



# North Los Angeles County Regional Center

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

## MEMORANDUM

Date: June 26, 2025

To: **Executive Finance Committee:**  
Juan Hernandez, Sharmila Brunjes, Anna Hurst, Leticia Garcia

From: Lindsay Granger, Executive Administrative Assistant

Re: Information for the next Executive Committee meeting on  
**Thursday, June 26, 2025 at 5:00 pm**

.....

Attached is information for the next Executive Finance Committee meeting.  
Please review this information prior to the meeting.

**The meeting will be held remotely via Zoom.**

### **Join Zoom Meeting**

<https://us06web.zoom.us/j/88583896431?pwd=ozYD1HKNHsDanT7LH2bfWO6Jd6H4pi.1>

**Meeting ID: 885 8389 6431**

**Passcode: 425995**

If you have any questions, or **if you are unable to attend the meeting**, please send us an email to [boardsupport@nlacrc.org](mailto:boardsupport@nlacrc.org).

Thank you!

c: Angela Pao-Johnson, Executive Director, Evelyn McOmie, Deputy Director, Vini Montague, Chief Financial Officer, Betsy Monahan, Human Resources Director, Donna Rentsch, Consumer Services Director, Silvia Renteria-Haro, Director of Client Services

Attachments

# Executive Finance Committee Meeting 06.26.25

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## EXECUTIVE FINANCE COMMITTEE

Thursday, June 26, 2025, at 5:00 pm - Via Zoom

**Executive Committee Members:** Juan Hernandez – President, Sharmila Brunjes – First V.P. and Secretary, Anna Hurst – Treasurer, Lety Garcia – ARCA Rep.

**Staff:** Angela Pao-Johnson, Executive Director and Lindsay Granger, Exec. Admin.

~AGENDA~

- I. **Call to Order and Introductions** (1 min)
- II. **Committee Member Attendance/Quorum** (1 min)
- III. **Agenda** (2 min)
  - A. Approval of Agenda for the June 26, 2025, Meeting
- IV. **Public Input – Agenda Items** (3 min per person / 3 attendees max)
- V. **Consent Items** (2 min)

All Consent Items are to be approved in one motion unless a Committee Member or a member of the public requests separate action or discussion on a specific item.

  - A. Approval of Minutes from the May 29, 2025, Executive Committee Meeting
- VI. **Action Items**
  - A. Review and Approve of the Executive Finance Committee Draft Critical Calendar for Fiscal Year 2025-2026 – Juan Hernandez (5 min)
  - B. Review and Approve Board Master Calendar for Fiscal Year 2025-2026 – Juan Hernandez (3 min)
- VII. **Committee Business**
  - A. Review Proposed Board Budget for Next Fiscal Year (*Deferred*)
  - B. Monthly Whistleblower Log (May-June) – Betsy Monahan (3 min)
- VIII. **Center Operations** Angela Pao-Johnson (5 min)
- IX. **Closed Session** (5 min)
  - A. Personnel
- X. **Board Meeting Agenda Items** (1 min)
- XI. **Announcements / Public Input/Information Items** (3 min per person / 3 attendees max)
  - A. Next meeting August 28, 2025
  - B. Committee Attendance
- XII. **Adjournment**

North Los Angeles County Regional Center  
**Executive Committee Meeting Minutes**  
May 29, 2025

**Present:** Board of Trustees President Juan Hernandez, First Vice President and Board Secretary Sharmila Brunjes, Second Vice President Curtis Wang, Board Treasurer Anna Hurst, ARCA Representative Leticia Garcia – Committee Members

Executive Director Angela Pao-Johnson, Deputy Director Evelyn McOmie, Chief Financial Officer Vini Montague, Human Resources Director Betsy Monahan, Contract Administration & Privacy Manager Megan Mitchell, and Executive Administrative Assistant Lindsay Granger – Staff Members

Mark Wolfe – DDS Tech Advisor, Tresa Oliveri – DDS Tech Advisor, Name, Aaron Abramowitz - Legal Counsel, Jacqueline Gaytan – DDS – Guests

**Absent:**

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1. **CALL TO ORDER**

There being a quorum present, and adequate and proper notice of the meeting having been given, the meeting was called to order at 6:39 p.m.

2. **COMMITTEE MEMBER ATTENDANCE**

Juan Hernandez reminded members to identify themselves prior to making a motion and reviewed the NLACRC Board of Trustees Civility Code.

3. **AGENDA**

**On a motion made by Curtis Wang, seconded by Anna Hurst, it was resolved to approve the agenda, with the amendment. Motion carried.**

The amended agenda will reflect a correction to the date of the agenda approval to say May 29, 2025.

4. **PUBLIC INPUT – AGENDA ITEMS**

There was no public input regarding the agenda.

5. **CONSENT ITEMS**

**On a motion made by Curtis Wang, seconded by Anna Hurst, it was resolved to approve the minutes of the Executive Committee meeting held on April 24, 2025, as presented. Motion carried.**

6. **ACTION ITEMS**

6.1 **Approval of Updated Executive Committee Critical Calendar for Current Fiscal Year**

Small changes to the current fiscal year were made to the current critical calendar. It was noted that there would be an additional committee meeting in May due to the Board Budget agenda item unable to be presented at the May Executive Committee Meeting. The primary change is the additional meeting in June.

**On a motion made by Curtis Wang, seconded by Juan Hernandez, it was resolved to approve updated Executive Committee Critical Calendar for the current fiscal year, which adds an Executive Committee meeting in June. Lety Garcia abstained. Motion carried.**

## **6.2 Review and Approval of the Executive Committee Draft Critical Calendar for Next Fiscal Year**

Updates were made the Executive Committee Draft Critical Calendar for Fiscal Year 2025-2026 to align with the Executive Director Contract and timeline that runs from September to September. On Tuesday, May 27<sup>th</sup> there was discussion during the ED Onboarding and Performance Evaluation workgroup meeting that suggested timeline changes to be able to complete the evaluation timeframe for the first fiscal year, year one deadline. These changes were suggested followed the posting of the meeting packet.

**On a motion made by Anna Hurst, seconded by Juan Hernandez, it was resolved to table the Executive Committee Draft Critical Calendar for next fiscal year until it can be fully aligned with the Executive Director timeline. Motion carried.**

**ACTION:** Betsy Monahan and Lety Garcia will connect next Tuesday to review the Critical Calendar to work on updating the critical calendar with the timeline after the next ED evaluation workgroup.

## **6.3 Board Priorities for Next Fiscal Year**

The Board Priorities for Fiscal Year 2025-2026 were reviewed. It was noted that in lieu of monitoring the previous strategic plan the wording should be changed to support the Executive Director in developing the new strategic plan. Also, additional amendments to language were suggested for number 7 to change the language to direct the Executive Director to implement strategies to reduce caseloads.

**On a motion made by Anna Hurst, seconded by Curtis Wang, it was resolved to present the Board Priorities for fiscal year 2025-2026 with the amended language for numbers 2 and 7 to the full board for approval. Motion carried.**

**ACTION:** Board Support will amend the language on number 2 to say: "Collaborate with the Executive Director in the development, implementation, and monitoring of NLACRC's next strategic plan." The language for number 7 will be changed to say: "Direct the Executive Director to implement strategies to reduce caseloads."

## **6.4 Approval of Performance Contract Template**

Angela Pao-Johnson presented the performance contract template to be used for next fiscal year 2025-2026. The continued use of visuals as a way to present information was noted. Seeking approval to send this particular template to DDS to continue reporting in the same manner as before.

**On a motion made by Anna Hurst, seconded by Curtis Wang, it was resolved to approve the performance contract template to send to the full board for approval. Motion carried.**

## **7. COMMITTEE BUSINESS**

### **7.1 Discuss the Technical Advisor's Leaving and Parliamentarian**

May 29, 2025

The contract with the Technical Advisors runs through June 30<sup>th</sup>, and the contract with Tresa Oliveri can be renewed. Another option discussed was having a Parliamentarian join the board meetings to assist, potentially using the individual who will be providing the Board of Trustees with the Parliamentarian training. The board budget was noted as currently the board spending policy needs to be approved before a board budget can be created. This was discussed due to the board actively being conscious about funds. Sharmila Brunjes noted that the board should take under serious consideration retaining the current technical advisor. Anna Hurst suggested looking at ways to structure the contract. Lety Garcia noted that performance measures should be set. Tresa Oliveri explained interest in continuing to work with the board, but expectations need to be defined with outcome-based statements and metrics on how to measure success. It was determined that the next step is develop a scope for the services the board is seeking. Anna Hurst volunteered to do a high level presentation to the board at the next Board of Trustees meeting in June and to send out a survey to the board members to determine what individuals may need. Sharmila Brunjes volunteered to assist Anna Hurst in putting this together.

**ACTION:** Anna Hurst and Sharmila Brunjes will work together to present a high-level presentation to the Board of Trustees at the June meeting and send out a survey to send to the board members prior to that meeting to see what people may need.

## 7.2 Special Contract Language

Angela Pao-Johnson reviewed the Special Contract Language Quarterly Update. The caseload ratios were reviewed noting that gains that have been made during the past year in decreasing the caseload ratio number. To meet statutory compliance the caseload ratio needs to be 1 in 62 with CSC service coordinators. Continued hiring efforts for additional CSCs will work toward meeting compliance. Policies that have been submitted to DDS were reviewed. Communication systems are currently being reviewed internally to better develop a tracking mechanism to assist in addressing the reasons for calls. It was noted that there has been a lot of positive feedback, especially with new hires. Having a board member as SDP Liaison again was discussed.

**ACTION:** Board Support will send out an email to the Board of Trustees members to see if anyone is interested in the position of SDP Liaison.

## 7.3 Review Draft Board Master Calendar and Committees' Critical Calendars for Next Fiscal Year

The critical calendars for next fiscal year for the following committees: Consumer Services Committee, Government and Community Relations Committee, and Post-Medical Retirement Trust Committee were reviewed by the committee before going to the Board of Trustees. Also, the board master calendar was reviewed. Anna Hurst noted that this item should be tabled until the next Executive Committee meeting as it would need to be updated pending the next Board of Trustees meeting.

**ACTION:** Board Support will include this item on the next Executive Committee agenda.

## 7.4 Board Retreat Update

An update was provided on the Board Retreat, which will be happening on September 6<sup>th</sup>. There was discussion about potentially working with outside training and the next scheduled workgroup meeting on Tuesday, June 3<sup>rd</sup>. Tresa Oliveri suggested extending the board retreat to two days in order to review and digest all the information.

## 7.5 Discuss Board Retreat for Next Fiscal Year

It was discussed that there needed to be an idea of the cost requirement to meet the 90-day DDDS deadline, and it was discussed that the Board Retreat scheduled for September 6<sup>th</sup> should be done in

two parts. Part 2 of the Board Retreat could potentially occur in October. Additional items to be reviewed at the board retreat were discussed.

This discussion would continue offline during the Board Retreat workgroup meetings.

**7.6 Review Proposed Board Budget for Next Fiscal Year (Deferred)**

**7.7 Monthly Whistleblower Log (March-April)**

Betsy Monahan reviewed the monthly whistle blower report and noted that there were eleven complaints received that are currently open and under review. The majority of the complaints were relating to service providers.

**7.8 Monthly Whistleblower Log (April-May)**

Betsy Monahan reviewed the monthly whistleblower log for the months of April to May, noting that there was a total of sixteen complaints. Six complaints that were previously reported on the month before that had been reviewed, findings provided, resolved, and closed. There were ten open complaints that were still currently under review. A majority of these related to allegations for service provider situations.

**8. CENTER OPERATIONS**

Angela Pao-Johnson presented the operations update for the center. Included in the report were NLACRC spotlight highlights, the department development center updates, federal budget developments, as well as center updates such as recruitment updates, consumer statistics, outreach efforts, and upcoming events.

**9. BOARD MEETING AGENDA ITEMS**

ARCA Onboarding Presentation will be presented for feedback and added to the Board Agenda as requested by Lety Garcia.

An update on the Board Retreat date of September 6<sup>th</sup> will be given.

The Technical Advisors Leaving and a Parliamentarian would be presented to the Board of Trustees.

**10. ANNOUNCEMENTS / PUBLIC INPUT / INFORMATION ITEMS**

**11. NEXT MEETING**

The date of the next Executive Committee meeting is June 26, 2025, at 6:35 p.m.

**12. ADJOURNMENT**

**On a motion duly made and carried, it was agreed that there was no further business to transact; the meeting closed at 8:57 p.m.**

**DISCLAIMER**

The above minutes should be used as a summary of the motions passed and issues discussed at the meeting. This document shall not be considered a verbatim copy of every word spoken at the meeting.

<p style="text-align: center;"><i>NLACRC</i> <span style="float: right;"><i>MONTHLY</i></span>  <i>Executive Finance Committee</i>  <b>CRITICAL CALENDAR</b>  <i>FY 2025-26</i></p>	
<i>Executive Finance Committee Meetings are held on the 4<sup>th</sup> Thursday of the month.</i>	
<i>Month</i>	<i>Activity</i>
<i>July</i>	The committee does not meet in July
<i>August</i>	<p>Committee reviews the Purchase of Service Annual Report FY 2024-2025</p> <p>Orientation for new Committee. Committee reviews their Policies &amp; Procedures, Bylaws Statement, Board Audit Section, Action Log or previous fiscal year and Officers Policy.</p> <p>Committee is provided with copies of their approved critical calendar for the new fiscal year.</p> <p>Public meetings are held this month or September to get community input into the center’s performance contract for next calendar year.</p> <p>The Head of Human Resources Department will review with the new Board President his/her responsibilities and the process surrounding the Executive Director’s performance evaluation.</p> <p>Legal Counsel will complete and provide a summary report of the Executive Director’s evaluation and review with the Negotiating Committee (in Closed Session)</p> <p>The Head of Human Resources Department and CFO meet with the Negotiating Committee to provide the compensation data for review and provides any requested additional information.</p> <p>Executive Director’s evaluation to be completed and a summary report is reviewed (in Executive Session).</p> <p>The Head of Human Resources Department will prepare the documentation necessary to memorialize the Negotiating Committee’s compensation recommendations and/or contract changes as appropriate. Determine the cost, location, and date of the Annual Board Dinner for FY 25-26.</p> <p>Determine the cost, location, and date of the Annual Board Retreat for FY 25-26.</p> <p>Semi-Annual Reporting of CIE/PIP</p> <p>Annual Reporting of Program Closures</p> <p>Semi-Annual Review of Performance Contract Metrics</p> <p>AA      Orientation for new committee.</p> <p>AA      Review policies &amp; procedures, board audit section, action log for</p>



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<i>Executive Finance Committee Meetings are held on the 4<sup>th</sup> Thursday of the month.</i>	
<i>Month</i>	<i>Activity</i>
	<p>previous fiscal year, and meeting schedule.</p> <p>C Review center's contract with DDS.</p> <p>F Review approved critical calendar for new fiscal year.</p> <p>F Status report on new credit line and cash flow.</p> <p>HR Review 4<sup>th</sup> quarter human resources report.</p> <p>HR Review any Board Member Conflict of Interest</p> <p>L Quarterly legal update (Executive session).</p> <p>F Review POS Late Bill Report</p> <p>F Review Detailed Financial Reports</p> <p>I Review Center's insurance coverage for the new fiscal year.</p> <p>PRMT Review 4<sup>th</sup> quarter fees report on U.S. Bank transactions.</p> <p>UAL Review 4<sup>th</sup> quarter fees report on U.S. Bank &amp; PFM Asset Mgmt transactions.</p> <p>HR Ensure personnel policies in compliance with DDS contract.</p> <p style="text-align: center;"><i>Note: Independent audit entrance meeting occurs in August</i></p>
<i>September</i>	<p>Whistleblower Compliance Officer (Head of Human Resources Department) gives the committee an annual report on whistleblower compliance activity.</p> <p>Copies of all signed documents will be provided to the Head of the Human Resources Department to allow for the timely processing of Executive Director compensation information.</p> <p>The Head of Human Resources Department will schedule a meeting with the Executive Director and provide the Board President with all required documents needed for the meeting (e.g. compensation, performance review information, employment contract changes, etc.).</p> <p>I Recommend to the Board to authorize an officer to secure workers compensation insurance for next calendar year.</p> <p>F Update on independent audit</p>
<i>October</i>	<i>The committee does not meet in October.</i>
<i>November</i>	<p>Review of the prior year's Performance Contract Year-End report.</p> <p>The Head of the Human Resources Department, Chief Financial Officer, and</p>

<p style="text-align: center;"><i>NLACRC</i> <span style="float: right;"><i>MONTHLY</i></span>  <i>Executive Finance Committee</i>  <b>CRITICAL CALENDAR</b>  <i>FY 2025-26</i></p>	
<i>Executive Finance Committee Meetings are held on the 4<sup>th</sup> Thursday of the month.</i>	
<i>Month</i>	<i>Activity</i>
	<p>Legal Counsel will meet with the Board President and the Negotiating Committee to review the performance evaluation and compensation process.</p> <p>Review the Results of the Employee Satisfaction Survey</p> <p>Committee reviews the Executive Director Evaluation process timeline.</p> <p>Review the CY2026 Training Plan</p> <p>HR    Review 1<sup>st</sup> quarter human resources report.</p> <p>C      Status report on lease agreements.</p> <p>L      Quarterly legal update (Executive session).</p> <p>PRMT Review 1<sup>st</sup> quarter fees report on U.S. Bank transactions.</p> <p>UAL   Review 1<sup>st</sup> quarter fees report on U.S. Bank &amp; PFM Asset Mgmt transactions.</p> <p>F      Update on independent audit</p>
<i>December</i>	The committee does not meet in December
<i>January</i>	<p>Committee begins discussion about the next Annual Board Retreat.</p> <p>Committee identifies locations for the Board Retreat and Board Dinner.</p> <p>Present to the Board of Trustees the Results of the Employee Satisfaction Survey</p> <p>F      Review Purchase of Services (“POS”) projection of surplus/deficit.</p> <p>HR    Review 2<sup>nd</sup> quarter human resources report.</p>
<i>February</i>	<p>Review public policy performance measure year-end data</p> <p>Semi-Annual Review of Performance Contract Metrics</p> <p>Review/approve next FY’s Performance Contract Draft</p> <p>Semi-Annual Reporting of CIE/PIP</p> <p>F      Review annual CPA audited financial statement.                 - Review management letter &amp; response, if any.</p> <p>L      Quarterly legal update (Executive session).</p> <p>PRMT Review 2<sup>nd</sup> quarter fees report on U.S. Bank transactions.</p> <p>UAL   Review 2<sup>nd</sup> quarter fees report on U.S. Bank &amp; PFM Asset Mgmt</p>

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<i>Executive Finance Committee Meetings are held on the 4<sup>th</sup> Thursday of the month.</i>	
<i>Month</i>	<i>Activity</i>
	<p>transactions.</p> <p>F      Review Detailed Financial Reports</p> <p>F      Review ARCA PEP Statewide Report</p> <p>I      Review Insurance for Upcoming Fiscal Year</p>
<i>March</i>	<p>If applicable for the Executive Director's contract terms, the Negotiating Committee will request external benchmark compensation data from the Head of the Human Resources Department.</p> <p>L      CPA presentation on IRS Form 990 tax return.</p>
<i>April</i>	<p>The Board President presents proposed committee assignments for next fiscal year.</p> <p>Committee reviews drafts of the Board Master Calendar and Critical Calendars for next fiscal year.</p> <p>Review Purchase of Service Annual Report.</p> <p>Committee begins discussion of the annual Board Retreat for next fiscal year.</p> <p>Blank Executive Director evaluation forms are distributed for Board Members to complete. Completed evaluations are due to the Legal Counsel by the May Board meeting.</p> <p>Board Members with less than 3 months of service <u>do not</u> complete evaluation forms. All other Board Members <u>must</u> complete an evaluation form. Failure to submit a signed evaluation to the Board President or their designee by the scheduled date will be treated as resignation from the Board, unless discussed with the Board President and there is agreement to grant an extension.)</p> <p>The Board President may include the Negotiating Committee when meeting with the Executive Director for the purpose of discussing any contract and/or compensation requests that need to be considered by the Committee.</p> <p>AA      Review and approve draft critical calendar for upcoming fiscal year</p> <p>F      Authorize officer to secure line of credit for upcoming fiscal year</p> <p>F      Review and make recommendation to Board regarding ARCA dues for upcoming fiscal year</p>

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<i>Executive Finance Committee Meetings are held on the 4<sup>th</sup> Thursday of the month.</i>		
<i>Month</i>	<i>Activity</i>	
	HR	Review 3 <sup>rd</sup> quarter human resources report.
	I	Recommend to the Board to authorize an officer to secure insurance in June for next fiscal year.
<i>May</i>	<p>Committee discusses board priorities for the next fiscal year.</p> <p>Committee reviews proposed Board Budget for next fiscal year</p> <p>Committee reviews drafts of board master and critical calendars for next fiscal year.</p> <p>Committee reviews and approves the committee's draft critical calendar for next fiscal year.</p> <p>Discussion on the annual Board Retreat for the next fiscal year.</p> <p>Confirm FY 2025-2026 Year End reports are posted on website</p> <p>Select board meeting to present FY 2025 performance objectives and outcomes.</p> <p>L      Quarterly legal update (Executive session)</p> <p>PRMT   Review 3<sup>rd</sup> quarter fees report on U.S. Bank transactions</p> <p>UAL    Review 3<sup>rd</sup> quarter fees report on U.S. Bank &amp; PFM Asset Mgmt transactions.</p> <p>F      Status report on current credit line and cash flow</p> <p>F      Establish credit line for the budget year for upcoming fiscal year</p> <p>AA     Review &amp; Approve operational contracts over \$250K expiring 6/30</p>	
<i>June</i>	The Human Resources Director, and CFO, meet with the Board President and the Negotiating Committee to review the performance evaluation and compensation process.	
<i>Monthly or as needed</i>	<p>F      Review budget allocation from DDS</p> <p>F      Review budget amendments</p> <p>AA    Committee trainings</p> <p>F      Review statewide regional center POS Report</p> <p>F      Review contracts</p> <p>F      Review Audit Report(s) conducted by various entities of the Center</p> <p>L      Update on pending litigation</p>	

<p style="text-align: center;"><i>NLACRC</i> <span style="float: right;"><i>MONTHLY</i></span></p> <p style="text-align: center;"><i>Executive Finance Committee</i></p> <p style="text-align: center;"><b>CRITICAL CALENDAR</b></p> <p style="text-align: center;"><i>FY 2025-26</i></p>	
<i>Executive Finance Committee Meetings are held on the 4<sup>th</sup> Thursday of the month.</i>	
<i>Month</i>	<i>Activity</i>
	HR      Report on union-related issues
<p style="text-align: center;"><b><u>LEGEND</u></b></p> <p>AA:      Administrative Affairs                      HR: Human Resources                      L: Legal</p> <p>C:        Contract    I: Insurance    F: Fiscal</p> <p>PRMT: Post-Retirement Medical Trust                      <u>UAL</u>: CalPERS Unfunded Accrued Liability Trust</p>	

[ccal.2025-26]

**NLACRC Board of Trustees Calendar  
Fiscal Year 2025-26**

July 2025						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4 Independence Day (NLACRC closed)	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23 6:00pm-8:00pm Board Member Orientation	24	25	26
27	28	29	30	31		

Approved:

**NLACRC Board of Trustees Calendar**  
**Fiscal Year 2025-26**

## August 2025

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1	2
3	4	5	6 <u>3:00 pm</u> Consumer Advisory Committee Meeting  <u>5:30 pm</u> Nominating Committee Meeting	7	8	9
10	11  <u>5:00 pm</u> Board Packet Review  <u>6:00 pm</u> Board Training	12	13  <u>6:00 pm</u> Board of Trustees Meeting	14  <u>9:30 am</u> Vendor Advisory Committee Meeting  (Hybrid In-Person NLACRC Chatsworth Office)	15	16
17	18	19	20  <u>5:00 pm</u> Community Relations Committee Meeting	21  <u>5:30 pm</u> Post-Retirement Medical Trust Committee Meeting	22	23
24	25	26	27	28  <u>5:00 pm</u> Executive Finance Committee Meeting	29	30
31						

Approved:

**NLACRC Board of Trustees Calendar**  
**Fiscal Year 2025-26**

September 2025						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3 <u>3:00pm</u> Consumer Advisory Committee Meeting	4	5	6 <u>9:00am</u> Board Retreat
7	8 <u>5:00 pm</u> Board Packet Review  <u>6:00 pm</u> Board Training	9	10 <u>6:00 pm</u> Board of Trustees Meeting	12 <u>9:30 am</u> Vendor Advisory Committee Meeting  (Hybrid In-Person NLACRC Santa Clarita Valley Office)	13	14
15	16	17	18	19	20	21
22	23	24	25	26 <u>5:00 pm</u> Executive Finance Committee	27	28
29	30					

Approved:



**NLACRC Board of Trustees Calendar**  
**Fiscal Year 2025-26**

## October 2025

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1  <u>3:00pm</u> Consumer Advisory Committee Meeting	2	3	4
5	6  <del>6:00-7:00 pm</del> Board Training	7	8	9  <del>9:30 am - TBD</del> Vendor Advisory Committee Meeting  (Hybrid In-Person Antelope Valley Office)	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30  <del>5:00 pm</del> Executive Finance Committee Meeting	31 Halloween	

Approved:

**NLACRC Board of Trustees Calendar  
Fiscal Year 2025-26**

November 2025						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
						1
2	3	4	5  <u>3:00pm</u> Consumer Advisory Committee Meeting  <u>5:30 pm</u> <i>Nominating Committee Meeting</i>	6	7	8
9	10  <b>Veterans Day</b> (NLACRC offices closed)	11  <u>5:00 – 6:00 pm</u> Board Packet Review  <u>6:00 – 7:00 pm</u> Board Training	12  <u>6:00 pm</u> Board of Trustees Meeting  (In-Person NLACRC Chatsworth Office)	13  <u>9:30 am</u> Vendor Advisory Committee Meeting  (Hybrid In-Person NLACRC Antelope Valley Office)	14	15
16	17	18	19  <u>5:00 pm</u> Community Relations Committee Meeting	20  <u>5:30 pm</u> Post-Retirement Medical Trust Committee Meeting  <u>5:00 pm</u> <i>Executive Finance Committee</i>	21	22
23	24	25	26	27  <b>Thanksgiving</b> (NLACRC offices closed)	28  <b>Day after Thanksgiving</b> (NLACRC closed)	29
30						

Approved:

**NLACRC Board of Trustees Calendar  
Fiscal Year 2025-26**

December 2025						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25 Christmas Day (NLACRC offices closed)	26	27
28	29	30	31			

Approved:

**NLACRC Board of Trustees Calendar**  
**Fiscal Year 2025-26**

January 2026						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1 <b>New Year's Day</b> (NLACRC offices closed)	2	3
4	5	6	7  <u>3:00pm</u> Consumer Advisory Committee Meeting  <u>5:30 pm</u> Nominating Committee Meeting	8  <u>9:30 am</u> Vendor Advisory Committee Meeting  (Hybrid In-Person NLACRC Chatsworth Office)	9	10
11	12  <u>5:00 – 6:00 pm</u> Board Packet Review  <u>6:00 – 7:00 pm</u> Board Training TBD	13	14  <u>6:00 pm</u> Board of Trustees Meeting	15	16	17
18	19  <b>Martin Luther King Day</b> (NLACRC offices closed)	20	21  <u>5:00 pm</u> Community Relations Committee	22	23	24
25	26	27	28	29  <u>5:00 pm</u> Executive Finance Committee	30	31

Approved:

**NLACRC Board of Trustees Calendar  
Fiscal Year 2025-26**

February 2026						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4  3:00pm Consumer Advisory Committee Meeting  5:30 pm Nominating Committee Meeting	5	6	7
8	9  5:00 – 6:00 pm Board Packet Review  6:00 – 7:00 pm Board Training TBD	10	11  6:00 pm Board of Trustees Meeting	12  9:30 am Vendor Advisory Committee Meeting  (Hybrid In-Person NLACRC Santa Clarita Valley Office)	13	14
15	16  Presidents Day (NLACRC offices closed)	17	18	20  5:30 pm Post-Retirement Medical Trust Meeting	21	22
23	24	25	26	27  5:00 pm Executive Finance Committee	28	

Approved:

**NLACRC Board of Trustees Calendar**  
**Fiscal Year 2025-26**

March 2026						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4  3:00pm Consumer Advisory Committee Meeting  5:30 pm Nominating Committee Meeting	5	6	7
8	9  5:00 – 6:00 pm Board Packet Review  6:00 – 7:00 pm Board Training TBD	10	11  6:00 pm Board of Trustees Meeting	12  9:30 am Vendor Advisory Committee Meeting  (Hybrid In-Person NLACRC Antelope Valley Office)	13	14
15	16	17	18  5:00 pm Community Relations Committee Meeting	19	20	21
22	23	24	25	26  5:00 pm Executive Finance Committee Meeting	27	28
29	30 Cesar Chavez Day (NLACRC offices closed)	31				

Approved:

**NLACRC Board of Trustees Calendar**  
**Fiscal Year 2025-26**

April 2026						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1  3:00pm Consumer Advisory Committee Meeting  5:30 pm Nominating Committee Meeting	2	3	4
5	6  5:00 – 6:00 pm Board Packet Review  6:00 – 7:00 pm Board Training TBD	7	8  6:00 pm Board of Trustees Meeting  In-Person @ NLACRC Antelope Valley office	9  9:30 am Vendor Advisory Committee Meeting  (Hybrid In-Person NLACRC Chatsworth Office)	10	11
12	13	14	15	16	17	18
19	20	21	22	23  5:00 pm Executive Finance Committee Meeting	24	25
26	27	28	29	30		

Approved:

**NLACRC Board of Trustees Calendar**  
**Fiscal Year 2025-26**

May 2026						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1	2
3	4	5	6 <u>3:00pm</u> Consumer Advisory Committee Meeting	7	8	9
10	11 <u>5:00 – 6:00 pm</u> Board Packet Review  <u>6:00 – 7:00 pm</u> Board Training TBD	12	13 <u>6:00 pm</u> Board of Trustees Meeting	14 <u>9:30 am</u> Vendor Advisory Committee Meeting  (Hybrid In-Person NLACRC Santa Clarita Valley Office)	15	16
17	18	19	20 <u>5:00 pm</u> Community Relations Committee	21 <u>5:30 pm</u> Post-Retirement Medical Trust Meeting	22	23
24	25 <b>Memorial Day</b> (NLACRC offices closed)	26	27	28 <u>5:00 pm</u> Executive Finance Committee Meting	29	30
31						

Approved:



**NLACRC Board of Trustees Calendar**  
**Fiscal Year 2025-26**

June 2026						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3	4	5	6
7	8 <u>5:00 – 6:00 pm</u> Board Packet Review  <u>6:00 – 7:00 pm</u> Board Training TBD	9	10 <u>6:00 pm</u> Board of Trustees Meeting	11 <u>9:30 am</u> Vendor Advisory Committee Meeting  (Hybrid In-Person NLACRC Antelope Valley Office)	12	13
14	15	16	17	18 <b>Juneteenth</b> (NLACRC offices closed)	19	20
21	22	23	24	25	26	27
28	29	30				

Approved:



	Time Period:	5/16/2025 - 6/15/2025							
Date Complaint Received	Complainant Type	Investigation Case No.	Date Acknowledgment Sent to Complainant	Nature of Complaint	Investigation Details	Investigation Results	Corrective Action Taken (if applicable)	Date Complaint Closed	Submitted/Logged by
12/12/2024	Community Member	2024-SPWB-013	12/12/2024	Vendors have not been paid through FMS vendor; Conflict of interest . SDP Funds not being managed appropriately.	1. Vendors have not been paid through FMS vendor, rather funding is transferred to a vendored company owned by the Independent Facilitator (IF) who is paying for services provided to client. 2. Conflict of interest as Independent Facilitator owns the vendored business serving family. 3. Payments are being withheld during Winter break by IF. Parent has not authorized gap in services. 4. IF is diverting SDP funds to their vendored account causing budgeting discrepancies and missing funds.	1. Vendors have not been paid through FMS vendor, rather funding is transferred to a vendored company owned by the Independent Facilitator (IF) who is paying for services provided to client. 2. Conflict of interest as Independent Facilitator owns the vendored business serving family. 3. Payments are being withheld during Winter break by IF. Parent has not authorized gap in services. 4. IF is diverting SDP funds to their vendored account causing budgeting discrepancies and missing funds.  <i>Referred to SDP Ombudsmen; CM meeting with DDS to further review</i>	Open		Arshalous Garlanian, Community Services Director
3/13/2025	DDS: Community Member	2025-SPWB-04	3/13/2025	Failure to provide vendored services; Billing for services not provided; Client's Rights Violation; Staff are not trained and lack professionalism.	1. The program does not provide the type of services they are vendored to provide. Client goals are not addressed or developed. Clients are left to sit at the mall or library all day. Staff do not interact with clients. Staff are not allowed to support or engage clients in activities, such as bowling on Fridays. Clients who want to leave the program are not provided the assistance to do so. The provider is billing for services that are not being provided. Staff bully/harass clients, talk badly about clients, and make inappropriate comments about how clients are dressed.  2. Staff was named as a staff person of concern. Staff allegedly called client disgusting; did not return a bag belonging to client "client"; and made comments about a client (name unknown) smelling like urine. Staff had clients watch an inappropriate movie (Mickey 17) on March 7, 2025. Staff are not trained and are unaware of how to do their jobs. Staff may be documenting activities that are not occurring.  3. The reporting party also shared other allegations about individuals served by this provider: Client 1, or Client 2 is making racial slurs and behaving inappropriately toward other clients and staff. Some clients served by this day program may not be getting adequate food at their residential home(s), and day program staff are not allowed to provide food to these individuals (3 clients named). Client is being exploited/selling their body for sexual activity outside of the day program.	1. The program does not provide the type of services they are vendored to provide. <i>Unsubstantiated</i> Client goals are not addressed or developed. Clients are left to sit at the mall or library all day. Staff do not interact with clients. Staff are not allowed to support or engage clients in activities, such as bowling on Fridays. Clients who want to leave the program are not provided the assistance to do so. The provider is billing for services that are not being provided. Staff bully/harass clients, talk badly about clients, and make inappropriate comments about how clients are dressed. <i>Unsubstantiated</i>  2. Staff was named as a staff person of concern. Staff allegedly called client disgusting; did not return a bag belonging to client "client"; and made comments about a client (name unknown) smelling like urine. Staff had clients watch an inappropriate movie (Mickey 17) on March 7, 2025. Staff are not trained and are unaware of how to do their jobs. Staff may be documenting activities that are not occurring. <i>Unsubstantiated</i>  3. The reporting party also shared other allegations about individuals served by this provider: Client 1, or Client 2 is making racial slurs and behaving inappropriately toward other clients and staff. Some clients served by this day program may not be getting adequate food at their residential home(s), and day program staff are not allowed to provide food to these individuals (3 clients named). Client is being exploited/selling their body for sexual activity outside of the day program. <i>Unsubstantiated</i>	Closed; Response Letter sent to DDS	5/27/2025	Arshalous Garlanian, Community Services Director
4/3/2025	NLACRC Employee	2025 -EWB - 01	4/3/2025	Allegation of Financial Abuse	1. Provider approved "outrageous" amount from client's account for home maintenance without approval.	1. Provider approved "outrageous" amount from client's account for home maintenance without approval. <i>Unsubstantiated</i>	Closed	4/28/2025	Arshalous Garlanian, Community Services Director



	Time Period:	5/16/2025 - 6/15/2025							
Date Complaint Received	Complainant Type	Investigation Case No.	Date Acknowledgment Sent to Complainant	Nature of Complaint	Investigation Details	Investigation Results	Corrective Action Taken (if applicable)	Date Complaint Closed	Submitted/Logged by
4/4/2025	Family Member	2025-SPWD-07	4/4/2025	Failure to provide services; Allegation of Abuse/Neglect; Allegation of Substance Abuse; Allegation of Theft & Personal Safety	1. Abuse and Neglect: Client reportedly being emotionally, physically, and financially abused; facility is allegedly billing for services 1:1 not being delivered; client confined to his room for most of the day and only taken out for brief errands or occasional outings.  2. Substance Abuse and Enabling Behavior: client began taking medications six months ago, which is a significant change given his history of never having been medicated. This was done against the family's wishes: Since starting medication, client has reportedly suffered from: An 80-pound weight gain; Depression; Deterioration of his teeth; Presence of body fungus; He has also reportedly started using cannabis and other hard drugs while in the home; Staff are allegedly aware of and facilitating this drug use, including taking him to purchase cannabis; The facility is reportedly retaining drug paraphernalia (e.g., a pipe) in the event of an audit.  3. Theft and Personal Safety Concerns: Client feels unsafe in the home and reports that personal belongings, including items from his room and wallet, have been stolen ( <i>Substantiated</i> ); When he addresses these concerns with staff, they allegedly gaslight him; Family report being denied visitation when they advocate on his behalf; Staff reportedly do not engage with or speak to Dominick regularly.	Open	Open		Arshalous Garlanian, Community Services Director
4/8/2025	Service Provider	referred by DDS	4/8/2025	Allegations of HIPAA and Verbal Mistreatment by Vendor	1. Owner posed as a regional center manager to obtain confidential medical information about a surgical procedure, causing delays. 2. Owner yelled at her and her children, triggering her PTSD.	1. Owner posed as a regional center manager to obtain confidential medical information about a surgical procedure, causing delays. <i>Unsubstantiated</i> 2. Owner yelled at her and her children, triggering her PTSD. <i>Unsubstantiated</i>	Closed	5/8/2025	Arshalous Garlanian, Community Services Director
4/11/2025	NLACRC Employee	2025 -EWB - 02	4/14/2025	Allegation of unprofessional conduct, discriminatory behavior, improper systems' use	1. NLACRC staff improperly followed established SOPs to create/migrate temp/contractor system accounts to employee accounts post-conversion. 2. NLACRC staff incorrectly set access controls to prevent employees from their ability to use applications for their time-sensitive work. 3. NLACRC staff used improper methods with systems to complete work activities. 4. Employees impacted by items 1-3 were treated differently than other similarly-situated employees.  <i>Investigation tendered to outside counsel to complete investigation.</i>	Open	Open		Betsy Monahan, HR Director
4/16/2025	Service Provider	2025-03 -SPWB	4/17/2025	Allegation of derogatory and unprofessional conduct by a NLACRC employee	NLACRC staff person made editorial personal-opinion comments regarding a service during a business call with a NLACRC client, which were reported as derogatory and unprofessional in nature.	NLACRC staff person made editorial personal-opinion comments regarding a service during a business call with a NLACRC client, which were reported as derogatory and unprofessional in nature. <i>Substantiated</i>	Closed Employee corrective action + additional coaching delivered	4/25/2025	Betsy Monahan, HR Director
4/16/2025	Service Provider	2025-SPWB-05	4/17/2025	Allegation of failure to follow medication security procedures and negligence of administering medication to clients	Open	Open	Open		Arshalous Garlanian, Community Services Director
4/16/2025	NLACRC Employee	2025 -EWB - 04	4/17/2025	Allegation of improper conduct by staff to co-workers; failure to hold staff to account for their duties creating a negative work impact for co-workers	Open	Open	Open		Betsy Monahan, HR Director
5/5/2025	Anonymous/Unknown	2025-UWB-03	N/A	Management staff having history of misconduct prior to employment with vendored agency.	1. Concerns vendor employed an individual with previous allegations of misconduct	1. Concerns vendor employed an individual with previous allegations of misconduct. <i>Unsubstantiated</i>	Closed	5/9/2025	Arshalous Garlanian, Community Services Director



	Time Period:	5/16/2025 - 6/15/2025							
Date Complaint Received	Complainant Type	Investigation Case No.	Date Acknowledgment Sent to Complainant	Nature of Complaint	Investigation Details	Investigation Results	Corrective Action Taken (if applicable)	Date Complaint Closed	Submitted/Logged by
5/19/2025	Family Member	2025 -EWB - 06	5/23/2025 via USPS mail	Lack of CSC contact or provision of services.	Reported via USPS mail; confirmation of complaint provided via same method .  Family member of transition-age consumer alleging lack of contact or service provisions by assigned CSC.	Open	Open		Betsy Monahan, HR Director
5/22/2025	NLACRC Employee	2025 -EWB - 05	5/22/2025	Allegations of the following:  1. Hiring Irregularities 2. Mishandled cybersecurity/Misaligned leadership 3. Suppression of internal feedback 4. Security/HIPAA violations 5. Workplace misconduct  Allegations above refer to/include reference to prior DDS-referred complaints (24-102803 and 24-110101)	1. Hiring Irregularities 2. Mishandled cybersecurity/Misaligned leadership 3. Suppression of internal feedback 4. Security/HIPAA violations 5. Workplace misconduct  <i>Investigation tendered to outside counsel to assist with additional investigation.</i>	Open	Open		Betsy Monahan, HR Director
5/29/2025	Anonymous/Unknown		N/A	Staffing ratios not being met; Communication barriers between staff and participants; Participant in PIP is not being paid for hours worked.	1. 1:1 Staffing ratio for a client is not being provided. 2. Some staff are not able to communicate in the participants preferred language. 3. A participant in PIP is not being paid for the full 2.5 hours due to family's fear of losing benefits.	Open	Open		Arshalous Garlanian, Community Services Director
6/9/2025	Anonymous/Unknown	2025-UWB-01	N/A	Unfair work practices; Staff not being treated fairly; Failure to report; Clients not being engaged; Clients Rights Violations.  Amended/re-opened from original complaint submitted 4/9/2025	1. Physical abuse against clients by staff; 2. Program Director does not address or make reports of incidents; 3. Clients being treated unfairly & are not engaged in choosing activities; 4. Staff not treated fairly by program director; 5. Clients being asked to sign safety and emergency drill & not explain what they are signing .	Open	Open		Arshalous Garlanian, Community Services Director



**North Los Angeles County Regional Center**  
**Director's Report**  
June 2025

**1. NLACRC Spotlight:**

**A. Self-Determination Program (SDP) Leadership Expansion**

- i. NLACRC hired five new SDP Lead Consumer Service Coordinators (CSCs) – three in Antelope Valley and two in San Fernando Valley—to help strengthen coaching for staff and training for both staff and families.
- ii. SDP training for all CSCs is being rolled out in June 2025 to ensure staff are well-equipped to support participants and their families.

**B. Support Positions Hired**

- i. As of June 17, 2025, 14 of the 15 Leader Trainer Unit positions have been filled, demonstrating continued momentum in staff development and leadership capacity.
- ii. NLACRC will soon be onboarding the first 4 Associate Consumer Service Coordinators (ACSCs) through our partnership with Cal State Northridge University.

**C. Vendor Engagement and Compliance Progress**

- i. NLACRC achieved a 92% submission rate of Rate Letter Agreements from service providers by the May 30, 2025, deadline as part of the statewide Rate Reform efforts.
- ii. The Service Provider Directory project also reached near-full completion, with all but one provider submitting their information by the May 30<sup>th</sup> deadline.

**D. Quality Incentive Program (QIP) Milestone**

- i. All Quality Incentive Program (QIP) payments received from the Department of Developmental Services (DDS) have been processed within the required 90-day timeline, ensuring timely reimbursements to participating providers.

**E. Social Recreation Access and Reimbursements**

- i. As of May 30, 2025, NLACRC has processed 1,265 reimbursements for social recreation services, increasing access to community-based enrichment activities for individuals served.

**F. Competitive Integrated Employment (CIE) and Paid Internship Growth**

- i. NLACRC currently supports 393 participants in the Paid Internship Program (PIP), creating meaningful employment pathways for individuals with developmental disabilities.
- ii. Approximately 84 individuals have active CIE Purchase of Service (POS) authorizations for Fiscal Year 2024-2025.

### **G. Coordinated Family Support Leadership**

- i. NLACRC is currently ranked 3<sup>rd</sup> in the state for the number of Coordinated Family Support vendors, reflecting its strong commitment to family-focused services and statewide best practices.

## **2. Department of Developmental Services (DDS) Updates:**

### **A. DDS Issues New Directive (D-2025-009)**

#### **i. 3 crucial elements:**

- 1. Ensures continued services for individuals with developmental disabilities during times of uncertainty.
- 2. Provides flexibility for regional centers and providers.
- 3. Supports those impacted by fear of family separation or who need to remain at home.

#### **ii. Regional Center Responsibilities & Additional Flexibilities to Accommodate**

- 1. Contact families to identify urgent needs.
- 2. Prioritize IPP/IFSP updates and service changes.
- 3. Offer remote meetings (phone/computer) if requested.
- 4. Maintain required in-person visits (every 6 or 12 months, depending on age).
- 5. Expedite help with housing, food, or transportation if needed.

#### **iii. Remote Services Through 2026 for Service Providers:**

- 1. Remote services allowed for:
  - a. Day programs
  - b. Look-a-like programs
  - c. Independent living
  - d. Behavioral therapy
  - e. Lanterman eligibility assessments

#### **iv. Privacy Protections**

- 1. Services continue despite changes in guardianship or representation.
- 2. Parent/guardian contact info is confidential.
- 3. Immigration status is not tracked or reported.

## **3. Center Updates:**

### **A. Recruitment:**

- i. Total # positions filled: 875
  - 1. Total # positions authorized: 1027
- ii. June New Hires
  - 1. 1<sup>st</sup> Cycle (6/2/2025): 9 confirmed total

2. 2<sup>nd</sup> Cycle (6/16/2025): 12 confirmed total
3. 3<sup>rd</sup> Cycle (6/30/2025): 14 (unconfirmed)

**B. Outreach:**

- i. **Outreach Event Type:** 5/24/2025 Take Action: Filipino American Mental Health Fair
  1. **Name of CBO:** Philippine Nurses Association
  2. **Community Focused on:** Filipino Americans of the San Fernando Valley were present as it was held in a church. NLACRC provided general information about our services to the Fil-Am community. Our resource table was facilitated by our Tagalog Outreach Language Specialist.
- ii. **Outreach Event Type:** 5/27/2025 Presentation for Graduating Students
  1. **Name of CBO:** LAUSD: Miller Career and Transition Center
  2. **Community Focused on:** Presentation of Services after High School for graduating students of Miller. 18 students attended the presentation. We then had individual meetings with the students, Transition Teacher, and Transition coordinator about their plans and options with NLACRC services after High School. Also, they were provided with literature of NLA services.
- iii. **Outreach Event Type:** 6/13/25 Pride Celebration BBQ by Kaleidoscope
  1. **Name of CBO:** Kaleidoscope at The Help Group
  2. **Community Focused on:** A Pride celebration focused on teens and young adults with developmental disabilities. Our LGBTQ+ Specialist participated and provided resources to individuals and their families as they relate to NLACRC services and LGBTQ+ supports. This is also a new partnership with the LGBTQ+ support services at the Help Group.

**C. Consumer Statistics:**

- i. Total served: 39,491
  1. Early Start 5,258
  2. Lanterman 31,720
- ii. Breakdown of all three valleys:
  1. AV 9,270 (Early Start & Lanterman)
  2. SCV 4,322 (Early Start & Lanterman)
  3. SFV 23,386 (Early Start & Lanterman)
- iii. Intake all 3 valleys: 983 & Early Start Intake: 298
- iv. All other categories not captured in Early Start, Lanterman, and Intake, such as Provisional, Enhanced, Specialized, and other which total: 1,232

**4. Upcoming Disability Organization Events/Activities**

- A.** State Council on Developmental Disabilities next council meeting – July 22, 2025
- B.** Disability Rights California's next board meeting – September 20, 2025
- C.** Self Determination Local Advisory Committee Meeting – August 20, 2025



FY 2024-25	Jun-25	Jul-24	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26	May-25	Jun-25	Total Absences	Total Hours
Executive Finance Committee															
Meeting Length		Dark			Dark		Dark						Dark		
Juan Hernandez															
Sharmila Brunjes														0	
Anna Hurst														0	
Curtis Wang														0	
Leticia Garcia														0	

Meeting Time

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)