



North Los Angeles County Regional Center

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

MEMORANDUM

Date: February 24, 2025

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

From: Lindsay Granger
Executive Administrative Assistant

Re: Information and materials for Monday, February, 24, 2025 at 6:00pm
Strategic Planning Committee Meeting

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. Thank you!

Attachments

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STRATEGIC PLANNING COMMITTEE MEETING

Monday, February 24, 2024 – *Via Zoom*

6:00 p.m.

Alternate Chair: Jennifer Koster

Committee Members: Nicholas Abrahms, Lety Garcia, Juan Hernandez, Anna Hurst

VAC Representative: Octavia Watkins

Staff: Angela Pao-Johnson, Executive Director; Evelyn McOmie, Deputy Director; Lindsay Granger, Admin

I. Call to Order & Introductions

II. Agenda

A. Approval of Agenda (*1 min*) *page 3*

III. Public Input – Agenda Items (*3 minutes per person; 3 person limit*)

IV. Consent Items (*2 min*)

A. Approval of November 4, 2024, Minutes *page 5*

B. Approval of Updated Committee List *page 9*

V. Action Items

A. Strategic Plan 2022-26 Update – Angela Pao-Johnson (*15 min*)

1. Strategic Plan FY 2024-25 Q2 Update and Special Contract Language (SCL) Alignment Update *page 10*

B. Performance Contract Update – Angela Pao-Johnson (*15 min*)

1. FY 2024-25 Performance Contract Metric Q2 Update *page 20*

C. Sunset Current Strategic Plan – Angela Pao-Johnson (*20 min*)

VI. Committee Business

A. Semi-Annual Reporting of Competitive Integrated Employment (CIE) Incentive Payment and Paid Internship Program – (*5 min*)

VII. Review of Meeting Action Items (*3 min*)

VIII. Board Meeting Agenda Items (*3 min*)



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- IX. Announcements / Information / Public Input**
 - A. Next Meeting: Monday, May 5, 2025, at 6:00 p.m.
 - B. Committee Attendance *page 35*
 - C. Public Input (*3 minutes per person*)

- X. Adjournment**

North Los Angeles County Regional Center
Strategic Planning Committee Meeting Minutes

November 4, 2024

Present: Vivian Seda, Jennifer Koster, Nicholas Abrahms, Lety Garcia, Juan Hernandez, Anna Hurst, Ana Quiles, Octavia Watkins – VAC Rep., Evelyn McOmie - **Committee Members**

Angela Pao-Johnson, Betsy Monahan, Arshalous Garlanian, Kimberly Visokey, Ana Maria Parthenis-Rivas – **Staff Members**

Mark Wolfe – DDS Tech Advisor, Xochitl Gonzales – DDS, Sofia Rivas, - **Guests**

Absent: George Alvarado

I. Call to Order

Vivian Seda called the meeting to order at 6:02 pm.

II. Agenda

III. Public Input

There was no public input

IV. Consent Items

- a. Approval of Minutes of August 5, 2024 Meeting

M/S/C (Juan Hernandez / Ana Quiles) To approve the Minutes as presented.

V. Action Items

- a. Approval of the updated Critical Calendar

M/S/C (Nicholas Abrahms / Lety Garcia) To approve the Critical Calendar as presented.

- b. Strategic Plan 2022-26 Metric Updates – Angela Pao-Johnson

1. FY 2024-25 Q1 Update

Angela reported on the comprehensive review of policies to align with diversity, equity, inclusion, and belonging values. She highlighted the successful focus group sessions held in various languages, which informed the Disparity Committee's actions. Angela also mentioned the upcoming legislative town hall and the close relationship with local Council members. She discussed the creation of a parent university, new hire trainings, and the rollout of an IPP feedback survey. Angela also mentioned the involvement in the trainer program, community engagement, and the formation of support groups targeting various ethnic groups. She reported on the completion of cultural proficiency training for all staff and the auditing of IPP's for quality assurance. Angela also discussed the creation of Sandis training videos, the replacement of an old program with a new Power BI analysis tool, and the improvement in staff retention. Lastly, she mentioned

the creation of a vendor portal, the review of 785 IPP's, and the initial planning conversations with ComPsych for health and wellness training topics.

Angela continued her update on the first quarter of the fiscal year, highlighting a decrease in turnover rate from 2.3% to 2.08%, a 50% reduction in separations compared to the previous year, and an increase in new hires. Betsy further explained the decrease in turnover, attributing it to a reduction in separations and an increase in hires. Angela also discussed the progress made in the strategic plan focus areas, including the completion of an educational testimonial video, training on person-centered conversations, and the development of an engaged workforce. Octavia asked about the training on cultural humility, which was confirmed by Angela and Evelyn as being conducted for service coordinators and case management staff.

Anna suggests having leadership teams identify their top priorities within each area of the strategic plan, and then highlighting those priorities at the next meeting. The committee agrees this is a good approach to make the plan more focused and manageable. Angela and Ana Maria will work together to coordinate getting input from departments on priorities before the next meeting on February 3rd. The strategic plan runs through 2026, so this prioritization exercise will help determine the key areas of focus for the remaining years of the plan.

c. Performance Contract Quarterly Update – Angela Pao-Johnson

1. FY 2024-25 Performance Contract Metric Q1 Update

Angela presented an overview of the regional center's progress, highlighting the number of consumers in institutional settings and those living in home settings. She noted that 85.2% of adults were living in independent living services, 8.9% in supported living services, and 72.6% with their parents or guardians. Angela also reported that as of September, there were 483 budgets certified and 913 participants who completed orientation. She mentioned that the recruitment of service coordinators was successful, with an average of 10 per month. Angela also discussed the increase in virtual generic resources and the creation of the DEIB Library and coordinating newsletter. She encouraged the team to review the full report for more details.

VI. Committee Business

a. Employee Satisfaction Survey – Betsy Monahan

1. Timeline Update

The survey was launched on October 1st and ran until October 21st, with a response rate of 51.7% from 391 out of 756 eligible employees.

2. Executive Summary – Survey Results

Betsy also presented the results of the survey, stating that the highest scoring factor was 'goals and alignment', with 75.7% of employees feeling their individual purpose aligns with the agency's purpose. The lowest scoring factors were in the compensation and benefits category. The results were compared to those of Columbus Group, with notable correlations.

Betsy discussed the ongoing collaboration with Columbus Group to identify opportunities for improving morale and culture at North La County. She acknowledged the strong sentiments expressed by staff and noted that the open-ended comments aligned with previous group discussions. Betsy also mentioned that several topics were part of active discussions on how to implement changes.

In the meeting, Octavia raised concerns about the low participation rate in the employee engagement survey, which had over 50% participation. Betsy explained that they had not received any distressing emails and had employed a cadence of reminders throughout the three-week survey period. She speculated that some individuals might have opted not to complete the survey due to workloads or not expecting any action. The survey was a 10-minute survey with 53 questions, and it was the first one conducted in a year and a half to two years. Betsy also mentioned the platform's ability to conduct pulse surveys for specific work groups. The team agreed that it was within the typical annual timeframe to run a company-wide survey in October.

b. Review FY 2023-24 Strategic Plan Implementation Matrix Progress Report

Vivian led the discussion on the review of the 2023-24 strategic planning implementation, matrix progress report, as presented in the packet.

VII. Review of Meeting Action Items

- To prioritize pieces of the strategic plan, identify items that align with special contract language, and update the strategic plan report to reflect these priorities. – **Angela Pao Johnson and Anna Maria Parthenis-Rivas**
- Update the board Committee List with James Henry's removal from the strategic planning committee and to add the updated Committee List to the Board of Trustees January meeting Agenda. – **Board Support**
- Add the approved critical calendar to the board meeting agenda items. – **Board Support**

VIII. Board Meeting Agenda Items

- Updated Board Committee List
- Strategic Planning Committee Critical Calendar

IX. Announcements / Information Items / Public Input

- a. Public Input
- b. Next Meeting: Monday February 3, 2025 at 6:00 pm
- c. Committee Attendance

X. Adjournment Vivian Seda adjourned the meeting at 7:16 p.m.

Submitted by:

NLACRC Strategic Planning Committee Meeting Minutes
November 4, 2024

Lindsay Granger
Executive Administrative Assistant

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



BOARD & BOARD COMMITTEE LIST

FY 2024-2025

Board of Trustees

Juan Hernandez—President, ARCA
CAC Alt
Sharmila Brunjes—First V.P., Board
Secretary, and ARCA Alt
Curtis Wang—Second V.P.
Anna Hurst—Treasurer
Leticia Garcia—ARCA Rep
George Alvarado—ARCA CAC Rep
Nicholas Abrahms
Cathy Blin
Jacquie Colton
Alex Kopilevich—VAC Chair
Jennifer Koster
Laura Monge
Jeremy Sunderland
Jason Taketa

Administrative Affairs

Vini Montague, Staff
Danielle Fernandez, Admin
Anna Hurst, Chair
Cathy Blin
[VAC Representative](#)
Jaklen Keshishyan

Consumer Services

Evelyn McOmie, Staff
Sandra Rizo, Admin
Nicholas Abrahms, Co-Chair
Jennifer Koster, Co-Chair
Cathy Blin
Anna Hurst
Laura Monge
[VAC Representative](#)
Sharon Weinberg

Executive

Angela Pao-Johnson, Staff
Arezo Abedi, Admin
Juan Hernandez, Chair
Sharmila Brunjes
Anna Hurst
Curtis Wang
Leticia Garcia

Government & Community

Relations

Chris Whitlock, Staff
Lindsay Granger, Admin
Cathy Blin, Chair
Curtis Wang, Alt. Chair
George Alvarado
Lety Garcia
Juan Hernandez
Jennifer Koster
Laura Monge
[VAC Representative](#)
Jodie Agnew-Navarro

Nominating

Evelyn McOmie, Staff
Lindsay Granger, Admin
Curtis Wang, Chair
Sharmila Brunjes
Lety Garcia
Juan Hernandez
[VAC Representative](#)
Alex Kopilevich

Post-Retirement Medical Trust

Vini Montague, Staff
Danielle Fernandez, Admin
Juan Hernandez, Chair
Angela Pao-Johnson
Vini Montague
Sharmila Brunjes
Anna Hurst

Strategic Planning

Angela Pao-Johnson, Staff
Lindsay Granger, Admin
Chair—*Vacant*
Jennifer Koster, Alt. Chair
Nicholas Abrahms
Lety Garcia
Juan Hernandez
Ana Hurst
Evelyn McOmie, Staff
[VAC Representative](#)
Octavia Watkins

Recruitment

Betsy Monahan, Staff
Lindsay Granger, Admin
Chair—*Vacant (Juan Hernandez?)*
Lety Garcia

Strategic Plan FY24-25 Q2 Quarterly Update and Special Contract Language & Performance Contract Alignment

Specific Strategy	Goal/Objective	FY 24-25 Q2 Update (Data from: October 1st - December 31st)	Status
<p>1.1.1 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>DEIB and HR departments continue to collaborate in reviewing all policies.</p>	<p>Recommend to sunset, refer to SCL I.B.</p> <ul style="list-style-type: none"> Employee Handbook is being reviewed by legal counsel. 23 core policies are being reviewed by legal counsel with recommendations for revisions if needed. If significant changes are required, the Policy & Procedure Workgroup will be assigned to provide a proposal for the Steering Committee to approve.
<p>1.1.2 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>Due to several board resignations in January 2024, NLACRC is in the process of assessing the current board composition. There are a number of promising candidates currently under review.</p>	<p>Recommend to sunset, refer to SCL I.B.</p> <ul style="list-style-type: none"> NLACRC is hiring project managers who will form and facilitate workgroups to continue developing SOPs in aligning with the Special Contract language.
<p>1.1.3 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>1) Focus groups of what is working, what is needed have been established.</p> <p>2) Analysis of POS expenditure data by service type, age, ethnicity, and location been completed as shown in the POS presentation.</p> <p>3) The increase in POS in diverse communities been tracked as shown in the POS presentation.</p> <p>4) Survey and feedback have been conducted from the community and in partnership with support groups and community-based organizations.</p> <p>Comment: Further collaboration to occur at annual POS presentation.as well as ongoing assessment of communication and language needs for the community.</p>	<p>Goal Met – Recommend to sunset</p> <ul style="list-style-type: none"> Focus groups have been developed. NLACRC established a Disparity Committee, which includes CBOs and RC staff. Survey developed and established process to send to consumers and families for input prior to POS public meetings.
<p>1.1.4 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>Number of events related to advocacy: October: 3 November: 0 December: 3</p>	<p>Goal Met – Recommend to sunset</p> <ul style="list-style-type: none"> NLACRC recently hired a Legislative Specialist that has an ongoing legislative efforts aimed at strengthening the approach of services, system level equity, promoting diversity and inclusion, enhancing cultural competency, and improving Purchase of services. Recognizing the growing need for equitable and accessible services, NLACRC is working to: <ul style="list-style-type: none"> Expand access to critical services by ensuring funding and resources are allocated to meet the diverse needs of communities. Enhance cultural competency among NLACRC Staff and service providers through training and policy reforms that promote inclusivity and responsiveness. Support diversity in service delivery by advocating for policies that prioritize minority diverse workforce to mirror our population served. Improve Purchase of Service processes to ensure transparency, efficiency, and equitable access for services. These efforts are essential in creating a more inclusive and effective system that meets the needs of all individuals, especially those from historically underserved populations.

<p>1.1.5 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>1) Trainings/presentations within this period: 1</p> <p>2) Feedback and discussion occurred within the above trainings/presentations.</p>	<p>Goal Met – Recommend to sunset</p> <ul style="list-style-type: none"> NLACRC publishes trainings made available to the community at large via multiple media platforms. Trainings include those by DDS, State Council, OCRA, NLACRC Subject Matter Experts.
<p>1.2.1 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>1) Number of trainings and information provided to people served/families: October: 9 November: 6 December: 7</p> <p>2) During trainings/workshops consumers and families provide their feedback about the trainings/workshops, and what topics they are interested in learning.</p>	<p>Recommend to sunset, refer to SCL IV.B.</p> <ul style="list-style-type: none"> NLACRC has conducted and continues to provide training on education rights and the role of the Regional Center, by the Education Specialist for families going through the IPP and IEP process who need it NLACRC has provided information to the IEP workshops hosted by FFRC Finalizing a training for staff and families to be rolled out Spring 2025
<p>1.2.2 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.</p>	<p>Offer orientations/ trainings on transitioning to adulthood.</p>	<p>1) Number of new orientations/trainings on transitioning to managing their own services offered: October: 1 (Community Learning Forum - IHSS Supports) November: 1 (Community Learning Forum - Mental Health) December: 0</p> <p>2) Status of survey on knowledge of transition/adult services: A survey was not conducted during this quarter.</p> <p>Status on the position of Aging Adult Specialist position: this position remains vacant at this time.</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> Ongoing efforts offering resources available on NLACRC's website, including, informational fairs and ongoing development of a video production series that will highlight the various resources that will be accessible to all families and persons served through NLACRC's Parent University
<p>1.2.3 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.</p>	<p>Staff will be trained on Person Centered Planning</p>	<p>1) Number of Person Centered Plans created: October: 17 November: 12 December: 16</p> <p>2) No survey was conducted in this reporting period.</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> Staff have been trained on Person Centered Planning including the new Person Centered IPP that has been standardized across all RCs effective 1/1/2025. All new staff onboarded are training in Person Centered Planning. A new PCIPP manual was developed in 2023 and all Case Management staff completed PCIPP training by January 2024. Subsequent to that training, all onboarded staff continue to complete PCIPP training. All staff completed additional PCIPP training by outside agency Mains'I in anticipation of the implementation of the new standardized person centered IPP template, and all new staff continue to receive similar training during NSO and by their assigned Lead Trainer CSC.
<p>1.2.4 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.</p>	<p>Expand on Inclusion, Equity, and Diversity to be empathic and sensitive</p>	<p>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 and is scheduled to be rolled out for calendar year 2025 to include in new staff orientation. Further DEIB and empathy trainings options will be assessed for the year.</p> <p>2) Status of survey on satisfaction with experiences with the regional center: NLACRC conducts satisfaction surveys after IPP and IFSP meetings, and when individuals and families are reimbursed for social recreation. NLACRC continues to assess areas of improvement as identified in these satisfaction surveys.</p>	<p>Goal Met – Recommend to sunset</p> <ul style="list-style-type: none"> Met DEIB/Empathy training conducted for all staff for CY2024. Trainings are ongoing for all new staff. DEIB/Empathy training initiatives continue to be assessed each year ongoing. Surveys on satisfaction with experiences with RC continue to be sent out to individuals/families.

<p>1.3.1 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.</p>	<p>Expand partnerships in the community that will help raise awareness and create access and opportunities.</p>	<p>Number of new partnerships (shown below) or expansion of existing partnerships by location: SFV: 88 SCV: 47 AV: 13</p>	<p>Recommend to sunset, refer to Performance Contract</p> <ul style="list-style-type: none"> NLACRC has consistently been reporting out on the expansion of partnerships These activities are ongoing and tracked internally by the DEIB department and are also reported within the Performance Contract
<p>1.3.2 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 counsel centers and services (never too early!).</p>	<p>NLACRC will continue to develop outreach materials, both electronically and physically, to ensure access in areas where technology is limited.</p>	<p>1) Number of ES outreach postcards/materials by location: SFV: 250/Eng, 250/Spa SCV: 125/Eng, 125/Spa AV: 150/Eng, 150/Spa</p> <p>2) <u>Status/Updates:</u> 2.a. ES educational and testimonial video (PSA): Two 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. 317 referrals this quarter. 2.c. Target genetic counsel centers and services: 10/SFV , 3/SCV , 2/AV 2.d. Feedback and/or updates are shared with the respective board committees during regularly scheduled meetings.</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> Early Start, in partnership with Public Information and the DEIB team, continues with outreach efforts year-round and ongoing. Collaboration with multiple community-based organizations, including pediatric medical facilities, high risk clinics and NICU's, cultural organizations, 211, counseling centers, and home visiting and community-based programs such as Child Care Resource Center, Head Start/Early Head Start, Welcome Baby, Black Infant Health, and First 5 LA. Early Start intakes continue to increase each year indicating NLACRC's outreach efforts are effective. Early Start Intake numbers as reported in previous Strategic Plan reports demonstrate an increase in outreach: <ul style="list-style-type: none"> 4344 in 2021 4680 in 2022 4970 in 2023 5138 in 2024
<p>1.4.1 Define a Multi-cultural Communication Plan that embraces target audience.</p>	<p>Increase Awareness of Multi-Cultural Language Access Plan</p>	<p>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: 3 1.b. Farsi: 2 1.c. Spanish: 7 1.d. Tagalog: 2</p> <p>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 plain language.</p>	<p>Recommend to sunset, refer to SCL I.B.</p> <ul style="list-style-type: none"> The Disparity Committee address disparities that impact individuals served by NLACRC, their families, and others in the community This committee includes NLACRC staff, as well as partners who serve people with disabilities and other minority populations This committee meets monthly and provides feedback to the DEIB department on an ongoing basis
<p>1.4.2 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>Trainings through Plainlii were completed in Summer of 2024.</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> Trainings through Plainlii were completed in Summer of 2024.
<p>1.4.3 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>1) Number of materials utilized by name: Brochures: 1. Early Start - 374 2. School Age - 266 3. Transition - 187 4. Adult – 159 5. NLA Services and Descriptions - 589 6. General Information - 2,577 7. Consumer & Family Guide - 195 * Various internal forms (ongoing)</p> <p>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.</p>	<p>Recommend to sunset, refer to SCL I.B and Performance Contract</p> <ul style="list-style-type: none"> These activities are ongoing and tracked internally by the DEIB department and reflected within the data on the Performance Contract.

<p>1.4.4 Conduct quality assurance for a sampling Individual Program Plans for training opportunities. Case management for the position</p>	<p>Quality assurance</p>	<p>Between 10/1/24-12/31/24: NLACRC has continued to conduct ongoing quality assurance audits during this period. Additionally: *49 onboarding CSCs have been enrolled in the Person Centered IPP Writing NSO that was implemented in January 2024. *The Person Centered IPP Writing NSO was updated to incorporate DDS' new standardized IPP template. *Staff workgroups finalized additional tools to support CSCs to write person centered IPPs, and these tools were shared with CSCs and Supervisors and are housed in a Person Centered IPP tools database. *A total of 381 staff (consisting of CSCs and Case Management Supervisors) completed a training on Person Centered outcomes (this does not include a Person Centered Outcomes training session offered to NLACRC vendors that was held on 11/19/24). *A total of 400 staff (consisting of CSCs and Case Management Supervisors) completed a training on DDS' new standardized IPP template.</p>	<p>Recommend to sunset, refer to SCL I.C.</p> <ul style="list-style-type: none"> NLACRC will work with consulting services to comply with the delivery of case management services consistent with the requirements of the Lanterman Act, including assessing regional center operations by using data measuring completion of IPPs as statutorily required. NLACRC continues to conduct quality assessment audits of IPPs using established data points and measurements.
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<p style="text-align: center;">Strategic Plan 2-Workforce</p>			
<p>Specific Strategy</p>	<p>Goal/Objective</p>	<p>FY 24-25 Q2 Update (Data from: October 1st - December 31st)</p>	<p>Status/Proposed Revision</p>
<p>2.1.1 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.</p>	<p>Increase knowledge, skills, and abilities of all employees.</p>	<p>1. <u>Data Totals for FY24-25 (from October 1, 2024 through December 31, 2024):</u> FY24-25 Q2 Total Technical training hours: 6,474 FY24-25 Q2 Total Non-technical training hours: 2,770</p> <p>2. Status of Pre/Post surveys: Sent to the Executive Team.</p>	<p>Goal Met – Recommend to sunset</p> <ul style="list-style-type: none"> Trainings are being conducted for all new onboarding staff. Trainings have been updated and made accessible for all CM staff on the LMS (Learning Management System) Lead Trainer Unit developed and operating to provide one on one training for new staff Surveys are being conducted on the benefit, impact, and application of the tools made available Evaluations continue to be reported to Exec team and training hours continue to be met per the requirements each year.
<p>2.1.2 Develop consistency in onboarding procedures across departments.</p>	<p>Consistency in Onboarding Process</p>	<p>1. Current NSO classes per month: October 2024: 41 November 2024: 33 December 2024: 29</p> <p>2. Status of Pre/Post surveys: Sent to the Executive Team.</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> NSO procedures are formalized Classes per month continue to be tracked. Evaluations continue to be reported to Exec team.
<p>2.1.3 Create/provide and market pathways for career advancement and professional development.</p>	<p>Provide pathways for careers advancement and professional development.</p>	<p>During this quarter, employee workgroup collaborated to create a proposal for a Case Management-based career path.</p> <p>Additional research/review of career path options used by other CA regional centers also completed during this time.</p>	<p>Recommend to sunset, refer to SCL III.A.2 and III.A.3</p> <ul style="list-style-type: none"> Pathways for career advancement and professional development is part of plan development and execution of retaining service coordination staff per SCL sections III.A.2. and III.A.3.
<p>2.1.4 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>1. Organizational values of the onboarding process have been promoted as follows:</p> <p>Staff continue to receive Mission, Vision, and Values training on first day of NSO. An eLearning module is available in our eLearning catalog for all staff. At least 1 core value is embedded into each NSO training course.</p> <p>2. During this quarter, employee workgroup collaborated to create proposed modifications to existing performance evaluation structures. NLA leadership to review proposal in Q3 and identify/confirm values inclusion in proposed structures.</p>	<p>Training Goal Met for FY22-23 – Recommend sunset Training goal/reporting.</p> <ul style="list-style-type: none"> Mission, vision, and values training conducted in person during the onboarding process on day one of NSO. All eLearning modules developed in-house have embedded at least one core value and how it relates to the training. NLACRC has implemented a number of mechanisms to promote organizational values throughout the onboarding process, including the implementation of the Person Centered IPP Writing NSO series, and creation of the Lead Trainer CSC unit to provide additional support and training to onboarding CSCs on IPP meetings and report writing with the focus of meeting the needs of the individuals we serve and upholding our mission, vision, and values. <p>Recommend to sunset, refer to SCL III.A.2 and III.A.3</p> <ul style="list-style-type: none"> Alignment of employee selection, training, and evaluations with organizational values are part of plan development and execution of retaining service coordination staff per SCL sections III.A.2. and III.A.3.

<p>2.2.1 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>	<p>1. Organizational survey (Oct. 2024) comments reflect positive sentiment trend from employees of hybrid work options on their engagement and retention.</p> <p>2. Employee workgroups collaborated to construct proposed considerations with utilization of office workspaces and hybrid/remote work options. Proposed results to be delivered in Q3 and reviewed.</p>	<p>Recommend to sunset, refer to SCL III.A.</p> <ul style="list-style-type: none"> • Prior consulting service retained per SCL reported on this topic as part of development and execution of retaining service coordination staff per SCL sections III.A.2. and III.A.3. • HR will provide concluding report of workgroup project.
<p>2.2.2 Review technology to provide quantitative data metrics.</p>	<p>Assess current systems related to technology.</p>	<p>Infrastructure Changes - ISP - QTR 2: Requested additional IP addresses to improve failover for secondary line at primary datacenter as well as DR location.</p> <p>VPN - QTR 2: Made system changes to enable ability to allow new users for VPN access while remote.</p> <p>Training - QTR 2: Performed Phishing Test and reported results to the ELT. In the process of scheduling in-person training for those that failed more than 1 test.</p> <p>IT Survey - QTR 2: No Activity</p> <p>IT Trainer - QTR 2: Position is still on-hold</p>	<p>Goal Met - Recommend to sunset. Implemented/upgraded various features.</p> <ul style="list-style-type: none"> • ISP (Internet Service Provider) – we have replaced a Tier 2 ISP with Tier 1 ISP and increased the bandwidth in all 3 locations by 4X • VPN (Virtual Private Network) – VPN solution that required user intervention to connect had been replaced by a newer technology that connects automatically as soon as the laptop connects to the internet. Improved end user experience and further secured NLACRC’s network. • Training – We’ve introduced Ninjio for cybersecurity training and Phishing tests. Training is required and tests are being conducted on quarterly basis. • Staff Surveys – IT had conducted annual staff surveys on technology use and IT support quality. • Efforts to improve and continue improving technologies.
<p>2.2.3 Interview Staff to find manual-intense workload areas that can be streamlined.</p>	<p>Gather input from staff on how to streamline work</p>	<p>During this quarter, employee workgroup collaborated to create a proposal for Case Management-based process changes to stabilize caseloads.</p>	<p>Recommend to sunset, to SCL 1.B.</p> <ul style="list-style-type: none"> • NLACRC will work with consulting services to evaluate policies and procedures. • The consulting service formed workgroups to create standard operating procedures (SOPs) for case management. • Once hired, project managers will form and facilitate workgroups to continue developing SOPs in alignment with the consulting service’s efforts and Special Contract language.
<p>2.2.4 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 - Ongoing monthly meetings are held to address project activity and upcoming needs. We gathered information and completed the following projects:</p> <p>Trainings conducted by Supervisors - 49 eLearning modules in the LMS eLearning catalog developed to supplement and reinforce trainings for staff and support supervisors.</p> <p>Case Management - Dashboard and Reporting - Office hours have been implemented and continue to be implemented to support management on utilizing the dashboard. Managers are testing various areas of the dashboard to determine where they may be a need for follow up to ensure data integrity.</p> <p>Internal Processes - Forms continue to go through revisions and work groups are reviewing to determine which forms can be condensed into others and/or sunset in an effort to streamline. Project in progress.</p>	<p>Recommend to sunset, refer to SCL I.B.</p> <ul style="list-style-type: none"> • The consulting service formed workgroups to create standard operating procedures (SOPs) for case management. • Once hired, project managers will form and facilitate workgroups to continue developing SOPs in alignment with the Special Contract language.
<p>2.2.5 Practice quality hiring practices.</p>	<p>Expand upon best practices for hiring</p>	<p>Turnover rate for this quarter: 2.43%, a decrease of 0.49% from Q4 FY23-24, and a decrease of 2.38% from YOY Q2 FY23-24.</p> <p>Onboarding experience survey status/update:</p>	<p>Recommend to sunset, refer to SCL III.A.</p> <ul style="list-style-type: none"> • Quality hiring practices and expansion of best practices for hiring are part pf plan development and execution of retaining service coordination staff per SCL sections III.A.2. and III.A.3.
<p>2.2.6 Examine Exit Interviews in depth and create Action Plans from feedback, when possible.</p>	<p>Enhance efforts to understand the factors related to exit and apply strategies to foster retention.</p>	<p>Number of exit interviews conducted in this quarter: 15 Involuntary: 1 Other: 4 Relocation: 1 Retirement: 1 Personal: 7 Education: 1</p>	<p>Recommend to sunset, refer to SCL III.A.</p> <ul style="list-style-type: none"> • In depth examination of exit interviews and creation of action plans, when possible are part pf plan development and execution of retaining service coordination staff per SCL sections III.A.2. and III.A.3.
<p>2.2.7 Hold an annual Employee celebration to share successes and accomplishments.</p>	<p>Employee recognition</p>	<p>The annual employee celebration for FY 24-25 will take place in May or June of 2025.</p> <p>Public Information launched an internal newsletter to highlight news,</p>	<p>Recommend to sunset, refer to SCL III.A.</p> <ul style="list-style-type: none"> • Annual employee celebration is part pf plan development and execution of retaining service coordination staff per SCL sections III.A.2. and III.A.3.

		changes, and recognize employee successes. During four (4) Insight Forums/Town Halls (across 3 offices), ED solicited "wins" and positive news from employees to begin each event. During this quarter, NLACRC engaged WorkTango to provide an online, agencywide Employee Recognition system and program, with estimated implementation and launch in Q3.	
2.3.1 Assess workload issues by job classifications and address workload imbalance.	Review classifications and workload imbalances.	1. CSCs hired in this quarter: 52 CSCs hired 2. Open CSC positions in this quarter: 98 open CS positions as of 12/31/2024	Recommend to sunset, refer to SCL III.A. <ul style="list-style-type: none"> Assessment of workload issues by job classifications and addressing of workload imbalance is part of plan development and execution of retaining service coordination staff per SCL sections III.A.2. and III.A.3.
2.3.2 Explore team structure by areas of expertise, knowledge, skill-base, and/or experience.	Assess current team structures	*No activity this quarter	Recommend to sunset, refer to SCL III.A. <ul style="list-style-type: none"> Target marketing and recruitment, as well as designation of assignments for recruiters.
2.3.3 Utilize Information Technology to help build/support team structures.	Increase use of effective technology.	Vendor Portal - All eligible Vendors have been invited to participate, about 1/3 have been fully on-boarded Teams Premium - Licenses have been assigned to all staff. In the process of creating a document with additional features before sending all staff notification. FreshService - Continued working with other departments to implement their workflows.	Goal Met – Recommend to sunset. <ul style="list-style-type: none"> IT has implemented various technologies to increase efficiency and is continuously working to improve it further and the initial goal was met by implementing the following technologies: Vendor portal was built using SharePoint online to provide fast and secure electronic way of sharing documents with Vendor community. Utilize IT ticketing system, FreshService, for use with process flows of other departments which created traceability and accountability of tasks. Continuous development of PowerBI reports to support management and staff in planning their workload, help with data cleanup, and identify potential delays in serving our Consumer community.
2.3.4 Create training tools database to support supervisors in training their teams.	Promote training tools and resources for a growing workforce.	1. Number of active training tools found in NLACRC Training SharePoint: 543 2. Number of training tools found in eLearning Catalog: 49	Goal Met – Recommend to sunset <ul style="list-style-type: none"> Training tools to assist Case Management with person centered IPP writing were developed in 2024. A training tools database was created to house these tools for Supervisors and CSCs to easily access. The developed training tools and database have been shared with all current Case Management staff and continue to be shared with incoming Case Management staff.
2.3.5 Create opportunities for staff to be involved in cross departmental efforts.	Solicit staff to be involved and to help improve processes.	Columbus Organization continued staff/supervisor integrated workgroups to identify process improvements in the areas of: <ul style="list-style-type: none"> Office space utilization Recruiting and retention processes Case management caseload processes Self-Determination Program (SDP) caseload processes Additional NSO Training focus group convened by Training Dept. to make additional review and recommendations.	Recommend to sunset, refer to SCL I.B. <ul style="list-style-type: none"> The consulting service formed workgroups to create standard operating procedures (SOPs) for case management. Once hired, project managers will form and facilitate workgroups to continue developing SOPs in alignment with the Special Contract language.

Strategic Plan 3-Employment			
Specific Strategies	Goal/Objective	FY 24-25 Q2 Update (Data from: October 1st - December 31st)	Status/Proposed Revision
3.1.1 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.	Increase awareness on potential opportunities	1) 18 Resources emailed to Employment Group & shared on Media platforms. 2) Employment reports were presented at the November 20, 2024 Consumer Services Committee meeting.	Goal Met - Recommend to sunset <ul style="list-style-type: none"> Ongoing efforts remain in place to promote employment resources by emailing Employment Group and sharing on media platforms for the individuals served and the community to have awareness.

<p>3.1.2 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>1) 95 IPPs reviewed this quarter, 95 included an employment goal, 0 did not include an employment goal.</p> <p>2) Number of trainings/workshops on benefits of employment: - Mayors Committee Brunch - 3 ACRE Trainings</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> This strategy is tracked through the Performance Contract and reported to the Department on a continuous basis IPPs continue to be reviewed for employment goals
<p>3.1.3 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>1) Number of employment staff trainings: None this Quarter</p> <p>2) Number of addendums added to IPPs relating to employment: 95 addendums added to IPPs relating to employment plans/goals</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> Trainings have been updated and made accessible for all CM staff on the LMS (Learning Management System) Trainings are being conducted for all new onboarding staff Training tools to assist Case Management were developed in 2024. The developed training tools and database have been shared with all current Case Management staff and continue to be shared with incoming Case Management staff
<p>3.2.1 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>1) Number of partnership contacts: 9 new partnership contacts 3 local business partnerships made</p> <p>2) Status of survey of employers for knowledge of benefits of hiring consumers: N/A</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> New partnership contacts and local business partnerships continue to be made
<p>3.2.2 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>1) Number of partnerships or contacts made: 9</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> New partnership connections continue to be made
<p>3.2.3 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>1) Number of employment outreach activities/workshops: 18</p> <p>2) Number of calls to workforce employment hotline: 72</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> Workforce grant was completed. Employment Specialist continues to do ongoing efforts for community outreach. Continue to network with various businesses through community events.
<p>3.2.4 Increase utilization of incentives to promote employment and vocational outcome.</p>	<p>NLACRC will increase utilization of incentives to promote employment and vocational outcomes.</p>	<p>1) Numbers of individuals who are competitively employed: - Metric cannot be measured as written. NLACRC is assessing current database functionality</p> <p>2) Number of vendors who receive CIE incentives: 4 vendors receiving CIE incentives this quarter</p> <p>3) Number of IPPs reviewed: 95 IPPs reviewed this quarter, 95 included an employment goal, 0 did not include an employment goal.</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> NLACRC continues to track provider CIE incentives and reports to DDS annually Ongoing quarterly meetings with providers to discuss ways to increase CIE opportunities; partnership meetings with each provider that participates in CIE; ongoing promotion of CIE at various provider meetings (i.e. VAC, Vendor Forums, community events).
<p>3.3.1 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.</p>	<p>Hosting events and partners</p>	<p>Number of events held, participation, and/or resources shared: - 18 Resources emailed to Employment group & shared on Media platforms - SCV Mayors Committee Brunch, Fall LPA Meeting, NLACLPA Meeting, Filipino Support Group Mtg. Feedback on if the event led to job creation or development: n/a</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> NLACRC continues to partner with various community groups to promote employment and shares resources NLACRC participates in Local Partnership meetings on a quarterly basis. NLACRC hosts quarterly Employment Around Table meetings with providers.
<p>3.3.2 Explore utilization of the 1-year workforce employment grant staff to develop and implement an employment “hotline”.</p>	<p>Service Access and Equity Workforce Grant</p>	<p>Number of calls to the hotline: 72 calls to the hotline</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> Grant is complete There's ongoing efforts to provide information to internal and external about employment. Hotline calls are forwarded to the Employment Specialist direct line is utilized to help answer Employment questions.
<p>3.4.1 Connect people served/families with Small Business Administration (SBA), Los Angeles County (or other vendors) workshops on starting your own business.</p>	<p>People served/ Families /Vendors will partner with Small Business Administration</p>	<p>Number contacts with SBAs: No update</p> <p>Number of workshops on starting businesses: No update</p>	<p>Recommend to sunset, refer to PC 6</p> <ul style="list-style-type: none"> Connect people served/families by posting resources on our website to Small Business Administration/LA County websites. This is within community relations.

<p>3.4.2 Collaborate with service providers and partners to increase independent employment by supporting, where possible, providers to explore grant opportunities for Micro Enterprises.</p>	<p>Promote Microenterprises</p>	<p>Number of or connections with providers: No update</p> <p>Number or status of grant opportunities for microenterprises: No update</p>	<p>Recommend to sunset, refer to PC 6</p> <ul style="list-style-type: none"> Recommendation to post resources related to Microenterprise on our website.
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**Strategic Plan
4-Health & Wellness**

Specific Strategies	Goal/Objective	FY 24-25 Q2 Update (Data from: October 1st - December 31st)	Status/Proposed Revision
<p>4.1.1 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.</p>	<p>Training on health and wellness topics, generic resources, and crisis services for staff and community partners, including crisis services</p>	<p>- During week of World Mental Health Day, delivered a digital Mental Health On-Demand Training and Resource Kit to all NLACRC employees.</p> <p>- Issued Well-Being Resource guide to provide NLACRC employees and covered dependents with information about mental health and wellness coverage topics depending on which medical benefits plan they enroll in.</p> <p>Status on pre and post survey: Survey feedback provides that while employees do not have dissatisfaction with wellness or benefits per se, continued focus on caseload reduction would be a primary driver in improving overall wellness.</p>	<p>Goal Met – Recommend to sunset.</p> <ul style="list-style-type: none"> Generic Resources, Active Shooter, field safety, and workplace violence prevention training available for all CSCs in the LMS and is required during onboarding.
<p>4.1.2 Engage individuals/families in mental health discussions through expanding support groups with additional support provided, if requested, via guest speaker, etc.</p>	<p>Promote discussions with supports groups and individuals served on health and wellness topics.</p>	<p>- Issued Well-Being Resource guide to provide NLACRC employees and covered dependents with information about mental health and wellness coverage topics depending on which medical benefits plan they enroll in.</p> <p>Status on survey from support groups for feedback: Survey feedback provides that while employees do not have dissatisfaction with wellness or benefits per se, continued focus on caseload reduction would be a primary driver in improving overall wellness.</p>	<p>Goal Met – Recommend to sunset.</p> <ul style="list-style-type: none"> Promotion of discussions on health and wellness topics is ongoing.
<p>4.1.3 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.</p>	<p>Include health and wellness component into grassroots outreach efforts and partnerships with stakeholders.</p>	<p>- See strategy 4.1.1 and 4.1.2</p> <p>Status on survey from support groups for feedback: Survey feedback provides that while employees do not have dissatisfaction with wellness or benefits per se, continued focus on caseload reduction would be a primary driver in improving overall wellness.</p>	<p>Goal Met – Recommend to sunset.</p> <ul style="list-style-type: none"> Inclusion of health and wellness components is ongoing.
<p>4.1.4 Develop a taskforce or committee/mental health (or explore existing taskforces).</p>	<p>Develop or join existing taskforce or workgroup related to health and wellness.</p>	<p>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.</p>	<p>Recommend to sunset, refer to SCL III.A.2 & III.A.3.</p> <ul style="list-style-type: none"> Development or joining a taskforce or workgroup related to health and wellness is part of plan development and execution of retaining service coordination staff per SCL sections III.A.2. and III.A.3.
<p>4.1.5 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.</p>	<p>Adding a mental health specialist can enhance early detection and support for individuals, improving their mental well-being</p>	<p>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.</p>	<p>Recommend to sunset, refer to SCL III.A.2 & III.A.3.</p> <ul style="list-style-type: none"> Exploration of the feasibility of adding a mental health specialist position is part pf plan development and execution of retaining service coordination staff per SCL sections III.A.2. and III.A.3
<p>4.1.6 Promote use of Human Resource Employee Assistance Program (EAP) services to support employee health and wellness.</p>	<p>Promotion of Employee Assistance Program</p>	<p>2024: First Half (Jan 1 - Jun 30) usage = 17 Combined Access visits 2024 overall statistics are pending release by ComPsych</p> <p>- Promoted usage of ComPsych EAP online sources by sharing EAP's Mental Health toolkit in October 2024. - Launched Well-Being Resources guide with a dedicated section to the EAP provider and the instructions for access and use.</p>	<p>Recommend to sunset, refer to SCL III.A.2 & III.A.3.</p> <ul style="list-style-type: none"> Promotion of Employee Assistance Program (EAP) is part pf plan development and execution of retaining service coordination staff per SCL sections III.A.2. and III.A.3.

**Strategic Plan
5-Housing**

Specific Strategies	Goal/Objective	FY 24-25 Q2 Update (Data from: October 1st - December 31st)	Status/Proposed Revision
<p>5.1.1 Train people served/families of all housing options and generic services.</p>	<p>The community will be informed of Regional Center housing options, generic resources and supports available for housing.</p>	<p>Casting call was sent out to stakeholders and 20 interested parties submitted. Pre-interviews were conducted for interested parties. Preliminary site visits for employment and residential settings were conducted.</p> <p>Housing resources can be found in the below links on the website: https://www.nlacrc.org/consumers-families/transition/affordable-housing/ https://www.nlacrc.org/consumers-families/adults/affordable-housing/</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> • Ongoing efforts (i.e. resources available on website, vendor fairs and living options for CSCs). • This strategy is improving community relations which remains as an ongoing efforts. • Currently NLACRC is working on a video production series that will highlight the various living options vended by NLACRC. This will be added to the Parent University.
<p>5.1.2 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.</p>	<p>All Case Management staff will be competent in facilitation and education on the options of housing.</p>	<p>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.</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> • LOS (Living Options Staffings) are on-going • Trainings available in our LMS for all-staff in our eLearning catalog: <ul style="list-style-type: none"> - Residential Placement/Placement Request Process - SLS/ILS • Training documents are also available to all staff withing NLACRC's Training SharePoint • Training tools were created to make housing resources for Supervisors and CSCs easy to access
<p>5.1.3 Utilize outreach – brochures, NLACRC.org or other– to increase awareness of information on housing options and generic supports for pursuing housing goals.</p>	<p>Disseminate information on housing options, generic resources and supports available for housing in multiple languages that reflect NLACRC's community.</p>	<p>Housing resources can be found in the below links on the website: https://www.nlacrc.org/consumers-families/transition/affordable-housing/ Page views: 27 https://www.nlacrc.org/consumers-families/adults/affordable-housing/ Page views: 198 CS continues to provide PI with additional resources as they are discovered.</p> <p>PI continues to track number of visits to the housing section on the website.</p>	<p>Goal Met – Recommend to sunset</p> <ul style="list-style-type: none"> • Resources are posted on our website. • On-going efforts to explore housing options and pursue CPP/CRDP funding through DDS for unmet needs.
<p>5.2.1 Support and work with ARCA to support legislation that provides for greater housing options, including Additional Dwelling Units (ADUs), for people we serve.</p>	<p>Collaborate and partner with ARCA to sponsor and address legislation to advocate for increased housing options.</p>	<p>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.</p>	<p>Goal Met – Recommend to sunset</p> <ul style="list-style-type: none"> • NLACRC is partnered with ARCA to support housing options and it's an ongoing effort statewide. • NLACRC also has a legislative Specialist who will be developing communication plan focusing on housing priorities with elected officials.
<p>5.2.2 Advocate for updates for Community Care Licensing through Department of Social Services to better take advantage of housing options.</p>	<p>Collaborate and partner with Community Care Licensing to discuss regulations.</p>	<p>Quarterly partnership meeting with Community Care Licensing (CCL) to discuss applicable changes to regulations.</p>	<p>Goal Met – Recommend to sunset</p> <ul style="list-style-type: none"> • NLACRC has quarterly meetings with Community Care Licensing. • This is part of our ongoing efforts for collaboration.
<p>5.2.3 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.</p>	<p>Secure CRDP Funding for Housing Development from DDS.</p>	<p>Number of proposals: Submitted by NLACRC: # 11 Awards granted by DDS: # 11 Total number of new developments: # 11</p> <p>NLACRC release RFPs in November, held applicants conference. Deadline for Proposals were in mid-January.</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> • NLACRC applies annually for CPP/CRDP funding request to DDS. • To date, NLACRC has been granted CPP/CRDP funding annually.
<p>5.3.1 Explore creating a position for a Community Housing Liaison to be a bridge between our community, housing experts and internal needs.</p>	<p>Hire a new position to liaison with community, experts, and with staff.</p>	<p>We continue to collaborate with the placement team on living options available within our catchment area. Further discussion on possible position contingent upon operations.</p>	<p>Goal Met - Recommend to sunset.</p> <ul style="list-style-type: none"> • The position is ready to be posted.

<p>5.3.2 Collaborate creatively with providers to find solutions to housing options and financial availability.</p>	<p>Develop a Housing Committee comprised of consumers, families, advocates, and providers to collaborate on innovative solutions to the housing needs and resources.</p>	<p>Community Services continues to participate in VAC Adult Committee and part of the ARCA Housing Committee meetings. Exploring partnerships with housing options within our catchment area.</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> • On-going efforts within the provider community for housing options through VAC Adult Committee. • NLACRC has additional efforts implemented through participation in statewide network opportunities to expand housing development options.
<p>5.3.3 Collaborate with providers to create provider succession planning and retain housing options within our community.</p>	<p>Implement within the Housing Committee.</p>	<p>Residential service provider survey draft finalized, scheduled to launch Q3.</p>	<p>Goal Met - Recommend to sunset NLACRC has ongoing efforts in place:</p> <ul style="list-style-type: none"> • Total residential settings in various levels approximately 400+ settings • There are an additional 28 vendorizations in process to develop residential facilities, with an additional 12 projects CPP/CRDP. • Community Services has a plan in place currently that includes assessing unmet needs annually.
<p>5.3.4 Develop and promote knowledge and awareness of housing trusts, housing endowments and other.</p>	<p>Collaboration with Board of Trustees and Parents on possible housing endowments.</p>	<p>Please consider revising this goal due to unavailable data to collect based on the recommended metric.</p>	<p>Goal Met - Recommend to sunset</p> <ul style="list-style-type: none"> • NLACRC has a Help Fund in the event that the Board of Trustees identifies donors for donations to this help fund. • Recommending that the Board of Trustees consider this one of their board priorities if they would like to increase funding for housing endowments.



**NORTH LOS ANGELES COUNTY REGIONAL CENTER
PERFORMANCE CONTRACT
Fiscal Year 2024-25
Q2 Update**

Public Policy Performance Measure (Required)		Statewide Average December 2023	NLACRC December 2023	*Statewide Average June 2024	*NLACRC June 2024
1.	Number and percent of Regional Center consumers in institutional settings, such as state hospitals, Developmental Centers, etc. Goal: Decrease the number of individuals who reside in institutional settings.	0.5% 225	0.03% 15	0.05% 227	0.04% 12
<u>ACTIVITIES TO ADDRESS MEASURE/GOAL 1:</u>					
<ul style="list-style-type: none"> 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. 					

*Per May preliminary data provided by DDS.

Public Policy Performance Measure (Required)		Statewide Average December 2023	NLACRC December 2023	*Statewide Average June 2024	*NLACRC June 2024
2.	Number and percent of minors living with families (includes own family, foster family, and guardian). <ul style="list-style-type: none"> Own home - parent/guardian Foster family Goal: Maintain the percentage of children who reside with families in their home.	99.67% 225,170	99.81% 19,662	99.67% 231,220	99.82% 20,413
		97.09% 219,346	95.36% 18,786	97.27% 225,653	95.44% 19,516
		2.58% 5,824	4.45% 876	2.40% 5,567	4.39% 897

<u>ACTIVITIES TO ADDRESS MEASURE/GOAL 2:</u>					
<ul style="list-style-type: none"> 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/presentations, outreach, community engagement events, and dissemination of materials (Consumer & Family Guides, Common Services Brochures, Insert of Service Definitions, etc.). 					

*Per May preliminary data provided by DDS.



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Public Policy Performance Measure (Required)		Statewide Average December 2023	NLACRC December 2023	*Statewide Average June 2024	*NLACRC June 2024
3.	Number and percent of adults residing in homesettings:	83.58%	85.98%	83.80%	86.02%
		164,145	11,554	166,479	11,757
	• Independent Living Services (ILS)	9.11%	8.20%	9.07%	7.88%
		17,886	1,102	18,018	1,077
	• Supported Living Services (SLS)	4.80%	3.11%	4.74%	3.04%
		9,420	418	9,415	416
	• Adult Family Home Agency home	0.74%	0.37%	0.74%	0.37%
		1,452	50	1,462	51
	• Home of Parent or guardian	68.94%	74.30%	69.25%	74.72%
		135,387	9,984	137,584	10,213
	Goal: Increase the number of adults who reside in home settings.				
<u>ACTIVITIES TO ADDRESS MEASURE/GOAL 3:</u>					
<ul style="list-style-type: none"> • 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. 					

*Per May preliminary data provided by DDS.

Public Policy Performance Measure (Required)		Statewide Average December 2023	NLACRC December 2023	*Statewide Average June 2024	*NLACRC June 2024
4.	Number and percent of minors living in facilities serving greater than 7	0.03%	0.00%	0.02%	0.00%
		59	0	50	0
	• Intermediate Care Facilities (ICF)	0.02%	0.00%	0.01%	0.00%
		40	0	32	0
	• Skilled Nursing Facilities (SNF)	0.00%	0.00%	0.00%	0.00%
		4	0	6	0
	• Community Care Facilities (CCF)	0.01%	0.00%	0.01%	0.00%
		15	0	142	0
	Goal: Decrease the percentage of children living in larger facilities.				



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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.

*Per May preliminary data provided by DDS.

Public Policy Performance Measure (Required)		Statewide Average December 2023	NLACRC December 2023	*Statewide Average June 2024	*NLACRC June 2024
5.	Number and percent of adults living in facilities serving greater than 7	1.53%	1.98%	1.46%	1.89%
		3,012	266	2,907	259
	• Intermediate Care Facilities (ICF)	0.37%	0.85%	0.36%	0.80%
		735	114	721	110
	• Skilled Nursing Facilities (SNF)	0.48%	0.55%	0.45%	0.53%
		951	74	896	73
	• Community Care Facilities (CCF)	0.68%	0.58%	0.65%	0.56%
		1,326	78	1,290	76
	Goal: Decrease the percentage of adults living in larger facilities.				

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.

*Per May preliminary data provided by DDS.



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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. 2022 CA	Jan. - Dec. 2022 NLACRC	Jan. - Dec. 2023 CA
			2021	2022
6a.	Individual Earned Income (Age 16 to 64 years): Data Source: Employment Development Department			
6a.1	Quarterly number of consumers with earned income	31,413	2,359	32,132
6a.2	Percentage of consumers with earned income	15.40%	16.25%	15.20%
6a.3	Average annual wages for consumers	\$13,198	\$13,831	\$14,251
			2021	2022
6b.	Annual earnings of individuals compared to people with all disabilities in California Data Source: American Community Survey, 2022 five-year estimate		\$30,783	\$29,382
		July 2017 – June 2018 Statewide	July 2017 – June 2018 NLACRC	July 2020 – June 2021 Statewide
6c.	Percentage of adults who reported having integrated employment as their goal in their IPP. (From National Core Indicator (NCI) Adult Consumer Survey) (Note: NCI Surveys are conducted every three years.)	29%	26%	35%
		2021-22 CA Avg.	2021-22 NLACRC Avg.	2022-23 CA Avg.
6d.	Number of adults who were placed in competitive integrated employment following participation in a Paid Internship Program. (From data collected manually from service providers by regional centers)	1,527	102	2,650
6d.1	Percentage of adults who were placed in competitive, integrated employment following participation in a Paid Internship Program.	12%	22%	10%
6d.2	Average hourly or salaried wages and for adults who participated in a Paid Internship Program.	\$15.08	\$15.18	\$15.96
6d.3	Average hours worked per week for adults who participated in a Paid Internship Program.	15	15	14
6d.4	Average wages for adults engaged in competitive, integrated employment, on behalf of whom incentive payments have been made.	\$15.63	\$15.77	\$16.51
			2022-23 NLACRC Avg.	2022-23 NLACRC Avg.
				214
				9%
				\$16.24
				14
				\$16.71



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6.d.5	Average hours worked for adults engaged in competitive, integrated employment, on behalf of whom incentive payments have been made.	22	21	21	22
6.d.6	Total # of incentive payments made for the fiscal year for the following amounts.	22	21	21	22
	Incentive amount: \$3,000	25	34	804	74
	\$2,500	42	68	849	72
	\$2,000	55	111	1,031	97

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 Specialist 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.

Public Policy Performance Measure (Required) & Goal

7. Indicator showing the relationship between annual authorized services and expenditures by individual's residence type and ethnicity.
Data for this measure that is separated by residence type is included below as number 7a. through 7f.
Goal: Ensure that consumers and families have access to services and supports regardless of age, diagnosis, ethnicity, or language.

	Residence Type	2021-22	2022-23
7a.	Home		



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7b.	ILS/SLS		
7c.	Institutions		
7d.	Residential		



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7e.	Med/Rehab/ Psych		
7f.	Other		

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.
- 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.
- 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.
- 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. 2025 scheduled to be held

Public Policy Performance Measure (Required)

8. Number and percent of individuals receiving only case management services by 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.



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Ethnicity	2021-22	2022-23																								
American Indian or Alaska Native	<table border="1"> <tr><td>Birth to 2</td><td>1</td></tr> <tr><td>Birth to 2</td><td>20%</td></tr> <tr><td>3 to 21</td><td>8</td></tr> <tr><td>3 to 21</td><td>40%</td></tr> <tr><td>22+</td><td>5</td></tr> <tr><td>22+</td><td>71%</td></tr> </table>	Birth to 2	1	Birth to 2	20%	3 to 21	8	3 to 21	40%	22+	5	22+	71%	<table border="1"> <tr><td>Birth to 2</td><td>1</td></tr> <tr><td>Birth to 2</td><td>14%</td></tr> <tr><td>3 to 21</td><td>15</td></tr> <tr><td>3 to 21</td><td>65%</td></tr> <tr><td>22+</td><td>3</td></tr> <tr><td>22+</td><td>38%</td></tr> </table>	Birth to 2	1	Birth to 2	14%	3 to 21	15	3 to 21	65%	22+	3	22+	38%
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Asian	<table border="1"> <tr><td>Birth to 2</td><td>1</td></tr> <tr><td>Birth to 2</td><td>20%</td></tr> <tr><td>3 to 21</td><td>8</td></tr> <tr><td>3 to 21</td><td>36%</td></tr> <tr><td>22+</td><td>133</td></tr> <tr><td>22+</td><td>21%</td></tr> </table>	Birth to 2	1	Birth to 2	20%	3 to 21	8	3 to 21	36%	22+	133	22+	21%	<table border="1"> <tr><td>Birth to 2</td><td>17</td></tr> <tr><td>Birth to 2</td><td>5%</td></tr> <tr><td>3 to 21</td><td>436</td></tr> <tr><td>3 to 21</td><td>36%</td></tr> <tr><td>22+</td><td>145</td></tr> <tr><td>22+</td><td>22%</td></tr> </table>	Birth to 2	17	Birth to 2	5%	3 to 21	436	3 to 21	36%	22+	145	22+	22%
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Black/African American	<table border="1"> <tr><td>Birth to 2</td><td>37</td></tr> <tr><td>Birth to 2</td><td>10%</td></tr> <tr><td>3 to 21</td><td>532</td></tr> <tr><td>3 to 21</td><td>33%</td></tr> <tr><td>22+</td><td>286</td></tr> <tr><td>22+</td><td>23%</td></tr> </table>	Birth to 2	37	Birth to 2	10%	3 to 21	532	3 to 21	33%	22+	286	22+	23%	<table border="1"> <tr><td>Birth to 2</td><td>18</td></tr> <tr><td>Birth to 2</td><td>5%</td></tr> <tr><td>3 to 21</td><td>597</td></tr> <tr><td>3 to 21</td><td>32%</td></tr> <tr><td>22+</td><td>314</td></tr> <tr><td>22+</td><td>24%</td></tr> </table>	Birth to 2	18	Birth to 2	5%	3 to 21	597	3 to 21	32%	22+	314	22+	24%
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Hispanic	<table border="1"> <tr><td>Birth to 2</td><td>218</td></tr> <tr><td>Birth to 2</td><td>6%</td></tr> <tr><td>3 to 21</td><td>3,147</td></tr> <tr><td>3 to 21</td><td>35%</td></tr> <tr><td>22+</td><td>941</td></tr> <tr><td>22+</td><td>25%</td></tr> </table>	Birth to 2	218	Birth to 2	6%	3 to 21	3,147	3 to 21	35%	22+	941	22+	25%	<table border="1"> <tr><td>Birth to 2</td><td>172</td></tr> <tr><td>Birth to 2</td><td>5%</td></tr> <tr><td>3 to 21</td><td>3,507</td></tr> <tr><td>3 to 21</td><td>34%</td></tr> <tr><td>22+</td><td>1,035</td></tr> <tr><td>22+</td><td>26%</td></tr> </table>	Birth to 2	172	Birth to 2	5%	3 to 21	3,507	3 to 21	34%	22+	1,035	22+	26%
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<p>Native Hawaiian or Other Pacific Islander</p>	<table border="1"> <tr><td>Birth to 2</td><td>0</td></tr> <tr><td>Birth to 2</td><td>0%</td></tr> <tr><td>3 to 21</td><td>5</td></tr> <tr><td>3 to 21</td><td>36%</td></tr> <tr><td>22+</td><td>0</td></tr> <tr><td>22+</td><td>0%</td></tr> </table>	Birth to 2	0	Birth to 2	0%	3 to 21	5	3 to 21	36%	22+	0	22+	0%	<table border="1"> <tr><td>Birth to 2</td><td>0</td></tr> <tr><td>Birth to 2</td><td>0%</td></tr> <tr><td>3 to 21</td><td>4</td></tr> <tr><td>3 to 21</td><td>57%</td></tr> <tr><td>22+</td><td>0</td></tr> <tr><td>22+</td><td>0%</td></tr> </table>	Birth to 2	0	Birth to 2	0%	3 to 21	4	3 to 21	57%	22+	0	22+	0%
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<p>White</p>	<table border="1"> <tr><td>Birth to 2</td><td>116</td></tr> <tr><td>Birth to 2</td><td>8%</td></tr> <tr><td>3 to 21</td><td>1,287</td></tr> <tr><td>3 to 21</td><td>33%</td></tr> <tr><td>22+</td><td>712</td></tr> <tr><td>22+</td><td>17%</td></tr> </table>	Birth to 2	116	Birth to 2	8%	3 to 21	1,287	3 to 21	33%	22+	712	22+	17%	<table border="1"> <tr><td>Birth to 2</td><td>96</td></tr> <tr><td>Birth to 2</td><td>6%</td></tr> <tr><td>3 to 21</td><td>1,358</td></tr> <tr><td>3 to 21</td><td>33%</td></tr> <tr><td>22+</td><td>792</td></tr> <tr><td>22+</td><td>19%</td></tr> </table>	Birth to 2	96	Birth to 2	6%	3 to 21	1,358	3 to 21	33%	22+	792	22+	19%
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<p>Other Ethnicity or Race</p>	<table border="1"> <tr><td>Birth to 2</td><td>124</td></tr> <tr><td>Birth to 2</td><td>8%</td></tr> <tr><td>3 to 21</td><td>499</td></tr> <tr><td>3 to 21</td><td>32%</td></tr> <tr><td>22+</td><td>88</td></tr> <tr><td>22+</td><td>22%</td></tr> </table>	Birth to 2	124	Birth to 2	8%	3 to 21	499	3 to 21	32%	22+	88	22+	22%	<table border="1"> <tr><td>Birth to 2</td><td>111</td></tr> <tr><td>Birth to 2</td><td>7%</td></tr> <tr><td>3 to 21</td><td>587</td></tr> <tr><td>3 to 21</td><td>32%</td></tr> <tr><td>22+</td><td>98</td></tr> <tr><td>22+</td><td>24%</td></tr> </table>	Birth to 2	111	Birth to 2	7%	3 to 21	587	3 to 21	32%	22+	98	22+	24%
Birth to 2	124																									
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<p>Total</p>	<table border="1"> <tr><td>Birth to 2</td><td>524</td></tr> <tr><td>Birth to 2</td><td>7%</td></tr> <tr><td>3 to 21</td><td>5,872</td></tr> <tr><td>3 to 21</td><td>34%</td></tr> <tr><td>22+</td><td>2,165</td></tr> <tr><td>22+</td><td>21%</td></tr> </table>	Birth to 2	524	Birth to 2	7%	3 to 21	5,872	3 to 21	34%	22+	2,165	22+	21%	<table border="1"> <tr><td>Birth to 2</td><td>415</td></tr> <tr><td>Birth to 2</td><td>5%</td></tr> <tr><td>3 to 21</td><td>6,504</td></tr> <tr><td>3 to 21</td><td>34%</td></tr> <tr><td>22+</td><td>2,387</td></tr> <tr><td>22+</td><td>23%</td></tr> </table>	Birth to 2	415	Birth to 2	5%	3 to 21	6,504	3 to 21	34%	22+	2,387	22+	23%
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ACTIVITIES TO ADDRESS MEASURE/GOAL 8:

- Same as activities as in #7.



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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	2021-22	2022-22
American Indian or Alaska Native	Birth to 2, Consumers 0% Birth to 2, Expenditures 0% 3 to 21, Consumers 0% 3 to 21, Expenditures 0% 22+, 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%
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 10% 3 to 21, Expenditures 11% 22+, Consumers 12% 22+, Expenditures 11%
Hispanic	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%	Birth to 2, Consumers 48% Birth to 2, Expenditures 49% 3 to 21, Consumers 53% 3 to 21, Expenditures 46% 22+, Consumers 38% 22+, Expenditures 27%



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Native Hawaiian or Other Pacific Islander	Birth to 2, Consumers	0%	Birth to 2, Consumers	0%
	Birth to 2, Expenditures	0%	Birth to 2, Expenditures	0%
White	3 to 21, Consumers	0%	3 to 21, Consumers	0%
	3 to 21, Expenditures	0%	3 to 21, Expenditures	0%
Other Ethnicity or Race	22+, Consumers	0%	22+, Consumers	0%
	22+, Expenditures	0%	22+, Expenditures	0%

White	Birth to 2, Consumers		20%	Birth to 2, Consumers		20%
	Birth to 2, Expenditures		21%	Birth to 2, Expenditures		21%
	3 to 21, Consumers		23%	3 to 21, Consumers		22%
	3 to 21, Expenditures		28%	3 to 21, Expenditures		28%
	22+, Consumers		41%	22+, Consumers		39%
	22+, Expenditures		52%	22+, Expenditures		51%

Other Ethnicity or Race	Birth to 2, Consumers		21%	Birth to 2, Consumers		21%
	Birth to 2, Expenditures		18%	Birth to 2, Expenditures		18%
	3 to 21, Consumers		9%	3 to 21, Consumers		9%
	3 to 21, Expenditures		8%	3 to 21, Expenditures		8%
	22+, Consumers		4%	22+, Consumers		4%
	22+, Expenditures		4%	22+, Expenditures		4%

ACTIVITIES TO ADDRESS MEASURE/GOAL 9:

- ◆ Same activities as #7 and #8.

Public Policy Performance Measure (Required)

10. Number and percent of individuals (Status 1 or 2) Current Client Development Evaluation Report(CDER) or Early Start Report (ESR).

Goal: Increase the percentage of individuals with current CDERs.

Statewide Average December 2023	NLACRC December 2023	*Statewide Average June 2024	*NLACRC June 2024
96.96%	97.84%	96.65%	97.84%
348,225	27,809	355,527	28,683

NLACRC ACTIVITIES TO ADDRESS GOAL 10:

- ◆ All consumers receiving services and supports have a completed CDER as soon as they become part of the NLACRC system.
- ◆ All service coordinators have revised training on how to complete and update ongoing CDER after every visit with consumers.

*Per May preliminary data provided by DDS.



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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 June 2024	NLACRC Audit Compliance as of June 2024
I. Passes independent audit	90%	Yes	**	Yes
II. Passes DDS audit	100%	Yes	**	Yes
III. Audits vendors as required	86%	Yes	**	Met
IV. Did not overspend operations budget	100%	Yes	**	Yes
V. Participates in federal waiver	100%	Yes	**	Yes
VI. CDER/ESR Currency	96%	97.31%	*96.65%	99.97%
**VII. Intake/assessment and IFSP timelines (ages 0-2).	**	**	**	**
VIII. Intake/assessment timelines for consumers ages 3 and above.	83%	96.08%	*77.70%	99.73%
IX. IPP Development (WIC requirements)	99%	96.08%	**	93.89%
X. Individualized Family Service Plan (IFSP) Requirements Met (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%	90.5%	**	89.5%

*Per May preliminary data provided by DDS.

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



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“Outside of the Box” Performance Measures	
12.	
12.i.	<p>Increase recruitment in San Fernando Valley, Antelope Valley, and Santa Clarita Valley. (HR)</p> <p>Measurable goal: 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>*Supporting Data: Utilizing Temporary Agencies: 6 temps, 2 conversions Employee Referrals: 11 Submitted for Referrals - 2 Hired from Referrals Job Fair(s): Virtual Indeed Job Fair in October 2024 - 4/SFV and 3/AV</p> <p>Goal Met</p>
12.ii.	<p>Increase service provider access to trainings to increase quality of services. (Community Services)</p> <p>Measurable goal: Conduct or provide information on available external trainings for service providers with reputable subject matter experts to provide growth opportunities</p> <p>*Supporting Data: Status for period of 7/1/24-9/30/24: 10 Status for period of 10/1/24-12/31/24: 13</p> <p>Goal Met</p>
12.iii.	<p>Increase educational opportunities for Community Services staff development. (Community Services)</p> <p>Measurable goal: Employment Specialist to attend trainings to be kept informed and up to date of best practices.</p> <p>*Supporting Data: Status for period of 7/1/24-9/30/24: 9 Status for period of 10/1/24-12/31/24: 7</p> <p>Goal Met</p>
12.iv.	<p>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)</p> <p>Measurable goal: Measurable goal: Number of respite, SLS, and PA providers by geographic location.</p> <p>*Supporting Data: 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. Status for period of 10/1/24-12/31/24: Received 3 applicants for Respite and 1 applicant for personal assistance.</p> <p>Goal Met</p>
12.v.	<p>Create resources and best practices for service providers to assist consumers with employment preparedness. (Community Services)</p> <p>Measurable goal:</p>



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	<p>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>*Supporting Data: Status for period of 7/1/24-9/30/24: 13 resources shared with providers related to employment opportunities. Status for period of 10/1/24-12/31/24: "ACRE Certification Employment Trainings" for Service Providers.</p> <p>Goal Met</p>
<p>12.vi.</p>	<p>Gather and assess data to develop responsive strategies. (DEIB)</p> <p>Measurable goals:</p> <ol style="list-style-type: none"> a. Gather Purchase of Service data based on service code. b. Obtain information from the community (surveys, comments, and Q&A during public meetings). c. Log category of needs from walk-ins, and calls to receptionist and Parent & Family Support Specialists. d. Review fair hearings and 4731 complaints to assess areas of need, improvement, and/or clarification. e. Create breakout rooms during Cafecito Entre Nos meetings to directly discuss complaints and other matters. f. Change format of Aprendiendo to promote conversation/discussion rather than a presentation. g. Assess the need for staff training on the client experience (similar to "customer service"). h. Assess through Disparity Committee, Executive Committee, and/or Consumer Services Committee. <p>*Supporting Data:</p> <ol style="list-style-type: none"> a. Purchase of Service Data being reviewed through the Disparity Committee and presented at Consumer Services Committee b. "Community Needs Survey" is posted on our website for the community to provide comments and service needs. The survey is monitored by the Quality Assurance department. results. c. i. Based on Parent & Family Support Specialists' Tracking: AV: 64 SFV: 133 SCV: 7 ii. Category of consultations: 12 Complaints 104 Regional Center Services 20 Follow Ups 1 Camp/Social Rec 69 Resources d. 4731 and Appeals are tracked through the Consumer Services Committee. e. Measure met. f. See supporting data 7.4a. g. Surveys were initiated January 2024 and are ongoing and monitored by the Quality Assurance department. <p>Goal Met</p>
<p>12.vii.</p>	<p>To increase the number of purchase of services related to camp, social recreation, and non-medical therapies for individuals served. (Community Services)</p> <p>Measurable goal: POS-Vendors POS-Parent Reimbursements</p>



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	<p>*Supporting Data: 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 Status for period of 10/1/24-12/31/24: 249 POS- Vendors; 635 POS- Parent Reimbursements; 1,952 POS-FMS for social rec = Total Social Rec POS 2,836</p> <p>Goal Met</p>
12.viii.	<p>To increase the number of families securing appropriate resources to meet their individualized needs through service coordination. (DEIB)</p> <p>Measurable goal:</p> <ul style="list-style-type: none">a. Increase partnerships with Community-Based Organizations (CBOs) regarding generic resources.b. Track advocacy assistance for families.c. FFRC Community Navigator Programd. Generic Resourcee. Increase virtual generic resource materials for staff. <p>*Supporting Data:</p> <ul style="list-style-type: none">a. DEIB: See metrics above.b. DEIB: See metrics above.c. FFRC Community Navigators Program- Individuals act as specialist and provide support to families access and utilize regional center and generic resources.d. Expo planned for this upcoming quarter. Parent University is going through its “pilot” phase. Once feedback is gathered, necessary updates will be made for it to go through LMS that will be rolled out to the community.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.e. There has been a creation of a DEIB Library and Quarterly Newsletter in our website and News You Can Use. <p>Goal Met</p>

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		
Jennifer Koster, Alt. Chair		P			P								0	2.00
Nicholas Abrahms		P			P								0	2.00
Lety Garcia		Ab			P								1	1.25
Juan Hernandez		P			P								0	2.00
Anna Hurst		Ab			P								1	1.25
Octavia Watkins - VAC Rep		P			P								0	2.00

Meeting Time

0.75

1.25

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)