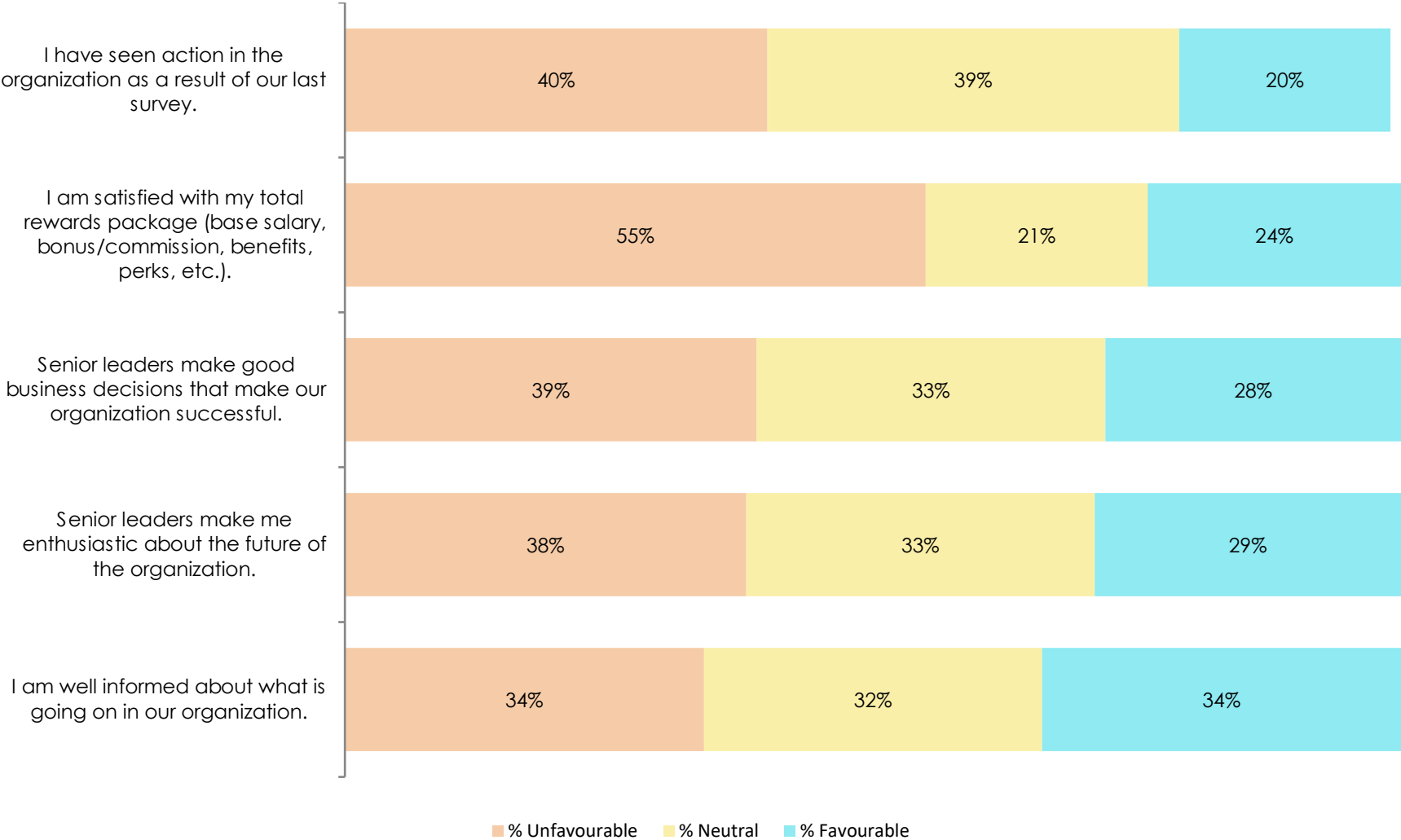


# Overall Findings: Top Five Questions





# Overall Findings: Bottom Five Questions





# Overall Findings: Open-Ended Comments

Question: **Do you have any other feedback that you would like to share?**

This summary was generated by AI analyzing 198 responses.

## In a Nutshell...

The survey results reveal a strong sentiment among employees regarding the need for improved compensation and benefits, particularly in light of the increasing cost of living. Employees express concerns about the affordability of health insurance, with many highlighting the significant financial burden it places on their families. The lack of salary competitiveness compared to other regional centers and the slow pace of wage increases are also major concerns. Beyond compensation, employees raise concerns about workload and training. High caseloads, coupled with new implementations like SDP and social recreation, are cited as sources of stress and burnout. The effectiveness of training programs is also questioned, with many employees feeling unprepared for the demands of their roles.

## Actions for Consideration

- **Address Workload Concerns:** Evaluate current caseload distribution and explore strategies to reduce them to more manageable levels. This could involve hiring additional staff, streamlining processes, or re-evaluating the allocation of responsibilities.
- **Increase Compensation and Benefits:** Consider conducting a current comprehensive salary review to ensure competitiveness with other regional centers and the current local job market. Consider increasing employer contributions to health insurance premiums to alleviate the financial burden on employees.
- **Improve Training and Development:** Review and revamp training programs to ensure they adequately prepare employees for their roles. Incorporate more hands-on learning, mentorship opportunities, and ongoing support for new hires.
- **Enhance Communication and Transparency:** Foster a more open and transparent communication culture. Regularly share updates on organizational changes, address employee concerns, and provide clear explanations for decisions.
- **Recognize and Reward Employee Contributions:** Implement employee recognition programs to acknowledge and appreciate employee efforts. Consider performance-based bonuses, opportunities for professional development, and other incentives to boost morale and retention.



# Overall Findings: Open-Ended Comments

Question: **Do you have any other feedback that you would like to share?**

This summary was generated by AI analyzing 198 responses.

## The positives

- Employees appreciate the flexibility offered by the hybrid work schedule and value the opportunity to work remotely.
- Many employees express positive sentiments towards their direct supervisors, recognizing their support and guidance.
- There is a sense of pride and passion for the organization's mission of serving the developmental disabilities community.

## The negatives

- High caseloads and workloads are major sources of stress, with many employees feeling overwhelmed and unsupported.
- Employees consistently cite low pay as a major concern, highlighting the disparity between their salaries and the increasing cost of living.
- There is a perceived disconnect between upper management and employees, with concerns about a lack of transparency, communication, and understanding of employee needs.

**STRATEGIC PLAN 2022-2026**  
**YEAR 2/FY23-24 REVIEW (07/01/23-06/30/24)**

**Introduction:**

We are pleased to present our second annual update, an essential juncture in our ongoing pursuit of the objectives outlined in our 2022- 2026 Strategic Plan. This report reflects our progress thus far and offers a roadmap for the future. It is a testament to our dedication to achieving our mission. Within these pages, we will delve into our accomplishments, ongoing challenges, and strategic priorities that define our journey.

**Overview:**

The NLACRC Strategic Plan 2022-2026 emerged from a collaborative planning process involving individuals served, families, service providers, NLACRC staff, and community members. Within the plan, we've pinpointed five focus areas aimed at enhancing services and support for every individual and family we assist.

**Progress Towards Vision:**

The table below outlines our progress made towards achieving the long-term vision outlined in the Strategic Plan during FY 23-24.

Quick Links to each Focus Area:

[Focus Area 1 - Diversity, Equity, Inclusion and Belonging \(DEIB\)](#)

[Focus Area 2 - Development & Growth of an Engaged Workforce](#)

[Focus Area 3 - Employment and Day Services](#)

[Focus Area 4 - Health and Wellness](#)

[Focus Area 5 - Housing](#)

50 YEARS OF SERVICE



**Focus Area 1 - Diversity, Equity, Inclusion and Belonging (DEIB)**

Sub Area	Specific Strategy	Goal/Objective	FY 2023-24 Update/Highlights
<p align="center"><b>Inclusion: Focus Area 1.A</b></p>	<p>1.A.1 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.</p>	<p>Ensure policies and guidelines reflect DEIB values.</p>	<p>The NLACRC HR and DEIB departments are currently engaged in a comprehensive review of all policies to ensure they align with Diversity, Equity, Inclusion, and Belonging (DEIB) values. The anticipated completion date has been extended to the second quarter of FY24-25, ensuring that all policies reflect principles of inclusion, equity, and diversity. This initiative underscores NLACRC’s commitment to fostering an inclusive environment.</p>
	<p>1.A.2 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.</p>	<p>Promote inclusion in composition, committees, and workgroups.</p>	<p>In FY23-24, the Board did not meet the White and Two or More Races requirements, however, as of January 10, 2024, the Board met the African American requirement. The Board is currently in the process of completing a recruitment plan, as required by DDS.</p>
	<p>1.A.3 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.</p>	<p>Partner with stakeholders to reduce disparities and to develop data-driven solutions with metrics and timelines.</p>	<p><u>Focus Group Sessions</u></p> <ul style="list-style-type: none"> <li>• Languages: Five focus group sessions were held in Spanish, Armenian, Tagalog, and Farsi.</li> <li>• Feedback: Community members shared their experiences regarding translated materials and the challenges they encountered when accessing services from the regional center.</li> <li>• Outcome: A summary of the feedback was presented to the Disparity Committee to aid in reducing disparities.</li> </ul> <p><u>Support Groups</u></p> <ul style="list-style-type: none"> <li>• Establishment: Self-advocacy and LGBTQ+ support groups have been created for adult consumers, providing a platform for advocacy and community support.</li> </ul> <p><u>Public Meetings</u></p> <ul style="list-style-type: none"> <li>• Format: Public meetings on POS expenditures were conducted via Zoom.</li> <li>• Accessibility: Information was presented in plain language, with interpretation available in the top five community languages (Spanish, Armenian, Tagalog, Farsi, and English).</li> <li>• Engagement: Breakout rooms were set up for public comments and questions, enhancing community interaction.</li> <li>• Surveys: A survey was distributed in multiple languages, available for two weeks before and after the meetings to gather further input.</li> </ul> <p>These initiatives reflect a commitment to inclusivity and responsiveness to community needs.</p>

<p>1.A.4 Advocate at the state level for updated approaches to services and service delivery, system level equity, diversity, culturally competent planning, and POS Variance.</p>	<p>Advocacy will occur at the systems level</p>	<p><u>Advocacy Efforts</u></p> <ul style="list-style-type: none"> <li>• Service Access and Equity: NLACRC is actively advocating for improved service access and equity, alongside the modernization of the core staffing formula. These efforts are part of both local and ARCA Legislative Grassroots visits planned for 2024.</li> </ul> <p><u>Events</u></p> <ul style="list-style-type: none"> <li>• Legislative Town Hall: A town hall event was scheduled for Spring 2024 to engage with the community and discuss legislative priorities.</li> <li>• Candidate’s Event: Another event is planned for Fall 2024, aimed at connecting with candidates and discussing relevant issues.</li> </ul> <p><u>Outreach Activities</u></p> <ul style="list-style-type: none"> <li>• Council Engagement: DEIB team members have met with council members in the catchment area during outreach events. Consumer advocates have also visited council offices to foster relationships.</li> <li>• ARCA Grassroots Participation: Representatives from NLACRC, including board members and service providers, participated in the ARCA Grassroots event in Sacramento. Ongoing discussions with local legislators focus on budget impacts and service delivery for families and individuals served by NLACRC.</li> </ul> <p>These initiatives highlight NLACRC’s commitment to advocacy and community engagement, ensuring that the voices of those they serve are heard in legislative discussions.</p>
<p>1.A.5 Explore Leadership Training for Self-Advocates/Family Advocates and Board Members to build stronger, diverse self- advocacy base to continually educate community and state leaders.</p>	<p>Self-Advocates and Family- Advocates will be trained to build a diverse community.</p>	<p><u>Consumer Advisory Committee</u></p> <p>October 2023 – Voting Information  February 2024 – Reporting Abuse  March 2024 – OCRA: Hands Off My Money  April 2024 – Emotional Well-Being and Stress</p> <p><u>Community Services Committee</u></p> <p>March 2024 - Vendorization, Quality Assurance and Resource Development</p> <p><u>NLACRC Board of Trustees</u></p> <p>April 2024 - Cultural Competency &amp; Implicit Bias Training  May &amp; June 2024 - Code of Conduct Training</p>

<b>Training, Education &amp; Awareness: Service Access &amp; Equity Focus Area 1.B.</b>	<p><b>1.B.1</b> Expand training for people served/families that support their education, their rights, and determining their role and relationship with the Regional Center.</p>	<p>Training and Information will be provided to people served/families</p>	<p><u>Town Hall sessions:</u>  July 2023 - Options to prepare for the future, Transitioning to Adulthood (Employment &amp; Housing)  October 2023 - Behavioral Service Options available through the Regional Center  January 2024 - LGBTQ+, How to Overcome Challenges &amp; Barriers  April 2024 - Individual's Rights Under Lanterman Act</p> <p>Parent University has been translated into various languages (Farsi, Tagalog, Armenian and Spanish) and is in the process of being made available through LMS.</p>
	<p><b>1.B.2</b> 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.</p>	<p>Offer orientations/trainings on transitioning to adulthood.</p>	<p><u>Life After High School Fairs</u>  January 2024 – SFV  March 2024 – AV Transitioning to Secondary Education</p> <p>Community Expos took place in May 2024 in AV and SFV</p> <p>New NSO trainings have been established in LMS.</p> <p>Monthly Community Learning Forums and Town Halls on various topics including Day Programs, College Support, Transitioning to Secondary Education</p> <p>Aging Adult Specialist position vacant as of Dec 2023 due to promotion.</p>
	<p><b>1.B.3</b> 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.</p>	<p>Staff will be trained on Person Centered Planning</p>	<p><u>CIPP Manual Training</u></p> <ul style="list-style-type: none"> <li>• Completion: The new PCIPP manual training was finalized in November 2023.</li> <li>• Staff Training: All staff completed training on the manual by January 2024.</li> <li>• Onboarding: A new PCIPP training for onboarding staff was also rolled out in January 2024.</li> <li>• Feedback Mechanism: A survey is being developed for Community Service Coordinators (CSCs) to gather feedback on the new manual, checklists, and tools provided. This will allow ample time for input on the training materials currently in circulation.</li> </ul> <p><u>IPP Feedback Survey</u></p> <ul style="list-style-type: none"> <li>• Launch: In June 2024, NLACRC initiated an IPP feedback survey aimed at all service coordination staff.</li> <li>• Purpose: The survey is designed to identify additional tools needed for effective IPP writing, ensuring that staff have the necessary resources to support their work.</li> </ul> <p>These initiatives demonstrate NLACRC's commitment to continuous improvement and responsiveness to staff needs, enhancing the quality of service delivery.</p>

	<p><b>1.B.4</b> Develop best practices training and training methods, including training assessments, for staff that builds trust and long-standing relationships between Regional Center staff and consumers with measurable results.</p>	<p>Expand on Inclusion, Equity, and Diversity to be empathic and sensitive</p>	<p><u>Quarterly DEIB Training</u></p> <ul style="list-style-type: none"> <li>• Program Title: "Equity &amp; Cultural Humility as Vehicles to Deepen Impact."</li> <li>• Completion: Four sessions were conducted by the end of June 2024, comprising three in-person and one virtual session.</li> <li>• Focus Areas: Sessions 2 and 3 emphasized: <ul style="list-style-type: none"> <li>○ Empathy</li> <li>○ Equity</li> <li>○ Access to Services</li> <li>○ Cultural Humility These topics are crucial for enhancing understanding among staff regarding the individuals and families they serve.</li> </ul> </li> </ul> <p><u>Train-the-Trainer Program</u></p> <ul style="list-style-type: none"> <li>• Participants: Eight NLACRC staff members are currently involved in this program.</li> <li>• Goal: To equip these trainers to deliver ongoing training to new hires, ensuring that cultural humility and equity are integral parts of the onboarding process.</li> <li>• Completion Timeline: The program is expected to be completed by August 2024.</li> </ul> <p>These initiatives reflect NLACRC's commitment to fostering an inclusive and culturally competent environment, enhancing the skills of staff to better serve the community.</p>
<p><b>Outreach Focus Area 1.C.</b></p>	<p><b>1.C.1</b> Partner with diverse organizations in our community to help raise awareness of the Regional Center and its services and supports to ensure equal access and opportunity for those that may be eligible for Regional Center services. Outreach may include medical and maternity community and local clinics, school districts and early education programs, Los Angeles LGBT Center, and others.</p>	<p>Expand partnerships in the community that will help raise awareness and create access and opportunities.</p>	<p><u>Community Partnerships</u></p> <ul style="list-style-type: none"> <li>• Collaborations: NLACRC has partnered with a variety of diverse organizations to enhance community awareness and connection. Key collaborators include: <ul style="list-style-type: none"> <li>○ School Districts: LAUSD, Saugus USD, Palmdale School District, Hart District, and Castaic USD.</li> <li>○ Community Organizations: Early Learning Institute, Integrated Community Collaborative, Tierra Del Sol, New Horizons, The Empower Them Co, DV United, Acorns2Oak, USC, and Quality Care ILS.</li> </ul> </li> </ul> <p><u>DEIB Team Engagement</u></p> <ul style="list-style-type: none"> <li>• Outreach Activities: During this period, DEIB team members established connections with community organizations across all catchment areas: <ul style="list-style-type: none"> <li>○ San Fernando Valley (SFV): 204 contacts established.</li> <li>○ Santa Clarita Valley (SCV): 55 contacts established.</li> <li>○ Antelope Valley (AV): 84 contacts established.</li> </ul> </li> </ul> <p>These initiatives reflect NLACRC's commitment to fostering collaboration and ensuring that vital resources and support are accessible to families and individuals in the community.</p>

	<p><b>1.C.2</b> Develop outreach materials and efforts:</p> <ul style="list-style-type: none"> <li>- Early Start Outreach Postcards</li> <li>- Early Start educational and testimonial video</li> <li>- Explore creation of a Parents Speaker Bureau to act as community liaison.</li> <li>- Target genetic council centers and services (never too early!).</li> </ul>	<p>NLACRC will continue to develop outreach materials, both electronically and physically, to ensure access in areas where technology is limited.</p>	<p><u>Outreach Activities</u></p> <ul style="list-style-type: none"> <li>• Community Engagement: The Outreach Language Specialist has been actively connecting with various Community Based Organizations (CBOs) and schools within the NLACRC catchment area to provide information on common services, brochures, and resources like the consumer family guide and 1st Five California.</li> <li>• Presentations: Professional presentations have been conducted for CBOs and school districts, where the DEIB team shares outreach materials.</li> </ul> <p>Informational Sessions (October to December 2023)</p> <ul style="list-style-type: none"> <li>• Connections Made: DEIB team members engaged with 20 different organizations through 4 informational sessions focused on services for families with children ages 0-3.</li> </ul> <p>Materials Distributed:</p> <ul style="list-style-type: none"> <li>○ 175 general information brochures</li> <li>○ 163 DDS Early Start referral flyers</li> <li>○ 448 common services brochures</li> </ul> <p>Informational Sessions (January to March 2024)</p> <ul style="list-style-type: none"> <li>• Parent and Family Support specialists have held sessions for a diverse group of early childhood educators.</li> <li>• Spanish-Speaking Outreach: A specialist has been assigned to train and assist medical providers regarding regional center services and early start eligibility.</li> <li>• Tribal Community Collaboration: A partnership has been established with a tribal organization in the AV area for ongoing information sharing.</li> <li>• DEIB Collaboration: DEIB specialists are working with Head Start and Early Head Start programs to engage families in sessions and outreach events focused on early childhood development.</li> <li>• Outreach Efforts: Contact has been made with 20 programs serving children 0-3, and new outreach initiatives have been launched at Library Story Times.</li> </ul> <p>Materials Distributed:</p> <ul style="list-style-type: none"> <li>○ 419 General Information English</li> <li>○ 286 General Information Spanish</li> <li>○ 233 Common Services English</li> <li>○ 1 Common Services Spanish</li> <li>○ 43 Consumer &amp; Family Guides English</li> <li>○ 32 Consumer &amp; Family Guides Spanish</li> <li>○ 85 Service Description English</li> <li>○ 60 Service Description Spanish</li> <li>○ 1 Insert Tagalog</li> <li>○ 1 Insert Farsi</li> <li>○ 36 Inserts Armenian</li> </ul>
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			<p>Support Initiatives</p> <ul style="list-style-type: none"> <li>• Training for Educators: Parent and Family Support specialists conducted sessions for early childhood educators.</li> <li>• Collaboration: A Spanish-speaking outreach specialist provides training to medical providers regarding regional center services and Early Start eligibility. Connections with tribal organizations and collaborations with Head Start programs are ongoing.</li> <li>• Resource Distribution: Transition brochures for children moving from Early Start to school were created and distributed, along with an Early Start educational video available in English and Spanish.</li> </ul> <p>Referral and Outreach</p> <ul style="list-style-type: none"> <li>• Family Focus Resource Center (FFRC): 341 families were referred to FFRC during Q4 for support.</li> <li>• NICU Collaboration: Ongoing relationships with NICUs ensure accurate information is provided to parents of medically involved babies.</li> </ul> <p>These efforts highlight NLACRC's commitment to community engagement and support for families with young children.</p>
<p><b>Providing Diverse Access Information Focus Area 1.D.</b></p>	<p>1.D.1 Define a Multi-cultural Communication Plan that embraces target audience.</p>	<p>Increase Awareness of Multi-Cultural Language Access Plan</p>	<ul style="list-style-type: none"> <li>• Support Groups: The plan includes establishing support groups for various ethnic groups, specifically targeting Armenian, Filipino, and Farsi-speaking families.</li> <li>• Translation Efforts: Multiple case management forms and literature have been translated into Tagalog, Farsi, and Armenian to enhance accessibility.</li> <li>• Cultural Humility Training: DEIB Cultural Humility Trainings began on September 5, 2023, for employees in Santa Clarita and San Fernando Valley, with the first round of sessions completed this quarter.</li> <li>• Feedback Sessions: Outreach language specialists held focus sessions in Armenian, Farsi, Tagalog, and Spanish to gather feedback on translated publications, with a summary to be shared at the disparity committee in May for future planning.</li> <li>• Internal Document Translations: Various internal documents have been translated into Farsi, Tagalog, and Armenian, with consumer and family guides and service standards pending printing.</li> </ul> <p>These efforts aim to foster inclusivity and ensure that resources are accessible to all families.</p>

	<p>1.D.2 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. REWORDED</p>	<p>Increase Staff Awareness on Language Access and Commonly Used Verbiage</p>	<p>NLACRC launched a cultural humility training program in September 2023, consisting of three sessions aimed at enhancing multicultural awareness. From October to December 2023, 342 staff members attended nine training sessions led by consultants from Bridging Voices.</p> <p>The second session began in January 2024, with plain language training set to start in February 2024 for various staff cohorts, focusing on creating accessible materials in multiple languages (Farsi, Armenian, Tagalog, and Spanish).</p> <p>By June 2024, all staff, including new hires, completed the required cultural proficiency training, which included four sessions (three in-person and one virtual). A Train-the-Trainer program on “Equity &amp; Cultural Humility” is also underway to ensure ongoing training for new employees. Additionally, a website redesign is in progress to improve user accessibility for consumers and families.</p>
	<p>1.D.3 Create focus groups to review and evaluate major communication efforts for individuals and families to ensure materials are meeting the Multi-cultural Communication Plan. REWORDED</p>	<p>Communications, brochures, pamphlets, and materials will be in easy-to-read format and be culturally sensitive.</p>	<p>NLACRC regularly invites various community-based organizations to quarterly roundtable discussions aimed at improving services for clients. The DEIB team met in October 2023 to plan future meetings and topics.</p> <p>In February and March 2024, outreach language specialists fluent in Spanish, Tagalog, Farsi, and Armenian conducted focus sessions to gather feedback on translated publications and identify additional resources needed for better language access. These specialists held sessions in each language to assess the effectiveness of the translations, and a summary of the feedback was presented to the disparity committee for future planning.</p> <p>Ongoing evaluations of plain language translations in Armenian, Farsi, Tagalog, and Spanish are also part of NLACRC’s future initiatives.</p>
	<p>1.D.4 Conduct quality assurance for a sampling Individual Program Plans for training opportunities. Case management for the position</p>	<p>Quality assurance</p>	<p>As of September 2023, NLACRC audited 113 Individual Program Plans (IPPs) for quality assurance and is developing training and reference tools for current and new Community Service Coordinators (CSCs) focused on IPP quality improvement. Key training areas identified include:</p> <ul style="list-style-type: none"> <li>• Identifying new needs and outcomes or justifying existing ones</li> <li>• Providing factual support for needs</li> <li>• Developing observable, measurable, and time-limited goals</li> </ul> <p>By December 2023, 150 IPPs had been audited. A refresher course on person-centered IPP writing was rolled out, with a deadline of January 5, 2024, and new staff orientation training was completed for implementation in January 2024.</p>

			<p>As of March 31, 2024, NLACRC continued quality assurance audits, providing monthly reminders about reference tools, and enrolling 48 onboarding CSCs in the new staff orientation. They began auditing IPPs written after the rollout of reference tools, aiming to audit an additional 150 IPPs by December 31, 2024. Reference materials for Early Start CSCs are also being developed.</p> <p>By June 30, 2024, 74 onboarding CSCs had participated in the orientation, and ongoing audits continued to assess quality improvements.</p>
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<b>Focus Area 2 - Development &amp; Growth of an Engaged Workforce</b>			
	<b>Specific Strategy</b>	<b>Goal/Objective</b>	<b>FY 2023-24 Update/Highlights</b>
<b>Training and Development Focus Area 2.A.</b>	2.A.1 Provide formal training within each department – initial & ongoing training in skill development, education, and system knowledge, etc. ensuring accuracy in communicating with individuals, families, and other key stakeholders regarding services and supports policies, procedures, and changes to policies, as well as reflecting the organization’s core values.	Increase knowledge, skills, and abilities of all employees.	<p>Total Technical Training Hours for FY23-24 45,402</p> <p>Total Non-Technical Training Hours for FY23-24 32,180</p> <p>Pre/Post survey data for all trainings sent to the Executive Team.</p>
	2.A.2 Develop consistency in onboarding procedures across departments.	Consistency in Onboarding Process	<p>Day 1 of all NSOs, staff continue to receive a packet via email of all NSO instructions to access training. Day 2 NSO Training Protocols with Training Unit implemented to go over mandatory training and NSO training learning path. Recap email sent to all trainers with checklist of mandated trainings to complete. (HIPAA, Harassment Prevention, COVID-19, National Voter Registration Act, Mandated Reporter - to applicable staff).</p> <p>Total Number of NSOs: 421</p> <p>Pre/Post survey data for all trainings sent to the Executive Team.</p>
	2.A.3 Create/provide and market pathways for career advancement and professional development.	Provide pathways for careers advancement and professional development.	HR leadership participated in the Career Technical Education (CTE) Advisory Committee for LAUSD's Division of Adult and Continuing Education (DACE); presented and advocated for a Social Service Coordination career path educational program as alternative experience for entry-level CSCs (and/or a new position not yet established).



<p>2.A.4 Align employee selection, onboarding, training, and evaluations with our organizational values.</p>	<p>Promote organizational values in all facets of the onboarding process.</p>	<p>FY23-24 Staff performance management evaluations identify seven (7) success factors. Those which tie into organizational values:</p> <table border="1"> <thead> <tr> <th><u>Factor #/Name</u></th> <th><u>Core Value Correlation</u></th> </tr> </thead> <tbody> <tr> <td>4 - Relations with People</td> <td>Inclusivity/Belonging</td> </tr> <tr> <td>5 - Initiatives &amp; Judgment</td> <td>Empowerment</td> </tr> <tr> <td>7 - Meeting Work Commitments</td> <td>Creativity/Innovation</td> </tr> </tbody> </table>	<u>Factor #/Name</u>	<u>Core Value Correlation</u>	4 - Relations with People	Inclusivity/Belonging	5 - Initiatives & Judgment	Empowerment	7 - Meeting Work Commitments	Creativity/Innovation
<u>Factor #/Name</u>	<u>Core Value Correlation</u>									
4 - Relations with People	Inclusivity/Belonging									
5 - Initiatives & Judgment	Empowerment									
7 - Meeting Work Commitments	Creativity/Innovation									
<p>2.B.1 Examine the impact of Healthy Work/Life Balance including remote and hybrid work options on job satisfaction and retention.</p>	<p>Increase healthy work life balance and satisfaction.</p>	<ul style="list-style-type: none"> <li>• NLACRC continues to offer: <ul style="list-style-type: none"> <li>○ Hybrid schedule options available to most positions</li> <li>○ 8 schedule types offered including flex (9/80) work options</li> </ul> </li> <li>• Work Tango was selected for external Satisfaction Survey</li> </ul>								
<p>2.B.2 Review technology to provide quantitative data metrics.</p>	<p>Assess current systems related to technology.</p>	<p><u>Technology related activities:</u></p> <ul style="list-style-type: none"> <li>○ Lack of Responsiveness of IT Staff - The IT Support Manager and IT Director monitored the responsiveness of IT Staff monthly to ensure that calls are being answered and investigated any tickets that do not meet the service levels.</li> <li>○ Dignity and Respect - All IT staff attended DEIB Training. At unit meetings we regularly discuss the stress that all staff are experiencing and the need to remain calm and supportive. We hold each other accountable to this standard.</li> <li>• IT Training <ul style="list-style-type: none"> <li>○ SANDIS training videos were recorded so that training on SANDIS is available on demand.</li> <li>○ Emergency Management - The Emergency Management Specialist delivered classes at NSO to educate about emergency management and planning for staff and consumers. In Q2 an Emergency Management micro-learning video plan will be developed in conjunction with the Training Department. The goal is to improve our ratings in the NCI around consumer awareness and preparedness for emergencies.</li> <li>○ IT Trainer - Training position targeted at teaching people to utilize our technology was opened in September 2023. Position was put on hold in Q4.</li> <li>○ Go Kit Trainings – 9 were scheduled; 4/consumers and 5/CSCs</li> <li>○ Phishing test remediation training has been completed and report has been finalized.</li> <li>○ Another Phishing test and remediation have been completed. Report was presented to the management team.</li> </ul> </li> </ul>								

			<p><u>Infrastructure changes:</u></p> <ul style="list-style-type: none"> <li>• VPN <ul style="list-style-type: none"> <li>○ Conversion to the new VPN was done in December 2023. A plan was developed to replace the Sophos VPN with the new Palo Alto VPN which will provide greater throughput and security.</li> <li>○ Equipment delivery delayed.</li> <li>○ Palo Alto Firewall equipment has been received and configuration data from the old Firewall is being collected. Additional parts needed to be ordered.</li> <li>○ Sophos VPN client was discontinued and Palo Alto client has been installed for staff that is unable to use AOVPN solution.</li> <li>○ Palo Alto firewalls have been installed at all locations.</li> </ul> </li> <li>• ISP <ul style="list-style-type: none"> <li>○ A plan was developed to install the new Palo Alto equipment and upgraded Internet speed. ETA for installation is Q2, December 2023.</li> <li>○ Circuits were installed in all offices.</li> <li>○ Circuits require extension to the data centers in their respective buildings</li> <li>○ All circuits have been installed and put in production at all locations.</li> </ul> </li> <li>• IT Survey <ul style="list-style-type: none"> <li>○ Fall 2023 IT Survey - IT reviewed questions in preparation for the IT Survey which will be conduct in Q2. The results will be compared to the Fall 2022 IT Survey to determine progress and additional focus areas.</li> <li>○ Survey was available to users from February 5 to March 8, 2024.</li> <li>○ Survey was conducted with more than double responders vs previous year. IT worked with individuals who responded negatively to understand what their issues are and help to resolve. Executive summary was presented to the Leadership Team.</li> </ul> </li> </ul>
	<p>2.B.3 Interview Staff to find manual-intense workload areas that can be streamlined.</p>	<p>Gather input from staff on how to streamline work</p>	<ul style="list-style-type: none"> <li>• Data Cleanup <ul style="list-style-type: none"> <li>○ IPP history data was targeted for cleanup. Incorrect history dates prevent processing of IPPs and Addendums. Records and Document Management (RDM) took over the cleanup of history for Lanterman cases in July of 2023. Cleanup will continue through the end of FY24.</li> <li>○ Averaging approximately 2455 IPPs locked, distributed and history corrected each month.</li> <li>○ IPP history data was targeted for cleanup. Incorrect history dates prevent processing of IPPs and Addendums. Records and Document Management (RDM) took over the cleanup of history for Lanterman cases in July of 2023. Cleanup will continue through the end of FY24.</li> </ul> </li> <li>• Template Changes <ul style="list-style-type: none"> <li>○ Incorrect templates create confusion and delay work. Template cleanup</li> </ul> </li> </ul>

			<p>processes were implemented this quarter. We created new processes to ensure that all departments reviewed the proposed changes before they are implemented.</p> <ul style="list-style-type: none"> <li>• Modernization Committee <ul style="list-style-type: none"> <li>○ Reviewed Charter</li> <li>○ Completed DDS Validation of requirements for SANDIS &amp; UFS replacement in preparation for RFP - Submitted 12/8/23</li> <li>○ Discussed HIPAA Privacy and proposed improvements</li> <li>○ Reviewed Active IT Projects</li> <li>○ Discuss Activities for Transparency Page coordinated by ARCA, creating consistency across all Regional Centers</li> <li>○ Discussed DDS Service Provider Directory pilot</li> <li>○ Discussed HIPAA Risk Assessment to be conducted in Jan - Feb 2024</li> <li>○ Discussed IBM migration to CloudSafe</li> <li>○ Scrive Usage</li> <li>○ Migration away from GovOS (Seamless)</li> <li>○ Use of MS Teams Premium</li> </ul> </li> <li>• Vendor Portal <ul style="list-style-type: none"> <li>○ IT worked on creating a Vendor Portal utilizing SharePoint online to enable a secure data sharing with our Vendors. The process of files to be uploaded to the SharePoint site has been coded and tested. Currently working on the security part of the project. ETA for project completion to enable POS Authorization data sharing is by the end of June 2024. Once completed, IT will work on implementing the same process for other file types.</li> </ul> </li> <li>• Active Projects <ul style="list-style-type: none"> <li>○ Security/Compliance/Business Continuity - 21</li> <li>○ Visibility/Productivity/Efficiency – 58</li> </ul> </li> <li>• Human Resources Process Review <ul style="list-style-type: none"> <li>○ HR department team members interviewed in QTR4 to identify manual intradepartmental processes and suggestions for automation and/or digital improvement. HR to investigate use of secured and confidential digital filing storage structure applications for HR documents in FY 24-25.</li> </ul> </li> </ul>
	<p>2.B.4 Support Supervisors to do their job more efficiently by eliminating manual labor.</p>	<p>Gather input from leadership on how to streamline work</p>	<p>Monthly Meetings and Projects - Monthly meetings were held to address project activity and upcoming needs. We gathered information and completed the following projects:</p> <p><u>Accounting - POS Analysis</u>  Completed the replacement of a very old program with new Power BI analysis tool enabling POS invoices to be processed more quickly. There was a significant amount</p>

			<p>of data cleanup before the data could be used.</p> <p><u>Case Management - Dashboard and Reporting</u> Case Management has defined reports that will help them be more efficient with the balancing of caseloads between staff, and the tracking of IPPs. There was a significant amount of data cleanup before the data could be used. Reports were rolled out in November 2023. Case Management report programming and data cleanup was completed. It was decided that a pilot would be the best way to gather additional feedback. The PowerBI Dashboard has been published for supervisors to be able to track and pull data made available on the dashboard.</p> <p><u>SIR Reports</u> Completed the replacement of old databases that failed regularly and required a lot of manual entry. Added outcomes to the board report. There was a significant amount of data cleanup before the data could be used.</p> <p><u>Project Management</u> SmartSheets was selected for our project management tools. All 72 IT project plans were entered into the tool by December 31,2023. A report was presented at the Modernization Committee and the Executive Leadership Team by December 31, 2023. The level of information and prioritization of projects was approved by both teams. Projects will be updated monthly and posted on the Modernization Teams site.</p> <p><u>Scrive</u> Scrive training was rolled out to staff in May 2023 and is available in the eLearning catalogue in LMS and is part of the new hire learning path.</p> <p>Build Out – SCV conference room has been completed.</p>
	2.B.5 Practice quality hiring practices.	Expand upon best practices for hiring	<p>Turnover rate for 1st Quarter of FY 23-24:13.30%</p> <p>Turnover rate for 2nd Quarter of FY 23-24: 11%</p> <p>Turnover rate for 3rd Quarter of FY 23-24:4.5%</p> <p>Turnover rate for 4th Quarter FY23-24: 2.8%.</p> <p>Overall, NLACRC FY24 staff retention improved, year-over-year, by 3.7%</p>

	2.B.6 Examine Exit Interviews in depth and create Action Plans from feedback, when possible.	Enhance efforts to understand the factors related to exit and apply strategies to foster retention.	<p>1<sup>st</sup> Quarter of FY23-24: 36 Exit Interviews conducted: Service Retirement (3) Other Employment (15) Personal (14) Family Reasons (2) Relocation (2)</p> <p>2<sup>nd</sup> Quarter of FY23-24: 30 Exit Interviews conducted: Service Retirement (6) Other Employment (9) Personal (8) Medical (2) Relocation (4) Working Conditions (1)</p> <p>3<sup>rd</sup> Quarter of FY23-24: 17 Exit Interviews conducted: Service Retirement (2) Personal (8) Family Reasons (5) Relocation (2)</p> <p>4<sup>th</sup> Quarter of FY23-24: 20 Exit Interviews conducted: Misconduct (2), Other (3), Relocation (1), Retirement (2), Personal (12)</p>
	2.B.7 Hold an annual Employee celebration to share successes and accomplishments.	Employee recognition	<p>October 2023: Harvest Festival events occurred at each location. December 2023: Winter Employee Appreciation events occurred at each location. March 2024: 50<sup>th</sup> Anniversary Ice Cream Social occurred at each location. May 2024: Consolidated All Staff Employee Appreciation event with the Service Awards (600+ employees attended)</p>
<b>Promoting Teams and Teambuilding Focus Area 2.C.</b>	2.C.1 Assess workload issues by job classifications and address workload imbalance.	Review classifications and workload imbalances.	<p>In FY23-24, NLACRC had an average 134 open CSC positions.</p> <p>In Quarter 4, NLACRC hired 62 CSCs.</p> <p>Additional qualitative review of positions occurred to identify time-to-fill processing obstacles.</p>
	2.C.2 Explore team structure by areas of expertise, knowledge, skill-base, and/or experience.	Assess current team structures	Due to changes in HR management staff, no activity took place during FY23-24.

	<p>2.C.3 Utilize Information Technology to help build/support team structures.</p>	<p>Increase use of effective technology.</p>	<p>Security Awareness - Training continues with monthly Ninjio training and regular emails from IT regarding phishing attempts and other security risks that have been identified through security bulletins, in the news and through our very diligent staff.</p> <p>SANDIS Sandbox - A training environment was developed in conjunction with DDS and SANDIS to allow for a training environment to assist in the training and testing of incoming staff. We are the only Regional Center that has such capability.</p> <p>Vendor Portal - IT created a Vendor Portal utilizing SharePoint online to enable secure data sharing with our Vendors. Pilot group of vendors was identified and successfully tested the system for the delivery of POS Authorizations. After Go-Live, IT will work on implementing the same process for other file types. Security Awareness - Training continues with monthly Ninjio training and regular emails from IT regarding phishing attempts and other security risks that have been identified through security bulletins, in the news and through our very diligent staff.</p> <p>E-Signature Usage - IT identified that esignature usage was low and discussed this with Modernization Committee. The barriers to utilization were discussed and within 1 month, the usage has increased significantly. E-Signature continues to be an issue due to the lack of familiarity and comfort of some of our community with receiving emails. Much of our community prefers to text. Staff prefer to take paper signature pages with them.</p> <p>Micro-Learnings - Scrive has been completed.</p>
	<p>2.C.4 Create training tools database to support supervisors in training their teams.</p>	<p>Promote training tools and resources for a growing workforce.</p>	<p>In FY23-24, NLACRC had an average of 500 active training resources and 288 archived training resources.</p>
	<p>2.C.5 Create opportunities for staff to be involved in cross departmental efforts.</p>	<p>Solicit staff to be involved and to help improve processes.</p>	<p>June 2024 – NLACRC conducted all-staff anonymous survey for input data for Workplace Violence Prevention Program plans for each office; HR received &gt;140 responses and amended plans to reflect requests for training, communications media, etc.</p>

**Focus Area 3- Employment and Day Services**

Sub Area	Specific Strategies	Goal/Objective	FY 2023-24 Update/Highlights
<p align="center"><b>Training, Education and Awareness Focus Area 3.A.</b></p>	<p>3.A.1 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.</p>	<p>Increase awareness on potential opportunities</p>	<p>80 resources were shared via News You Can Use, electronic communication, and social media platforms.</p>
	<p>3.A.2 Support Individuals to sustain employment, once achieved, including helping individuals understand the benefit of employment support/service to help individuals succeed.</p>	<p>Supporting individual's success in employment</p>	<p>IPPs Reviewed: 785 IPPs with Employment Goals: 476 Workshops Offered: 19</p>
	<p>3.A.3 Continue to train staff on employment/day opportunities, assessing of employment goals, creative planning, and personal growth (life skills, vocational skills, education, job development and growth) for each individual - transition age youth (~14 years of age) through retirement.</p>	<p>Continued focus on staff training.</p>	<p>Staff trainings on employment/day opportunities: 12 Addendums added to IPPs relating to employment plans/goals: 169</p>
	<p>3.B.1 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.</p>	<p>Partner with local businesses</p>	<p>Partnership contacts with local businesses: 18  Employment Specialist onboarded in March 2024.</p>
	<p>3.B.2 Help connect the Regional Center with employers in our local communities and educate employers on how NLACRC and people served can benefit their company and their workforce.</p>	<p>Increase contacts and partnerships with employers</p>	<p>Partnership contacts with employers: 167</p>
	<p>3.B.3 Utilize the 1-year workforce grant to the hire a specialist level position to do outreach activities in the business community about the benefits of hiring individuals with developmental disabilities and support development of relationships between providers and community employers.</p>	<p>Increase contacts and partnerships with employers</p>	<p>Resources shared: 76 Calls to employment hotline: 60 Outreach/Network/Info Workshops: 45</p>

	3.B.4 Increase utilization of incentives to promote employment and vocational outcome.	NLACRC will increase utilization of incentives to promote employment and vocational outcomes.	Vendors requesting CIE incentives: 62 IPPs reviewed for employment goals: 785
<b>Improve Information and Needs Assessment Focus Area 3.C.</b>	3.C.1 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.	Hosting events and partners	Outreach/Networking/Info Workshops: 31 Resources Shared: 40
	3.C.2 Explore utilization of the 1-year workforce employment grant staff to develop and implement an employment “hotline”.	Service Access and Equity Workforce Grant	Hotline calls: 96 Service Access and Equity Workforce Grant closed in April 2024.
<b>Resource and Fund Development Focus Area 3.D.</b>	3.D.1 Connect people served/families with Small Business Administration (SBA), Los Angeles County (or other vendors) workshops on starting your own business.	People served/ Families /Vendors will partner with Small Business Administration	Continued collaboration with ICC to discuss community workshops and Micro-Enterprise Flea Market.
	3.D.2 Collaborate with service providers and partners to increase independent employment by supporting, where possible, providers to explore grant opportunities for Micro Enterprises.	Promote Microenterprises	September 2023 meeting with Integrated Community Collaborative (ICC) to discuss Microenterprise fair for March 2024. ICC cancelled Micro-Enterprise Fair 10/21/2023 due to unforeseen circumstances and will reschedule. ICC was scheduled to provide CIE training in Spanish with English translator.  Expanded community resource search to include SBA – identification of contact, resources, and supports is anticipated after onboarding of Employment Specialist in March 2024.



Focus Area 4 – Health and Wellness			
Sub Area	Specific Strategies	Goal/Objective	FY 2022-23 Update/Highlights
<b>Training, Education and Awareness Focus Area 4.A.</b>	4.A.1 Provide training on general mental health conditions, generic resources and crisis services to individuals and families, Regional Center staff, providers and other community stakeholders and partners.	Training on health and wellness topics, generic resources, and crisis services for staff and community partners, including crisis services	Q1 Activity: Publication of a webpage on generic mental health and wellness resources: <a href="#">Mental Health &amp; Wellness -North Los Angeles County</a>  Q2 Activity: Planning of a workshop hosted by LADMH for CM Leadership staff.  Q3 Activity: LADMH presented to our CM Leadership staff, providing information on the available mental health resources they offer to the community.  Q4 Activity: Planning began for the following topics for FY24-25: <ul style="list-style-type: none"> <li>○ Meditation Basics</li> <li>○ Summer Heat Safety</li> <li>○ Back-to-School Planning</li> </ul>
	4.A.2 Engage individuals/families in mental health discussions through expanding support groups with additional support provided, if requested, via guest speaker, etc.	Promote discussions with supports groups and individuals served on health and wellness topics.	HR began initial planning conversations with ComPsych (a.k.a. Guidance Resources) to provide health/wellness training topics in Q1/Q2 2025.  Financial matters (money stress) impact health/wellness concerns, therefore, plans for "Financial Wellness" seminar scheduling to occur for Q1/Q2 2025 as well.
	4.A.3 Connect with Family Focus Resource Center (CSUN), State Council on Developmental Disabilities (SCDD), others on existing Health & Wellness resources that can be used in communications for <i>News You Can Use</i> , social media townhall, Cafecito training opportunities or other.	Include health and wellness component into grassroots outreach efforts and partnerships with stakeholders.	In addition to the FFRC and SCDD, we have made progress in reaching out to LA Care - and have their permission to post information on their health and wellness programs and activities (which are all free of charge) for Pacoima and Palmdale offices.  We will be seeking to expand and provide more community resources on the webpage.  NLACRC staff to receive a quarterly wellbeing newsletter.
	4.A.4 Develop a taskforce or committee/mental health (or explore existing taskforces).	Develop or join existing taskforce or workgroup related to health and wellness.	Due to Staff transition, entry to the LADMH Advisory Taskforce was delayed, with pursuit now targeted for Q1/Q2 2025.

	4.A.5 Explore the feasibility of creating a staff position of mental health specialist position to facilitate engagement with case management to help raise awareness of mental health issues, early warning signs/needs, etc.	Adding a mental health specialist can enhance early detection and support for individuals, improving their mental well-being	Currently Mental Health Specialist work is being completed by the HR Department.  Goal to hire Mental Health Specialist by FY 2026-2027.
	4.A.6 Promote use of Human Resource Employee Assistance Program (EAP) services to support employee health and wellness.	Promotion of Employee Assistance Program	EAP carrier reports usage on calendar year basis. ""Combined Access"" = confidential EAP counseling, FamilySource childcare assistance, FinancialConnect assistance, Health/Wellness assistance, and LegalConnect (legal forms/attorney assistance)  2022: 25 Combined Access visits 2023: 37 Combined Access visits; 48% increase over 2022 2024: 17 Combined Access visits (Jan 1-Jun 30)

Focus Area 5 – Housing			
Sub Area	Specific Strategies	Goal/Objective	FY 2023-24 Update/Highlights
Training, Education and Awareness Focus Area 5.A	5.A.1 Train people served/families of all housing options and generic services.	The community will be informed of Regional Center housing options, generic resources and supports available for housing.	At the July 27th NLACRC Virtual Townhall, Community Services shared instructions on using the Affordable/Accessible Housing Website. This included account creation and filtering options on the LAHD website, which covers all NLACRC consumer areas  NLACRC Expo on May 11, 2024 in Antelope Valley and on May 17, 2024 in San Fernando Valley with Housing Section consisted of resources and vendors on housing options and breakout panel presentation.  Community Learning forum held in May 2024 on the topic of residential services.
	5.A.2 Train CSCs to ensure staff are aware of all housing options and generic services that support housing choices; and that CSCs engage in milestone planning that supports people served as they increase their independence. Milestone planning may include identifying needed resources, skill development, financial considerations, different housing options, and milestones.	All Case Management staff will be competent in facilitation and education on the options of housing.	New Hires are provided with LMS training modules on housing options including the various types of residential home settings and Supported Living Services. These modules are available for all staff to access once training is complete and can be used for reference.

	5.A.3 Utilize outreach – brochures, NLACRC.org or other– to increase awareness of information on housing options and generic supports for pursuing housing goals.	Disseminate information on housing options, generic resources and supports available for housing in multiple languages that reflect NLACRC's community.	Links published on the Housing webpage include: -California Department of Housing and Community Development -LA County Affordable Housing -Housing Authority of the County of Los Angeles -Housing Authority of the City of Los Angeles -Orange County Housing Authority -San Diego Housing Commission -Habitat for Humanity of Greater Los Angeles -Mercy Housing for California -Southern California Association for Nonprofit Housing
<b>Impacting the Availability of Housing Focus Area 5.B</b>	5.B.1 Support and work with ARCA to support legislation that provides for greater housing options, including Additional Dwelling Units (ADUs), for people we serve.	Collaborate and partner with ARCA to sponsor and address legislation to advocate for increased housing options.	ARCA's Board of Directors adopted Budget priorities for Fiscal Year 2024-25 that include prioritizing truly affordable housing for people with developmental disabilities in projects funded by the Department of Housing and Community Development.
	5.B.2 Advocate for updates for Community Care Licensing through Department of Social Services to better take advantage of housing options.	Collaborate and partner with Community Care Licensing to discuss regulations.	NLACRC & Community Care Licensing (CCL) continue to meet quarterly.
	5.B.3 Continue to apply for housing development funding through the Department of Developmental Services (DDS), including for use of development of Family Home Agencies (FHA)s, as needed and available.	Secure CRDP Funding for Housing Development from DDS.	NLACRC published RFP for FY 23/24 CPP/CRDP Proposal Projects. NLACRC conducted Applicants Conference, Interviews, and awarded project funding for the selected candidates. The following projects were selected and awarded funding: HDO for ARFPSHN and HDO EBSH.  NLACRC was approved the following for FY 23/24 CPP/CRDP Proposal Plan: 1) EBSH for Children 2) EBSH for Adult Male 3) EBSH for Adult Male with delayed 4) Level 4I Substance Abuse & Mental Health 5) HDO for ARFPSHN 6) HDO- EBSH 7) Level 4I For Forensic/Criminal Involved egress

<b>Innovation Focus Area 5.C</b>	5.C.1 Explore creating a position for a Community Housing Liaison to be a bridge between our community, housing experts and internal needs.	Hire a new position to liaison with community, experts, and with staff.	As NLACRC currently has a placement unit, the Community Services department continues to collaborate with the placement team on living options available within our catchment area.
	5.C.2 Collaborate creatively with providers to find solutions to housing options and financial availability.	Develop a Housing Committee comprised of consumers, families, advocates, and providers to collaborate on innovative solutions to the housing needs and resources.	Community Services will explore the implementation of a goal that will include input from parents and consumers in addition to the VAC Adult Committee discussion of housing and Community Services department staff's attendance at the ongoing ARCA Housing Committee meetings.
	5.C.3 Collaborate with providers to create provider succession planning and retain housing options within our community.	Implement within the Housing Committee.	Community Services is generating a residential service provider survey to collect data on current vacancies, training and support needs, and plan to ask the providers about their interest in succession planning.
	5.C.4 Develop and promote knowledge and awareness of housing trusts, housing endowments and other.	Collaboration with Board of Trustees and Parents on possible housing endowments.	Community Services asks the Strategic Planning Committee to please consider revising this goal due to unavailable data to collect based on the recommended metric.

FY 2024-25	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Total Absences	Total Hours
Strategic Planning	Dark		Dark	Dark		Dark			Dark	Dark		Dark		
Vivian Seda, Chair		P											0	0.75
Jennifer Koster, Alt. Chair		P											0	0.75
Nicholas Abrahms		P											0	0.75
George Alvarado		Ab											1	
Lety Garcia		Ab											1	
James Henry		P											0	0.75
Juan Hernandez		P											0	0.75
Anna Hurst		Ab											1	
Ana Quiles		P											0	0.75
Octavia Watkins - VAC Rep		P											0	0.75

Meeting Time 0.75

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)