Annual Reporting of FY25-26 Whistleblower Complaints

ATTACHMENT 1

NLACRC Whistleblower Complaint Log

Fiscal Year 2024-25

Time Period: 7/16/2025 - 8/15/2025

Date Complaint Received	Complainant Type	Investigation Case No.	Date Acknowledgment Sent to Complainant	Entity That is Target of Complaint	Nature of Complaint	Investigation Allegation Details	Investigation Results	Corrective Action Taken (if applicable)	Date Complaint Closed	Complaint Investigation Duration (in Days)	Submitted/Logged by
12/12/2024	Community Member	2024-SPWB-013	12/12/2024	Service Provider - IF	Vendors have not been paid through FMS vendor; Conflict of interest . SDP Funds not being managed appropriately.	Complainant alleges: 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. *Referred to SDP Ombudsmen; CM meeting with DDS to further review*	N/A	8/14/2025 Closed Pending outcome of DDS Investigation	245	Arshalous Garlanian, Community Services Director
4/4/2025	Family Member	2025-SPWD-07	4/4/2025	Service Provider - Residential	Failure to provide services; Allegation of Abuse/Neglect; Allegation of Substance Abuse; Allegation of Theft & Personal Safety	Complainant alleges: 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 (*Substantiated/CAP*); 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 client regularly.	1. Abuse and Neglect: Client reportedly being emotionally, physically, and financially abused; facility is allegedly billing for services 1:1 not being delivered - *Unsubstantiated* 2. Client confined to his room for most of the day and only taken out for brief errands or occasional outings - *Unsubstantiated* 3. 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 - *Unsubstantiated* 4. Since starting medication, client has reportedly suffered from: a. An 80-pound weight gain - *Unsubstantiated* b. Depression - *Inconclusive* c. Deterioration of his teeth - *Inconclusive* d. Presence of body fungus - *Unsubstantiated* 5. He has also reportedly started using cannabis and other hard drugs while in the home - *Unsubstantiated* 6. Staff are allegedly aware of and facilitating this drug use, including taking him to purchase cannabis - *Substantiated* 7. The facility is reportedly retaining drug paraphernalia (e.g., a pipe) in the event of an audit - *Substantiated* 8. Theft and Personal Safety Concerns: Client feels unsafe in the home - *Unsubstantiated* 9. Reports that personal belongings, including items from his room and wallet, have been stolen - *substantiated/CAP;* 10. When he addresses these concerns with staff, they allegedly gaslight him - *Inconclusive*	Correction Action Plan item 9	8/11/2025	129	Arshalous Garlanian, Community Services Director
4/11/2025	NLACRC Employee	2025 -EWB - 02	4/14/2025	NLACRC Employee(s)	Allegation of unprofessional conduct, discriminatory behavior, improper systems' use	Complainant(s) allege: 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. *Investigation tendered to outside counsel to complete investigation.*	*Outside investigation findings:* 1. NLACRC staff improperly followed established SOPs to create/ migrate temp/contractor system accounts to employee accounts post-conversion. *Insufficient to substantiate* 2. NLACRC staff incorrectly set access controls to prevent employees from their ability to use applications for their time-sensitive work. *Insufficient to substantiate* 3. NLACRC staff used improper methods with systems to complete work activities. *Sufficient to substantiate* 4. Employees impacted by items 1-3 were treated differently than other similarly-situated employees. *Insufficient to substantiate under WB Policy; sufficient to substantiate under NLACRC policy.*	Closed Corrective actions enacted	6/17/2025	67	Betsy Monahan, HR Director
4/16/2025	NLACRC Employee	2025 -EWB - 04	4/17/2025	NLACRC Employee(s)	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	Complainant alleges: 1. Staff employee fails to complete assigned duties. 2. Supervisor fails to hold staff to account for poor performance.	1. Staff employee fails to complete assigned duties. *Substantiated* 2. Supervisor fails to hold staff to account for poor performance. *Substantiated*	Closed Corrective actions enacted	7/2/2025	77	Betsy Monahan, HR Director
5/19/2025	Family Member	2025 -EWB - 06	5/23/2025	NLACRC Employee	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.	Lack of contact/service provisions by assigned CSC - *Substantiated*	Closed Corrective actions enacted	6/16/2025	28	Betsy Monahan, HR Director

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5/22/2025	NLACRC Employee	2025 -EWB - 05	5/22/2025	NLACRC Employee(s)	Allegations of the following: 1. Hiring Irregularities 2. Mishandled cybersecurity/Misaligned leadership 3. Supression 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)	Complainant alleges: 1. Hiring Irregularities 2. Mishandled cybersecurity/Misaligned leadership 3. Supression of internal feedback 4. Security/HIPAA violations 5. Workplace misconduct *Investigation tendered to outside counsel to assist with additional investigation.*	1. Hiring Irregularities *Previously addressed/adjudicated by NLACRC under complaints 24-102803 and 24-110101.* 2. Mishandled cybersecurity/Misaligned leadership *Previously addressed/adjudicated by NLACRC under complaints 24-102803 and 24-110101.* 3. Supression of internal feedback *Insufficient to substantiate (investigated under 2025 - EWB -02)* 4. Security/HIPAA violations *Insufficient to substantiate (investigated under 2025 - EWB -02)* 5. Workplace misconduct *Insufficient to substantiate*	Closed Corrective actions enacted	6/27/2025	36	Betsy Monahan, HR Director
5/29/2025	Anonymous/Unknown	2025-SPWB-08	N/A	Service Provider - CIT	Staffing ratios not being met; Communication barriers between staff and participants; Participant in PIP is not being paid for hours worked.	Complainant alleges: 1. 1:1 Staffing ratio for a client is not being provided. 2. Some staff are not able to commuicate 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.	1. 1:1 Staffing ratio for a client is not being provided - *DDS notified NLACRC of audit* 2. Some staff are not able to commuicate in the participants preferred language - *Unsubstantiated* 3. A participant in PIP is not being paid for the full 2.5 hours due to family's fear of losing benefits - *Unsubstantiated*	Closed (1) Under DDS audit	8/14/2025	77	Arshalous Garlanian, Community Services Director
6/9/2025	Anonymous/Unknown	2025-UWB-01	N/A	Service Provider - ADC	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	Complainant alleges: 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 .	1. Physical abuse against clients by staff - *Unsubstantiated* 2. Program Director does not address or make reports of incidents - *Unsubstantiated* 3. Clients being treated unfairly & are not engaged in choosing activities - *Unsubstantiated* 4. Staff not treated fairly by program director - *Unsubstantiated* 5. Clients being asked to sign safety and emergency drill & not explain what they are signing - *Unsusbtantiated*	Closed	8/8/2025	60	Arshalous Garlanian, Community Services Director
6/14/2025	Community Member	2025-SPWB-09	6/24/2025	Service Provider - Residential	Unfair work practices; Staff not being treated fairly; Concerns with billing practices.	Complainant alleges: 1. Unprofessional and Retaliatory behavior by the facility manager (disregard for staff and resident well-being) 2. Potential violations of staff rights and responsibilities. 3. Fraudulent payroll practices (being required to work shifts without being allowed to clock in or receive proper compensation).	1. Unprofessional and Retaliatory behavior by the facility manager (disregard for staff and resident well-being) - *Unsubstantiated - Outside of RC scope* 2. Potential violations of staff rights and responsibilities - *Unsubstantiated - - Outside of RC scope* 3. Fraudulent payroll practices (being required to work shifts without being allowed to clock in or receive proper compensation) - *Outside of RC scope*	Closed	8/8/2025	55	Arshalous Garlanian, Community Services Director
7/1/2025	Anonymous/Unknown	DDS 25-063001; 2025-UWB-02	N/A	Service Provider - SLS	Fradulent billing practices; Staff and consumer boundary concerns; Staffing not being provided; Clients Rights Violation	Complainant alleges: 1. Staff has been billing for services that are not provided to consumer and has been using fradulent documentation (i.e., timesheets). 2. Consumer lives at staff's private residence in Chatsworth. 3. Consumer has not been receiving 24-hour supervision or care. 4. Staff has been neglecting and mistreating individual for the past 4 years.	1. Staff has been billing for services that are not provided to consumer and has been using fradulent documentation (i.e., timesheets) - *Referred to accounting for audit; Received approval from DDS; Engagement letter sent to vendor* 2. Consumer lives at staff's private residence in Chatsworth - *Pending* 3. Consumer has not been receiving 24-hour supervision or care - *referred to accounting for audit* 4. Staff has been neglecting and mistreating client for the past 4 years - *Pending*	Open			Arshalous Garlanian, Community Services Director
7/2/2025	Community Member	2025-SPWB-10	N/A	Service Provider - Home Health	Client's Rights Violation	Complainant alleges sexual abuse by licensed care staff.	1. Allegations of Sexual Abuse by licensed care staff - *Inconclusive*	Closed Under investigation by LAPD	8/8/2025	37	Arshalous Garlanian, Community Services Director

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7/9/2025	Community Member	DDS 25-070801; 2025-SPWB-11	TBA	Service Provider - ADC	Client's Rights Violation; Lack of supervision; Health & Safety; Failure to report incidents; Staffing policies and protocals.	Complainant alleges: 1. Individuals served are treated poorly by the program director and staff. Examples include: -Individuals are yelled at, called names, harassed, and verbally and physically abused. -Individuals are excluded from group activities/socializing with other individuals served. - Staff are leaving individuals unattended while using their cellphones and/or when individuals are upset, not ensuring the individuals are safe, and not considering the individuals' wants, needs, and goals. -Individuals are being provoked, potentially resulting in aggressive behaviors. 2. Individuals served are signing documents without receiving explanations on what is being signed (i.e., safety meeting and emergency drill documents). 3. Incidents are ignored by this provider and are not reported. 4. Staff are attempting to have client(s) removed from the program. 5. Staff use their cellphones (i.e., text messaging, video calling) while driving individuals and other staff in the company van. 6. Staff prohibit individuals from making purchases. 7. Staff cover the deficiencies within the program to prevent licensing from observing what is occurring. 8. Staff prevented a client from entering the company van to be taken home (names not provided). 9. Staff are inappropriately holding individuals and mocking them. 10. Staff did not report an incident where an individual had a seizure and fell on the ground. 11. The provider is not using funds towards the clients' activities and is profiting from selling soda to individuals in the program. 12. Company vans are dirty, have broken parts, including seat belts, and the provider will not repair the vehicles. 13. Former staff who are prohibited from being near the program have been seen nearby.	Open	Open			Arshalous Garlanian, Community Services Director
7/10/2025	Anonymous/Unknown	2025-UWB-03	N/A	Service Provider - Speclzd Residential	Client's Rights Violation; Failure to report.	Complainant alleges: 1. The house administrator verbally abused resident. 2. The incident was reported to upper management, but no action was taken to address it.	1. The house administrator verbally abused resident. - *Unsubstantiated* 2. The incident was reported to upper management, but no action was taken to address it. - *Unsubstantiated*	Closed Pending Letter			Arshalous Garlanian, Community Services Director
7/18/2025	Anonymous/Unknown	DDS 25-062602; amended to 2025 -EWB - 05	N/A	NLACRC Employee(s)	Fiscal malfeasance; violation of Board/regional center policy	Complainant alleges: 1. The combined contract totals for two I.T. consultants exceeded $600,000 annually in Fiscal Years 2021-22, 2022-23, and 2023-24. However, the contracts were intentionally split to evade review by the NLACRC Board of Trustees (Board). 2. The contracts were presented to the Board for approval without the appropriate parties disclosing the cumulative financial and functional impact, compromising fiduciary responsibility and public trust.	Open	Open			Betsy Monahan, HR Director
7/22/2025	Anonymous/Unknown	DDS 24-110801 re-opened: new information	N/A	NLACRC Employee	Alleged sexual harassment (hostile work environment)	Original complaint alleges: 1. NLACRC Management individual is intimidating, bullying, harassing and sexually harassing NLACRC staff. New allegation: 2. Type 4 Workplace Violence perpertrator allegedly verbally, digitally and physically harassed NLACRC staff member due to improper relationship/association with NLACRC Management individual.	Open	Open			Betsy Monahan, HR Director

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Fiscal Year 2025-26

Time Period: 8/16/2025 - 9/15/2025

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7/1/2025	Anonymous/Unknown	DDS 25-063001; 2025-UWB-02	N/A	Service Provider - SLS (896)	Fradulent billing practices; Staff and consumer boundary concerns; Staffing not being provided; Clients Rights Violation	Complainant alleges: 1. Staff has been billing for services that are not provided to consumer and has been using fradulent documentation (i.e., timesheets). 2. Consumer lives at staff's private residence in Chatsworth. 3. Consumer has not been receiving 24-hour supervision or care. 4. Staff has been neglecting and mistreating individual for the past 4 years.	1. Staff has been billing for services that are not provided to consumer and has been using fradulent documentation (i.e., timesheets) - *Referred to accounting for audit; Recevied approval from DDS; Audit in progress* 2. Consumer lives at staff's private residence in Chatsworth - *Unsubstantiated* 3. Consumer has not been receiving 24-hour supervision or care - *Referred to accounting for audit; Recevied approval from DDS; Engagement letter sent to vendor* 4. Staff has been neglecting and mistreating A.C. for the past 4 years - *Unsubstantiated*	Closed Plan for Improvement 8/22/2025	8/22/2025	52	Venus Rodriguez-Khorasani Community Services Manager
7/9/2025	Community Member	DDS 25-070801; 2025-SPWB-11	TBA	Service Provider - ADC (510)	Client's Rights Violation; Lack of supervision; Health & Safety; Failure to report incidents; Staffing policies and protocals.	Complainant alleges: 1. Individuals served are treated poorly by the program director and staff. Examples include: -Individuals are yelled at, called names, harassed, and verbally and physically abused. -Individuals are excluded from group activities/socializing with other individuals served. - Staff are leaving individuals unattended while using their cellphones and/or when individuals are upset, not ensuring the individuals are safe, and not considering the individuals' wants, needs, and goals. -Individuals are being provoked, potentially resulting in aggressive behaviors. 2. Individuals served are signing documents without receiving explanations on what is being signed (i.e., safety meeting and emergency drill documents). 3. Incidents are ignored by this provider and are not reported. 4. Staff are attempting to have client(s) removed from the program. 5. Staff use their cellphones (i.e., text messaging, video calling) while driving individuals and other staff in the company van. 6. Staff prohibit individuals from making purchases. 7. Staff cover the deficiencies within the program to prevent licensing from observing what is occurring. 8. Staff prevented a client from entering the company van to be taken home (names not provided). 9. Staff are inappropriately holding individuals and mocking them. 10. Staff did not report an incident where an individual had a seizure and fell on the ground. 11. The provider is not using funds towards the clients' activities and is profiting from selling soda to individuals in the program. 12. Company vans are dirty, have broken parts, including seat belts, and the provider will not repair the vehicles. 13. Former staff who are prohibited from being near the program have been seen nearby.	Reopened 8/25/2025 NLACRC received additional information requiring additional follow-up	Open		Initial Complaint 64 daya Will reassess when investigation is again completed	Venus Rodriguez-Khorasani Community Services Manager
7/10/2025	Anonymous/Unknown	2025-UWB-03	N/A	Service Provider - Speclzd Residential (113)	Client's Rights Violation; Failure to report.	Complainant alleges: 1. The house administrator verbally abused resident. 2. The incident was reported to upper management, but no action was taken to address it.	1. The house administrator verbally abused resident. - *Unsubstantiated* 2. The incident was reported to upper management, but no action was taken to address it. - *Unsubstantiated*	Closed	8/25/2025	63	Venus Rodriguez-Khorasani Community Services Manager
7/18/2025	Anonymous/Unknown	DDS 25-062602; amended to 2025 -EWB - 05	N/A	NLACRC Employee(s)	Fiscal malfeasance; violation of Board/regional center policy	Complainant alleges: 1. The combined contract totals for two I.T. consultants exceeded $600,000 annually in Fiscal Years 2021-22, 2022-23, and 2023-24. However, the contracts were intentionally split to evade review by the NLACRC Board of Trustees (Board). 2. The contracts were presented to the Board for approval without the appropriate parties disclosing the cumulative financial and functional impact, compromising fiduciary responsibility and public trust.	Complainant alleges: 1. The combined contract totals for two I.T. consultants exceeded $600,000 annually in Fiscal Years 2021-22, 2022-23, and 2023-24. However, the contracts were intentionally split to evade review by the NLACRC Board of Trustees (Board). 2. The contracts were presented to the Board for approval without the appropriate parties disclosing the cumulative financial and functional impact, compromising fiduciary responsibility and public trust.	Pending Direction - Submitted Responses to DDS on 8/18/2025 , 09/02/2025, and 09/04/2025			Betsy Monahan HR Director

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7/22/2025	Anonymous/Unknown	DDS 24-110801 re-opened: new information	N/A	NLACRC Employee	Alleged sexual harassment (hostile work environment)	Original complaint alleges: 1. NLACRC Management individual is intimidating, bullying, harassing and sexually harassing NLACRC staff. New allegation: 2. Type 4 Workplace Violence perpertrator allegedly verbally, digitally and physically harassed NLACRC staff member due to improper relationship/association with NLACRC Management individual.	Open	Open			Betsy Monahan HR Director
9/3/2025	Community Member	2025-SPWB-13	9/3/2025	Service Provider - Residential (915)	Unapproved behavioral restraint; Staff not cleared or associated by CCL; Licensee falsifies personnel records; Lack of supervision due to staff sleeping during NOC shift; Residents needs are not met.	Complainant alleges: 1. Staff chemically restrained a client. 2. Uncleared adults are working at the facility. 3. Licensee falsifies personnel records. 4. Residents are not adequately supervised due to staff sleeping during the overnight shift. 5.Licensee does not ensure that the needs of the residents in care are met.	Open CCL Lead	Open			Venus Rodriguez-Khorasani Community Services Manager
9/10/2025	Service Provider	2025-SPWB-12	9/10/2025	Service Provider - Residential (915)	Alleged Client Safety and Well-being Endangerment - Delayed Response Alleged Inaccurate Incident Reporting Alleged Insufficient Staffing and Inaccurate Staffing Reports	Complainant alleges: 1. Service Provider delayed medical emergency response for a served individual. 2. Service Provider did not accurately report the emergency incident details in their reporting. 3. Service Provider lacks the sufficient staffing required. 4. Service Provider is inaccurately reporting staffing levels.	Open	Open			Betsy Monahan HR Director

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7/1/2025	Anonymous/Unknown	DDS 25-063001; 2025-UWB-02	N/A	Service Provider - SLS	Fradulent billing practices; Staff and consumer boundary concerns; Staffing not being provided; Clients Rights Violation	1. Staff has been billing for services that are not provided to consumer and has been using fraudulent documentation (i.e., timesheets). 2. Consumer lives at staff's private residence in Chatsworth 3. Consumer has not been receiving 24-hour supervision or care 4. Staff has been neglecting and mistreating consumer for the past 4 years	1. Deferred to accounting 2. Unsubstantiated 3. Deferred to accounting 4. Unsubstantiated	Plan for Improvement 8/22/2025	8/22/2025 * Reopened 9/19/2025	53	Arshalous Garlanian, Community Services Director
7/9/2025	Community Member	DDS 25-070801; 2025-SPWB-11	N/A	Service Provider - ADC	Client's Rights Violation; Lack of supervision; Health & Safety; Failure to report incidents; Staffing policies and protocals.	1. Individuals served are treated poorly by the program director and staff. Examples include: -Individuals are yelled at, called names, harassed, and verbally and physically abused. -Individuals are excluded from group activities/socializing with other individuals served. - Staff are leaving individuals unattended while using their cellphones and/or when individuals are upset, not ensuring the individuals are safe, and not considering the individuals' wants, needs, and goals. -Individuals are being provoked, potentially resulting in aggressive behaviors. 2. Incidents are ignored by this provider and are not reported. 3. Staff are attempting to have client(s) removed from the program. 4. Staff use their cellphones (i.e., text messaging, video calling) while driving individuals and other staff in the company van. 5. Staff prohibit individuals from making purchases. 6. Staff cover the deficiencies within the program to prevent licensing from observing what is occurring. 7. Staff prevented a client from entering the company van to be taken home (names not provided). 8. Staff are inappropriately holding individuals and mocking them. 9. Staff did not report an incident where an individual had a seizure and fell on the ground. 10. The provider is not using funds towards the clients' activities and is profiting from selling soda to individuals in the program 11. Company vans are dirty, have broken parts, including seat belts, and the provider will not repair the vehicles. 12. Former staff who are prohibited from being near the program have been seen nearby.	1. Unsubstantiated 2. Unsubstantiated 3. Unsubstantiated 4. Unsubstantiated 5. Inconclusive 6. Unsubstantiated 7. Unsubstantiated 8. Unsubstantiated 9. Unsubstantiated 10.Unsubstantiated 11. Substantiated 12.Unsubstantiated	n/a	8/12/2025 **Reopened 8/25/2025	35	Arshalous Garlanian, Community Services Director
8/25/2025	Community Member	DDS 25-070801; 2025-SPWB-11	N/A	Service Provider - ADC	Client's Rights Violation; Lack of supervision; Health & Safety; Failure to report incidents; Staffing policies and protocals.	1. Allegations stated in the anonymous letter occurred. 2. Staff were rude to participants.	1. Unsubstantiated 2. Inconclusive **Additional allegations to complaint DDS 25-070801		9/25/2025	32	Arshalous Garlanian, Community Services Director
7/10/2025	Anonymous/Unknown	2025-UWB-03	N/A	Service Provider - Speclzd Residential	Client's Rights Violation; Failure to report.	Complainant alleges: 1. The house administrator verbally abused resident. 2. The incident was reported to upper management, but no action was taken to address it.	1. The house administrator verbally abused resident. - *Unsubstantiated* 2. The incident was reported to upper management, but no action was taken to address it. - *Unsubstantiated*	Letter Sent	8/25/2025	47	Arshalous Garlanian, Community Services Director
7/18/2025	Anonymous/Unknown	DDS 25-062602; amended to 2025 -EWB - 05	N/A	NLACRC Employee(s)	Fiscal malfeasance; violation of Board/regional center policy	Complainant alleges: 1. The combined contract totals for two I.T. consultants exceeded $600,000 annually in Fiscal Years 2021-22, 2022-23, and 2023-24. However, the contracts were intentionally split to evade review by the NLACRC Board of Trustees (Board). 2. The contracts were presented to the Board for approval without the appropriate parties disclosing the cumulative financial and functional impact, compromising fiduciary responsibility and public trust.	Complainant alleges: 1. The combined contract totals for two I.T. consultants exceeded $600,000 annually in Fiscal Years 2021-22, 2022-23, and 2023-24. However, the contracts were intentionally split to evade review by the NLACRC Board of Trustees (Board). 2. The contracts were presented to the Board for approval without the appropriate parties disclosing the cumulative financial and functional impact, compromising fiduciary responsibility and public trust.	Pending Direction - Submitted Responses to DDS on 8/18/2025 , 09/02/2025, and 09/04/2025			Betsy Monahan, HR Director
7/22/2025	Anonymous/Unknown	DDS 24-110801 re-opened: new information	N/A	NLACRC Employee	Alleged sexual harassment (hostile work environment)	Original complaint alleges: 1. NLACRC Management individual is intimidating, bullying, harassing and sexually harassing NLACRC staff. New allegation: 2. Type 4 Workplace Violence perpertrator allegedly verbally, digitally and physically harassed NLACRC staff member due to improper relationship/association with NLACRC Management individual.	Open	Open			Betsy Monahan, HR Director
9/3/2025	Community Member	2025-SPWB-13	9/3/2025	Service Provider - Residential (915)	Unapproved behavioral restraint; Staff not cleared or associated by CCL; Licensee falsifies personnel records; Lack of supervision due to staff sleeping during NOC shift; Residents needs are not met.	Complainant alleges: 1. Staff chemically restrained a client. 2. Uncleared adults are working at the facility. 3. Licensee falsifies personnel records. 4. Residents are not adequately supervised due to staff sleeping during the overnight shift. 5.Licensee does not ensure that the needs of the residents in care are met.	Open CCL Lead	Open			Venus Rodriguez-Khorasani Community Services Manager
9/10/2025	Service Provider	2025-SPWB-12	9/10/2025	Service Provider - TBD	Alleged Client Safety and Well-being Endangerment - Delayed Response Alleged Inaccurate Incident Reporting Alleged Insufficient Staffing and Inaccurate Staffing Reports	Complainant alleges: 1. Service Provider delayed medical emergency response for a served individual. 2. Service Provider did not accurately report the emergency incident details in their reporting. 3. Service Provider lacks the sufficient staffing required. 4. Service Provider is inaccurately reporting staffing levels.	1. Substantiated 2. Substantiated 3. Substantiated 4. Substantiated	CAP 10/10/2025	10/10/2025	31	Betsy Monahan, HR Director

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NLACRC Whistleblower Complaint Log

Fiscal Year 2024-25

9/19/2025	Anonymous/Unknown	DDS 25-063001; 2025-UWB-02	N/A	Service Provider - SLS	Fraudulent billing practices; Staff and consumer boundary concerns; Staffing not being provided; Clients Rights Violation	1. Staff hired do not actually provide services. Identity is used to fraudulently bill for services that are not provided. 2. Vendor tells parents to request respite services from NLACRC and will bill for services that are not provided. Money is split between staff., parents, and staff. Agency does not provide respite. 3. Staff locks Consumer's refrigerator and restricts access to food. 4. Staff is verbally and physically abusive towards consumer. 5. Staff creates an unsafe/ destructive environment for Consumer. 6. Staff takes control of Consumer's SSI checks and keeps money from him.	1. Deferred to accounting 2. Unsubstantiated 3. Unsubstantiated 4. Unsubstantiated 5. Substantiated 6. Unsubstantiated *Additional allegations to complaint DDS 25-063001	Plan for Improvement 8/22/2025	10/14/2025	26	Arshalous Garlanian, Community Services Director
10/1/2025	Anonymous/Unknown	2025-SPWB-14	N/A	Service Provider - SLS	Failure to adhere to state and federal requirements as a business and non-profit	1. Operating illegally . 2. Suspended by the Department of Justice for failing to file taxes and to complete a required audit of their financial records for several years. 3. The Internal Revenue Service has revoked agency's non-profit status for failing to file their federal taxes for more than three consecutive years.	1. Unsubstantiated 2. Unsubstantiated 3. Unsubstantiated		10/6/2025	6	Arshalous Garlanian, Community Services Director

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ATTACHMENT 1

NLACRC Whistleblower Complaint Log

Time Period: 11/16/2025 -12/15/2025

Date Complaint Received	Complainant Type	Investigation Case No.	Date Acknowledgment Sent to Complainant	Entity That is Target of Complaint	Nature of Complaint	Investigation Allegation Details	Investigation Results	Corrective Action Taken (if applicable)	Date Complaint Closed	Complaint Investigation Duration (in Days)	Submitted/Logged by
7/1/2025	Anonymous/Unknown	DDS 25-063001; 2025-UWB-02	N/A	Service Provider - SLS	Fradulent billing practices; Staff and consumer boundary concerns; Staffing not being provided; Clients Rights Violation	1. Staff has been billing for services that are not provided to consumer and has been using fraudulent documentation (i.e., timesheets). **Deferred to Accounting for Financial Audit** 2. Consumer lives at staff's private residence in Chatsworth - **Unsubstantiated** 3. Consumer has not been receiving 24-hour supervision or care - **Deferred to Accounting for Financial Audit** 4. Staff has been neglecting and mistreating consumer for the past 4 years - **Unsubstantiated**	**1. Deferred to accounting** **2. Unsubstantiated** **3. Deferred to accounting** **4. Unsubstantiated**	Plan for Improvement 8/22/2025	8/22/2025 * Reopened 9/19/2025 10/17/2025	53/59	Arshalous Garlanian, Community Services Director
7/9/2025	Community Member	DDS 25-070801; 2025-SPWB-11	N/A	Service Provider - ADC	Client's Rights Violation; Lack of supervision; Health & Safety; Failure to report incidents; Staffing policies and protocals.	1. Individuals served are treated poorly by the program director and staff. Examples include: -Individuals are yelled at, called names, harassed, and verbally and physically abused. -Individuals are excluded from group activities/socializing with other individuals served. - Staff are leaving individuals unattended while using their cellphones and/or when individuals are upset, not ensuring the individuals are safe, and not considering the individuals' wants, needs, and goals. -Individuals are being provoked, potentially resulting in aggressive behaviors. **Unsubstantiated** 2. Incidents are ignored by this provider and are not reported. **Unsubstantiated** 3. Staff are attempting to have client(s) removed from the program. **Unsubstantiated** 4. Staff use their cellphones (i.e., text messaging, video calling) while driving individuals and other staff in the company van. **Unsubstantiated** 5. Staff prohibit individuals from making purchases. **Inconclusive** 6. Staff cover the deficiencies within the program to prevent licensing from observing what is occurring. **Unsubstantiated** 7. Staff prevented a client from entering the company van to be taken home (names not provided). **Unsubstantiated** 8. Staff are inappropriately holding individuals and mocking them. **Unsubstantiated** 9. Staff did not report an incident where an individual had a seizure and fell on the ground. **Unsubstantiated** 10. The provider is not using funds towards the clients' activities and is profiting from selling soda to individuals in the program. **Unsubstantiated** 11. Company vans are dirty, have broken parts, including seat belts, and the provider will not repair the vehicles. **Substantiated** 12. Former staff who are prohibited from being near the program have been seen nearby. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated** **3. Unsubstantiated** **4. Unsubstantiated** **5. Inconclusive** **6. Unsubstantiated** **7. Unsubstantiated** **8. Unsubstantiated** **9. Unsubstantiated** **10.Unsubstantiated** **11. Substantiated** **12.Unsubstantiated**	n/a	8/12/2025 **Reopened 8/25/2025 10/15/2025	35/61	Arshalous Garlanian, Community Services Director
7/18/2025	Anonymous/Unknown	DDS 25-062602; amended to 2025 -EWB - 05	N/A	NLACRC Employee(s)	Fiscal malfeasance; violation of Board/regional center policy	Complainant alleges: 1. The combined contract totals for two I.T. consultants exceeded $600,000 annually in Fiscal Years 2021-22, 2022-23, and 2023-24. However, the contracts were intentionally split to evade review by the NLACRC Board of Trustees (Board). 2. The contracts were presented to the Board for approval without the appropriate parties disclosing the cumulative financial and functional impact, compromising fiduciary responsibility and public trust.	Complainant alleges: 1. The combined contract totals for two I.T. consultants exceeded $600,000 annually in Fiscal Years 2021-22, 2022-23, and 2023-24. However, the contracts were intentionally split to evade review by the NLACRC Board of Trustees (Board). 2. The contracts were presented to the Board for approval without the appropriate parties disclosing the cumulative financial and functional impact, compromising fiduciary responsibility and public trust.	Pending Direction - Submitted Responses to DDS on 8/18/2025 , 09/02/2025, and 09/04/2025			Betsy Monahan, HR Director
7/22/2025	Anonymous/Unknown	DDS 24-110801 re-opened: new information	N/A	NLACRC Employee	Alleged sexual harassment (hostile work environment)	Original complaint alleges: 1. NLACRC Management individual is intimidating, bullying, harassing and sexually harassing NLACRC staff. New allegation: 2. Type 4 Workplace Violence perpertrator allegedly verbally, digitally and physically harassed NLACRC staff member due to improper relationship/association with NLACRC Management individual.	Open	Open			Betsy Monahan, HR Director
11/4/2025	Client	2025-SPWB-15	11/4/2025	Service Provider	Unprofessional conduct; Client's Rights Violation	1. Vendor Staff went to consumer's residence stating "her supervisor sent her to hand me sixty dollars ($60) in cash". Instead of issuing a proper reimbursement through the vendor's HR/accounting department or via NLACRC, she demanded I sign her notebook as "proof," and insisted on taking photographs of me while I held the cash. 2. On October 24, consumer observed the same woman taking photographs of her building without notice or consent. 3. Vendor Staff has repeatedly called consumer and coordinated others to pressure consumer to continue services, despite clear, repeated requests to terminate services with with the vendor and to stop contacting consumer.	**Open** **OOA Vendor** **Referred to vendoring center** **Joint investigation**	Open		41	Arshalous Garlanian, Community Services Director

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10/31/2025 11/5/2025	Anonymous/Unknown	2025-SPWB-16	N/A	Service Provider	Retaliation against staff; Failure to report; Failure to provide proper medical care.	1. Employees who report suspected client abuse, neglect, or other serious incidents are being terminated shortly after making those reports. **Unsubstantiated** 2. Failure to report and concealment of abuse. In some cases, employees were instructed not to document or even alter the documentation. **Unsubtantiated** 3. Licensed staff, leads, and administrator failed to provide or seek medical care to the individuals. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated** **3. Unsubstantiated**		12/12/2025	45	Arshalous Garlanian, Community Services Director
11/10/2025	Family Member	2025-BDWB-17	N/A	NLACRC	Ongoing issues with services and access to required planning documents.	1. Denial of access to consumer IPP 2. Pattern of Retaliatory Denial of Social-Recreation Services	**Open. Referred to Board Legal Counsel for response and investigation**	Open			Sheila King, HR Manager
12/11/2025	Community Member	2025-SPWB-18	N/A	Service Provider	Unprofessional conduct; Fraudlent billing (cross reported from another RC)	1. Staff providing direct services not being paid. 2. Staff does not have clearance. 3.Fraudulent billing		Open		4	

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	Time Period:	12/16/2025 -01/15/2026									
Date Complaint Received	Complainant Type	Investigation Case No.	Date Acknowledgment Sent to Complainant	Entity That is Target of Complaint	Nature of Complaint	Investigation Allegation Details	Investigation Results	Corrective Action Taken (if applicable)	Date Complaint Closed	Complaint Investigation Duration (in Days)	Submitted/Logged by
7/18/2025	Anonymous/Unknown	DDS 25-062602; amended to 2025 - EWB - 05	N/A	NLACRC Employee(s)	Fiscal malfeasance; violation of Board/regional center policy	Complainant alleges: 1. The combined contract totals for two I.T. consultants exceeded $600,000 annually in Fiscal Years 2021-22, 2022-23, and 2023-24. However, the contracts were intentionally split to evade review by the NLACRC Board of Trustees (Board). 2. The contracts were presented to the Board for approval without the appropriate parties disclosing the cumulative financial and functional impact, compromising fiduciary responsibility and public trust.	Complainant alleges: 1. The combined contract totals for two I.T. consultants exceeded $600,000 annually in Fiscal Years 2021-22, 2022-23, and 2023-24. However, the contracts were intentionally split to evade review by the NLACRC Board of Trustees (Board). 2. The contracts were presented to the Board for approval without the appropriate parties disclosing the cumulative financial and functional impact, compromising fiduciary responsibility and public trust.	Pending Direction - Submitted Responses to DDS on 8/18/2025 , 09/02/2025, and 09/04/2025		182	Betsy Monahan, HR Director
7/22/2025	Anonymous/Unknown	DDS 24-110801 re-opened: new information	N/A	NLACRC Employee	Alleged sexual harassment (hostile work environment)	Original complaint alleges: 1. NLACRC Management individual is intimidating, bullying, harassing and sexually harassing NLACRC staff. New allegation: 2. Type 4 Workplace Violence perpertrator allegedly verbally, digitally and physically harassed NLACRC staff member due to improper relationship/association with NLACRC Management individual.	Open			178	Betsy Monahan, HR Director
11/4/2025	Client	2025-SPWB-15	11/4/2025	Service Provider	Unprofessional conduct; Client's Rights Violation	1. Vendor Staff went to consumer's residence stating "her supervisor sent her to hand me sixty dollars ($60) in cash". Instead of issuing a proper reimbursement through the vendor's HR/accounting department or via NLACRC, she demanded I sign her notebook as "proof," and insisted on taking photographs of me while I held the cash. 2. On October 24, consumer observed the same woman taking photographs of her building without notice or consent. 3. Vendor Staff has repeatedly called consumer and coordinated others to pressure consumer to continue services, despite clear, repeated requests to terminate services with with the vendor and to stop contacting consumer.	**Open** **OOA Vendor** **Referred to vendoring center** **Joint investigation**			73	Arshalous Garlanian, Community Services Director
11/10/2025	Family Member	2025-BDWB-17	N/A	NLACRC	Ongoing issues with services and access to required planning documents.	1. Denial of access to consumer IPP 2. Pattern of Retaliatory Denial of Social-Recreation Services	**Open. Referred to Board Legal Counsel for response and investigation**			67	Sheila King, HR Manager
12/11/2025	Community Member	2025-SPWB-18	N/A	Service Provider	Unprofessional conduct; Fraudlent billing (cross reported from another RC)	1. Staff providing direct services not being paid. 2. Staff does not have clearance. 3.Fraudulent billing	**OPEN**			36	Arshalous Garlanian, Community Services Director
12/17/2025	Community Member	2025-SPWB-19	N/A	Service Provider	Financial abuse/exploitation; neglect; possible retaliatory behavior.	1. Staff have had long-term unauthorized access to her bank accounts. Reports of missing funds and unexplained negative balances. 2. Consumer passwords are repeatedly changed without her consent. 3. Consumer felt manipulated and pressured by staff.	**OPEN**			30	Arshalous Garlanian, Community Services Director
1/2/2026	Community Member	2026-SPWB-20	1/2/2026	Service Provider	Unprofessional Conduct; Fraudulent Billing	1. DDS received additional information from WB alleging two additional individuals were aware of fraudulent practices that were previously looked into and addressed in a WB complaint received on 9/19/25	**1. Inconclusive**	Closed	1/13/2026	11	Arshalous Garlanian, Community Services Director
1/4/2026	NLACRC Employee	2026-EWB-21	1/8/2026	NLACRC	Leadership/Governance practices	1. Leadership Conduct. 2. Governance Practices. 3. Conflicts of Interest and Operational Integrity.	**Open. Referred to Board Legal Counsel for response and investigation**			12	Sheila King, HR Manager
1/5/2026	Community Member	2026-SPWB-22	N/A	Service Provider	Consumer rights and financial exploitation.	1. Interference with mail: a. CSC instructed vendor to "withhold her SSI check..."; b. Vendor withheld mail from resident. 2. Professional boundaries and oversight concerns.	**1a. Unsubstantiated** **1b. Unsubstantiated** **2. Outside of CS Scope, Referred to CM**	Closed	1/13/2026	8	Arshalous Garlanian, Community Services Director
1/5/2026	Community Member	2026-SPWB-23	N/A	Service Provider	Unprofessional Conduct; Staff did not meet job requirements.	1. Vendor did not provide adequate level of support. 2. Staff were not LVN certified	**OPEN**			11	Arshalous Garlanian, Community Services Director
1/5/2026	Community Member	2026-SPWB-24	N/A	Service Provider	Violations of consumer due process rights, unlawful service termination, vendor retaliation, Failure of regional center oversight.	1. Consumer was not provided with a proper written 30-day notice as required by Title 17.	**OPEN**			11	Arshalous Garlanian, Community Services Director
1/5/2026	Community Member	2026-SPWB-25	1/6/2026	Service Provider	Clients Rights Violation	1. Staff not treating resident with respect. 2. Home staff appeared to make resident uncomfortable.	**OPEN**			11	Arshalous Garlanian, Community Services Director
1/5/2026	Community Member	2026-SPWB-26	N/A	Service Provider	Unlawful service termination; denial of due process; failure to provide 30-day notice; consumer retaliation from vendor.	1. Consumer was removed from day program without a clear explanation of reason for termination. 2. Vendor failed to provide transparency and accountability despite having received multiple requests as to the nature of his termination. 3. Consumer alleges he was treated differently after an incident involving himself and another consumer.	**OPEN**			11	Arshalous Garlanian, Community Services Director

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1/7/2026	Community Member	2026-SPWB-27	N/A	Service Provider	Suspected healthcare fraud; falsification of service records' and potential financial exploitation	1. Billing for services not rendered while consumer was out of town. 2. Falsification of documents.	**OPEN**			9	Arshalous Garlanian, Community Services Director
1/7/2026	Community Member	2026-SPWB-28	1/7/2026	Service Provider	Health and safety risks; suspected neglect, fraud, and financial exploitation.	1. SLS worker failed to provide required support, including meal preparation. 2. Consumer has fallen out of her chair while staff are outside in their car. 3. SLS worker hired an individual to work with staff, individual was not authorized to provide support. Potential HIPPA violation. 4. Consumer is threatened by staff to not say anything due to potential threats of losing services. 5. Program owners are aware of these issues but have not addressed them.	**OPEN**			9	Arshalous Garlanian, Community Services Director
1/7/2026	Community Member	2026-SPWB-29	1/7/2026	Service Provider	Health and safety risks; allegations of abuse and neglect.	1. Staff member allegedly sexually abused and harassed residents and staff members at their home. 2. Staff member was observed to have gone into a consumers room and the consumer was heard screaming and yelling to stop. 3. Staff 2 hit resident in the head. 4. Residents are not fed properly causing a resident to develop diabetes. 5. Staff are instructed to pay for resident food and hygiene materials out of pocket.	**1. Unsubstantiated** **2. Unsubstantiated** **3. Unsubstantiated** **4. Unsubstantiated** **5. Unsubstantiated**	Closed	1/13/2026	7	Arshalous Garlanian, Community Services Director
1/8/2026	Community Member	2026-SPWB-30	N/A	Service Provider	Wage and labor violations	1. Staff did not receive training stipend for completing DSP training.	**OPEN**			8	Arshalous Garlanian, Community Services Director
1/9/2026	Community Member	2026-SPWB-31	N/A	Service Provider	Suspected neglect; timecard fraud.	1. Job Coach left consumer unattended during work hours. Job Coach reportedly left work early on multiple occasions and was observed sitting in their car instead of providing on-site support.	**OPEN**			7	Arshalous Garlanian, Community Services Director
1/9/2026	Community Member	2026-SPWB-32	1/9/2026	Service Provider	Health and safety risks; suspected abuse, neglect, and rights violations; Staff misconduct.	1. An incident occurred (date not provided) in which staff forcibly removed a protective glove for an open wound on the hand of a resident causing bleeding. It was reported to management, but no action was taken, and no incident report was filed. 2. Management is prohibiting resident from using her personal phone or the house phone to call her father. 3. Staff members (including but limited to a staff) routinely smoke marijuana on their break and come in after laughing, smelling like marijuana, and work with residents while under the influence. 4. Staff (potentially staff) bring family members into the home to cook food for the residents and themselves against home policies/requirements. Resident has reportedly stated that this makes her uncomfortable which may be leading to behavioral escalations.	**1. Unsubstantiated** **2. Unsubstantiated** **3. Unsubstantiated** **4. Substantiated**	Closed	1/13/2026	5	Arshalous Garlanian, Community Services Director
1/9/2026	Community Member	2026-SPWB-33	1/9/2026	Service Provider	Services not rendered; health and safety; time fraud; Lack of clearance.	1. Staff clocks in and documents overtime but does not show up to work, sits outside the home in her car, or does not support client. as required (e.g., not cooking meals). On numerous occasions, resident has fallen out of her chair while staff is outside in her car. 2. SLS staff hired a woman to support client. but this individual is not authorized to work and has not been fingerprinted. Client does not say anything because staff buys her things she wants (e.g., amazon purchases). Staff also threatens client by stating she won't receive help if she fires her. 3. The program owners, are aware of these issues but do not address them.	**OPEN**			7	Arshalous Garlanian, Community Services Director
1/13/2026	Community Member	2026-SPWB-34	1/23/2026	Service Provider	Client Rights	1. Resident was being accused of spitting on staff. Staff members in a harsh tone/raised voice to go to their room. When resident did not go to their room, staff collided with resident., pushing him. This resulted in resident feeling distressed and stating out loud, "call cops, go to cops, go to hospital". Resident was hitting and slamming his hands into the windows and staff members were laughing at him. 2. Supervisor is aware of staff behaviors and does not act; instead, she responds by saying how and resident have known each other for a while.	**OPEN**			3	Arshalous Garlanian, Community Services Director
1/13/2026	Community Member	2026-SPWB-35	1/13/2026	Service Provider	Client Rights	1. Alleged that home staff and/or NLACRC staff may be withholding resident's SSI check.	**OPEN**			3	Arshalous Garlanian, Community Services Director

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7/22/2025	Anonymous/Unknown	DDS 24-110801 re-opened: new information	N/A	NLACRC Employee	Alleged sexual harassment (hostile work environment)	Original complaint alleges: 1. NLACRC Management individual is intimidating, bullying, harassing and sexually harassing NLACRC staff. New allegation: 2. Type 4 Workplace Violence perpertrator allegedly verbally, digitally and physically harassed NLACRC staff	Open			178	Betsy Monahan, HR Director
11/4/2025	Client	2025-SPWB-15	11/4/2025	Service Provider	Unprofessional conduct; Client's Rights Violation	1. Vendor Staff went to consumer's residence stating "her supervisor sent her to hand me sixty dollars ($60) in cash". Instead of issuing a proper reimbursement through the vendor's HR/accounting department or via NLACRC, she demanded I sign her notebook as "proof," and insisted on taking photographs of me while I held the cash. **Unsubstantiated** 2. On October 24, consumer observed the same woman taking photographs of her building without notice or consent. **Unsubstantiated** 3. Vendor Staff has repeatedly called consumer and coordinated others to pressure consumer to continue services, despite clear, repeated requests to terminate services with the vendor and to stop contacting consumer. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated** **3. Unsubstantiated**	CLOSED	1/29/2026	73	Arshalous Garlanian, Community Services Director
11/10/2025	Family Member	2025-BDWB-17	N/A	NLACRC	Ongoing issues with services and access to required planning documents.	1. Denial of access to consumer IPP 2. Pattern of Retaliatory Denial of Social-Recreation Services	**Open. Referred to Board Legal Counsel for response and investigation**			94	Sheila King, HR Manager
12/11/2025	Community Member	2025-SPWB-18	N/A	Service Provider	Unprofessional conduct; Fraudlent billing (cross reported from another RC)	1. Staff providing direct services not being paid. **Substantiated** 2. Staff does not have clearance. **Substantiated** 3.Fraudulent billing. **Substantiated**	**1. Substantiated** **2. Substantiated** **3. Substantiated**	2/12/2026	2/12/2026	62	Arshalous Garlanian, Community Services Director
12/17/2025	Community Member	2025-SPWB-19	N/A	Service Provider	Financial abuse/exploitation; neglect; possible retaliatory behavior.	1. Staff have had long-term unauthorized access to her bank accounts. Reports of missing funds and unexplained negative balances. 2. Consumer passwords are repeatedly changed without her consent. 3. Consumer felt manipulated and pressured by staff.	**OPEN**	Open		56	Arshalous Garlanian, Community Services Director
1/4/2026	NLACRC Employee	2026-EWB-21	1/8/2026	NLACRC	Leadership/Governance practices	1. Leadership Conduct. 2. Governance Practices. 3. Conflicts of Interest and Operational Integrity.	**Open. Referred to Board Legal Counsel for response and investigation**	Open		38	Sheila King, HR Manager
1/5/2026	Community Member	2026-SPWB-22	N/A	Service Provider	Consumer rights and financial exploitation.	1. Interference with mail: a. CSC instructed vendor to "withhold her SSI check..."; b. Vendor withheld mail from resident. 2. Professional boundaries and oversight concerns.	**1a. Unsubstantiated** **1b. Unsubstantiated** **2. Outside of CS Scope, Referred to CM**	Closed	1/13/2026	8	Arshalous Garlanian, Community Services Director
1/5/2026	Community Member	2026-SPWB-23	N/A	Service Provider	Unprofessional Conduct; Staff did not meet job requirements.	1. Vendor did not provide adequate level of support. **Unsubstantiated** 2. Staff were not LVN certified. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated**	CLOSED	1/21/2026	16	Arshalous Garlanian, Community Services Director
1/5/2026	Community Member	2026-SPWB-24	N/A	Service Provider	Violations of consumer due process rights, unlawful service termination, vendor retaliation, Failure of regional center oversight.	1. Consumer was not provided with a proper written 30-day notice as required by Title 17.	**OPEN**			37	Arshalous Garlanian, Community Services Director
1/5/2026	Community Member	2026-SPWB-25	1/6/2026	Service Provider	Clients Rights Violation	1. Staff not treating resident with respect. **Unsubstantiated** 2. Home staff appeared to make resident uncomfortable. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated**	CLOSED	2/3/2026	30	Arshalous Garlanian, Community Services Director
1/5/2026	Community Member	2026-SPWB-26	N/A	Service Provider	Unlawful service termination; denial of due process; failure to provide 30-day notice; consumer retaliation from vendor.	1. Consumer was removed from day program without a clear explanation of reason for termination. 2. Vendor failed to provide transparency and accountability despite having received multiple requests as to the nature of his termination. 3. Consumer alleges he was treated differently after an incident involving himself and another consumer.	**OPEN**	OPEN		37	Arshalous Garlanian, Community Services Director
1/7/2026	Community Member	2026-SPWB-27	N/A	Service Provider	Suspected healthcare fraud; falsification of service records' and potential financial exploitation	1. Billing for services not rendered while consumer was out of town. **Substantiated** 2. Falsification of documents. **Substantiated**	**1. Substantiated** **2. Substantiated**	TBD		35	Arshalous Garlanian, Community Services Director
1/7/2026	Community Member	2026-SPWB-28	1/7/2026	Service Provider	Health and safety risks; suspected neglect, fraud, and financial exploitation.	1. SLS worker failed to provide required support, including meal preparation. **Unsubstantiated** 2. Consumer has fallen out of her chair while staff are outside in their car. **Unsubstantiated** 3. SLS worker hired an individual to work with staff, individual was not authorized to provide support. Potential HIPPA violation. **Unsubstantiated** 4. Consumer is threatened by staff to not say anything due to potential threats of losing services. **Unsubstantiated** 5. Program owners are aware of these issues but have not addressed them. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated** **3. Unsubstantiated** **4. Unsubstantiated**	N/A	2/5/2026	30	Arshalous Garlanian, Community Services Director
1/7/2026	Community Member	2026-SPWB-29	1/7/2026	Service Provider	Health and safety risks; allegations of abuse and neglect.	1. Staff member allegedly sexually abused and harassed residents and staff members at their home. 2. Staff member was observed to have gone into a consumers room and the consumer was heard screaming and yelling to stop. 3. Staff 2 hit resident in the head. 4. Residents are not fed properly causing a resident to develop diabetes. 5. Staff are instructed to pay for resident food and hygiene materials out of pocket.	**1. Unsubstantiated** **2. Unsubstantiated** **3. Unsubstantiated** **4. Unsubstantiated** **5. Unsubstantiated**	Closed	1/13/2026	7	Arshalous Garlanian, Community Services Director
1/8/2026	Community Member	2026-SPWB-30	N/A	Service Provider	Wage and labor violations	1. Staff did not receive training stipend for completing DSP training. **Unsubstantiated**	**1. Unsubstantiated**	CLOSED	2/6/2026	29	Arshalous Garlanian, Community Services Director
1/9/2026	Community Member	2026-SPWB-31	N/A	Service Provider	Suspected neglect; timecard fraud.	1. Job Coach left consumer unattended during work hours. Job Coach reportedly left work early on multiple occasions and was observed sitting in their car instead of providing on-site support.	**OPEN**	OPEN		33	Arshalous Garlanian, Community Services Director

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ATTACHMENT 1

1/9/2026	Community Member	2026-SPWB-32	1/9/2026	Service Provider	Health and safety risks; suspected abuse, neglect, and rights violations; Staff misconduct.	1. An incident occurred (date not provided) in which staff forcibly removed a protective glove for an open wound on the hand of a resident causing bleeding. It was reported to management, but no action was taken, and no incident report was filed. **Unsubstantiated** 2. Management is prohibiting resident from using her personal phone or the house phone to call her father. **Unsubstantiated** 3. Staff members (including but limited to a staff) routinely smoke marijuana on their break and come in after laughing, smelling like marijuana, and work with residents while under the influence. **Unsubstantiated** 4. Staff (potentially staff) bring family members into the home to cook food for the residents and themselves against home policies/requirements. Resident has reportedly stated that this makes her uncomfortable which may be leading to behavioral escalations. **Substantiated**	**1. Unsubstantiated** **2. Unsubstantiated** **3. Unsubstantiated** **4. Substantiated**	Closed	1/13/2026	5	Arshalous Garlanian, Community Services Director
1/9/2026	Community Member	2026-SPWB-33	1/9/2026	Service Provider	Services not rendered; health and safety; time fraud; Lack of clearance.	1. Staff clocks in and documents overtime but does not show up to work, sits outside the home in her car, or does not support client. as required (e.g., not cooking meals). **Unsubstantiated** On numerous occasions, resident has fallen out of her chair while staff is outside in her car.**Unsubstantiated** 2. SLS staff hired a woman to support client. but this individual is not authorized to work and has not been fingerprinted. **Unsubstantiated** Client does not say anything because staff buys her things she wants (e.g., amazon purchases). Staff also threatens client by stating she won't receive help if she fires her. **Unsubstantiated** 3. The program owners, are aware of these issues but do not address them. **Unsubstantiated**	**1a. Unsubstantiated** **1b. Unsubstantiated** **2a. Unsubstantiated** **2b. Unsubstantiated** **3. Unsubstantiated**	CLOSED	2/5/2026	28	Arshalous Garlanian, Community Services Director
1/13/2026	Community Member	2026-SPWB-34	1/23/2026	Service Provider	Client Rights	1. Resident was being accused of spitting on staff. Staff members in a harsh tone/raised voice to go to their room. When resident did not go to their room, staff collided with resident., pushing him. This resulted in resident feeling distressed and stating out loud, "call cops, go to cops, go to hospital". Resident was hitting and slamming his hands into the windows and staff members were laughing at him. **Unsubstantiated** 2. Supervisor is aware of staff behaviors and does not act; instead, she responds by saying how and resident have known each other for a while. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated**	CLOSED	2/3/2026	21	Arshalous Garlanian, Community Services Director
1/13/2026	Community Member	2026-SPWB-35	1/13/2026	Service Provider	Client Rights	1. Alleged that home staff and/or NLACRC staff may be withholding resident's SSI check.	**OPEN**			29	Arshalous Garlanian, Community Services Director
1/21/2026	Community Member	DDS 26-010501 - 2026-SPWB-37	N/A	Service Provider	Clients Rights Violation	1. Resident was witnessed being abused, punched, and kicked by staff members. **Unsubstantiated** 2. Multiple instances of abuse may have occurred as recently as January 20, 2026. Staff names were not provided. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated**	CLOSED	1/22/2026	1	Arshalous Garlanian, Community Services Director
1/21/2026	Community Member	2026-SPWB-38	N/A	Service Provider	Medication Mismanagement; Unmet resident needs	1. In December (no dates provided) and January (on or around January 6 or January 7), there have been issues involving missing medications for three different residents (names not disclosed). Staff notified the home administrator and the home founder of the issues. The home administrator reportedly stated that he would handle it; however, no action was taken. **Substantiated** 2. It was also reported that a resident (name not disclosed) needs a longer bed due to leg pain, but no changes were immediately made. Last week, the administrator replaced the resident's box spring with a piece of plywood and three long boards hammered together. **Substantiated**	**1. Substantiated** **2. Substantiated**	CLOSED	1/29/2025	8	Arshalous Garlanian, Community Services Director
1/26/2026	Community Member	2026-SPWB-39	N/A	Service Provider	Client Rights	1. Consumer's mother is enabling harm and creating a dangerous environment for this individual. **Unsubstantiated** 2. Consumer's mother has a personal relationship with a caretaker from SLS agency who allegedly abused and pulled a gun on consumer. **Unsubstantiated** 3. The caretaker was reportedly fired in November because of this abuse **Unsubstantiated**; although, it's unclear if this individual is still around Consumer. **Inconclusive**	**1. Unsubstantiated** **2. Unsubstantiated** **3a. Unsubstantiated** **3b. Inconclusive**	OPEN		16	Arshalous Garlanian, Community Services Director
1/29/2026	Community Member	2026-SPWP-40	N/A	Service Provider	Staff not trained; Failure to maintain vehicles: Unprofessional	1. Staff not certified to train. 2. Vehicles not maintained. 3. Unprofessional staff	**OPEN**	OPEN		13	Arshalous Garlanian, Community Services Director
2/6/2026	Anonymous/Unknown	2026-EWB-36	2/6/2026	NLACRC Employee	Inappropriate Work Conduct	1. Inappropriate workplace conduct . 2. Making inappropriate and/or sexually explicit comments. 3. Repeated aggressive behavior. 4. Persistent and unwelcome flirting. 5. Inappropriate attire .	**OPEN**	OPEN		5	Sheila King, HR Manager

	Time Period:	02/16/2026 -03/15/2026									
Date Complaint Received	**Complainant Type**	**Investigation Case No.**	**Date Acknowledgment Sent to Complainant**	**Entity That is Target of Complaint**	**Nature of Complaint**	**Investigation Allegation Details**	**Investigation Results**	**Corrective Action Taken (if applicable)**	**Date Complaint Closed**	**Complaint Investigation Duration (in Days)**	**Submitted/Logged by**
7/18/2025	Anonymous/Unknown	DDS 25-062602; amended to 2025 -EWB - 05	N/A	NLACRC Employee(s)	Fiscal malfeasance; violation of Board/regional center policy	Complainant alleges: 1. The combined contract totals for two I.T. consultants exceeded $600,000 annually in Fiscal Years 2021-22, 2022-23, and 2023-24. However, the contracts were intentionally split to evade review by the NLACRC Board of Trustees (Board). 2. The contracts were presented to the Board for approval without the appropriate parties disclosing the cumulative financial and functional impact, compromising fiduciary responsibility and public trust.	Complainant alleges: 1. The combined contract totals for two I.T. consultants exceeded $600,000 annually in Fiscal Years 2021-22, 2022-23, and 2023-24. However, the contracts were intentionally split to evade review by the NLACRC Board of Trustees (Board). 2. The contracts were presented to the Board for approval without the appropriate parties disclosing the cumulative financial and functional impact, compromising fiduciary responsibility and public trust.	Pending Direction - Submitted Responses to DDS on 8/18/2025 , 09/02/2025, and 09/04/2025		240	Betsy Monahan, HR Director
7/22/2025	Anonymous/Unknown	DDS 24-110801 re-opened: new information	N/A	NLACRC Employee	Alleged sexual harassment (hostile work environment)	Original complaint alleges: 1. NLACRC Management individual is intimidating, bullying, harassing and sexually harassing NLACRC staff. New allegation: 2. Type 4 Workplace Violence perpertrator allegedly verbally, digitally and physically harassed NLACRC staff [illegible]	**Open**	**Open**		246	Betsy Monahan, HR Director
11/10/2025	Family Member	2025-BDWB-17	N/A	NLACRC	Ongoing issues with services and access to required planning documents.	1. Denial of access to consumer IPP 2. Pattern of Retaliatory Denial of Social-Recreation Services	**Open. Referred to Board Legal Counsel for response and investigatio**			125	Sheila King, HR Manager
12/17/2025	Community Member	2025-SPWB-19	N/A	Service Provider	Financial abuse/exploitation; neglect; possible retaliatory behavior.	1. Staff have had long-term unauthorized access to her bank accounts. Reports of missing funds and unexplained negative balances. 2. Consumer passwords are repeatedly changed without her consent. 3. Consumer felt manipulated and pressured by staff.	**OPEN**	Open		88	Arshalous Garlanian, Community Services Director
1/4/2026	NLACRC Employee	2026-EWB-21	1/8/2026	NLACRC	Leadership/Governance practices	1. Leadership Conduct. 2. Governance Practices. 3. Conflicts of Interest and Operational Integrity.	**Open. Referred to Board Legal Counsel for response and investigatio**	Open		70	Sheila King, HR Manager
1/5/2026	Community Member	2026-SPWB-24	N/A	Service Provider	Violations of consumer due process rights, unlawful service termination, vendor retaliation, Failure of regional center oversight.	1. Consumer was not provided with a proper written 30-day notice as required by Title 17.	**OPEN**			69	Arshalous Garlanian, Community Services Director
1/5/2026	Community Member	2026-SPWB-26	N/A	Service Provider	Unlawful service termination; denial of due process; failure to provide 30-day notice; consumer retaliation from vendor.	1. Consumer was removed from day program without a clear explanation of reason for termination. 2. Vendor failed to provide transparency and accountability despite having received multiple requests as to the nature of his termination. 3. Consumer alleges he was treated differently after an incident involving himself and another consumer.	**OPEN**	OPEN		69	Arshalous Garlanian, Community Services Director
1/7/2026	Community Member	2026-SPWB-27	N/A	Service Provider	Suspected healthcare fraud; falsification of service records' and potential financial exploitation	1. Billing for services not rendered while consumer was out of town. **Substantiated** 2. Falsification of documents. **Substantiated**	**1. Substantiated** **2. Substantiated**	**CLOSED**	3/12/2026	64	Arshalous Garlanian, Community Services Director
1/7/2026	Community Member	2026-SPWB-28	1/7/2026	Service Provider	Health and safety risks; suspected neglect, fraud, and financial exploitation.	1. SLS worker failed to provide required support, including meal preparation. **Unsubstantiated** 2. Consumer has fallen out of her chair while staff are outside in their car. **Unsubstantiated** 3. SLS worker hired an individual to work with staff, individual was not authorized to provide support. Potential HIPPA violation. ~~**Unsubstantiated**~~ **Substantiated** 4. Consumer is threatened by staff to not say anything due to potential threats of losing services. **Unsubstantiated** 5. Program owners are aware of these issues but have not addressed them. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated** **3. ~~Unsubstantiated~~ Substantiated** **4. Unsubstantiated**	3/4/2026	2/5/2026; reopened 2/12/26	67	Arshalous Garlanian, Community Services Director
1/9/2026	Community Member	2026-SPWB-31	N/A	Service Provider	Suspected neglect; timecard fraud.	1. Job Coach left consumer unattended during work hours. Job Coach reportedly left work early on multiple occasions and was observed sitting in their car instead of providing on-site support.	**OPEN**	OPEN		65	Arshalous Garlanian, Community Services Director
1/9/2026	Community Member	2026-SPWB-33	1/9/2026	Service Provider	Services not rendered; health and safety; time fraud; Lack of clearance.	1. Staff clocks in and documents overtime but does not show up to work, sits outside the home in her car, or does not support client. as required (e.g., not cooking meals). **Unsubstantiated** On numerous occasions, resident has fallen out of her chair while staff is outside in her car.**Unsubstantiated** 2. SLS staff hired a woman to support client. but this individual is not authorized to work and has not been fingerprinted. ~~**Unsubstantiated**~~ **Substantiated** Client does not say anything because staff buys her things she wants (e.g., amazon purchases). Staff also threatens client by stating she won't receive help if she fires her. **Unsubstantiated** 3. The program owners, are aware of these issues but do not address them. **Unsubstantiated**	**1a. Unsubstantiated** **1b. Unsubstantiated** **2a. ~~Unsubstantiated~~ Substantiated** **2b. Unsubstantiated** **3. Unsubstantiated**	3/4/2026	2/5/2026; reopened 2/12/26	67	Arshalous Garlanian, Community Services Director
1/11/2026	Community Member	2026-SPWP-41		Service Provider	Excessive Fees	1. Excessive Fees for Social Recreation Activities 2. Lack of itimized breakdown for fees	**OPEN**			63	Arshalous Garlanian, Community Services Director
1/13/2026	Community Member	2026-SPWB-35	1/13/2026	Service Provider	Client Rights	1. Alleged that home staff and/or NLACRC staff may be withholding resident's SSI check.	**OPEN**			61	Arshalous Garlanian, Community Services Director
1/26/2026	Community Member	2026-SPWB-39	N/A	Service Provider	Client Rights	1. Consumer's mother is enabling harm and creating a dangerous environment for this individual. **Unsubstantiated** 2. Consumer's mother has a personal relationship with a caretaker from SLS agency who allegedly abused and pulled a gun on consumer. **Unsubstantiated** 3. The caretaker was reportedly fired in November because of this abuse **Unsubstantiated**; although, it's unclear if this individual is still around Consumer. **Inconclusive**	**1. Unsubstantiated** **2. Unsubstantiated** **3a. Unsubstantiated** **3b. Inconclusive**	**CLOSED**	3/10/2026	16	Arshalous Garlanian, Community Services Director
1/29/2026	Community Member	2026-SPWP-40	N/A	Service Provider	Staff not trained; Failure to maintain vehicles: Unprofessional	1. Staff not certified to train. 2. Vehicles not maintained. 3. Unprofessional staff	**OPEN**	OPEN		45	Arshalous Garlanian, Community Services Director
2/6/2026	Anonymous/Unknown	2026-EWB-36	2/6/2026	NLACRC Employee	Inappropriate Work Conduct	1. Inappropriate workplace conduct . **Substantiated** 2. Making inappropriate and/or sexually explicit comments. **Unsubstantiated** 3. Repeated aggressive behavior. **Unsubstantiated** 4. Persistent and unwelcome flirting. **Unsubstantiated** 5. Inappropriate attire .**Substantiated**	1. **Substantiated** 2. **Unsubstantiated** 3. **Unsubstantiated** 4. **Unsubstantiated** 5. **Substantiated**	**CLOSED**	2/22/2026	21	Sheila King, HR Manager
2/17/2026	Community Member	2026-SPWB-42	2/24/2026	Service Provider	Retaliatory Termination of Employment	1. Assault Incidents doe to Behaviorial Plan not consistently followed 2. Staff Burnout and Supervision Concerns 3. Failure of 2:1 Supervision Ratios 4. Lack of Follow up to reported concerns 5. Driver Availability Concerns	**OPEN**	OPEN		26	Arshalous Garlanian, Community Services Director

Annual Reporting of FY25-26 Whistleblower Complaints

NLACRC Whistleblower Complaint Log

ATTACHMENT 1

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Fiscal Year 2025-26

	Time Period:	03/16/2025 -04/15/2026										
Date Complaint Received	**Complainant Type**	**Investigation Case No.**	**Date Acknowledgment Sent to Complainant**	**Entity That is Target of Complaint**	**Nature of Complaint**	**Investigation Allegation Details**	**Investigation Results**	**Corrective Action Taken (if applicable)**	**Date Complaint Closed**	**Complaint Investigation Duration (in Days)**	**Submitted/Logged by**	
7/18/2025	Anonymous/Unknown	DDS 25-062602; amended to 2025 -EWB - 05	N/A	NLACRC Employee(s)	Fiscal malfeasance; violation of Board/regional center policy	Complainant alleges: 1. The combined contract totals for two I.T. consultants exceeded $600,000 annually in Fiscal Years 2021-22, 2022-23, and 2023-24. However, the contracts were intentionally split to evade review by the NLACRC Board of Trustees (Board). 2. The contracts were presented to the Board for approval without the appropriate parties disclosing the cumulative financial and functional impact, compromising fiduciary responsibility and public trust.	Complainant alleges: 1. The combined contract totals for two I.T. consultants exceeded $600,000 annually in Fiscal Years 2021-22, 2022-23, and 2023-24. However, the contracts were intentionally split to evade review by the NLACRC Board of Trustees (Board). 2. The contracts were presented to the Board for approval without the appropriate parties disclosing the cumulative financial and functional impact, compromising fiduciary responsibility and public trust.	Pending Direction - Submitted Responses to DDS on 8/18/2025 , 09/02/2025, and 09/04/2025		271	Betsy Monahan, HR Director	
7/22/2025	Anonymous/Unknown	DDS 24-110801 re-opened: new information	N/A	NLACRC Employee	Alleged sexual harassment (hostile work environment)	Original complaint alleges: 1. NLACRC Management individual is intimidating, bullying, harassing and sexually harassing NLACRC staff. New allegation: 2. Type 4 Workplace Violence perpertrator allegedly verbally, digitally and physically harassed NLACRC staff member due to improper relationship/association with NLACRC Management individual	**Open**	**Open**		267	Betsy Monahan, HR Director	
11/10/2025	Family Member	2025-BDWB-17	N/A	NLACRC	Ongoing issues with services and access to required planning documents.	1. Denial of access to consumer IPP 2. Pattern of Retaliatory Denial of Social-Recreation Services	**Open. Referred to Board Legal Counsel for response and investigati**			156	Sheila King, HR Manager	
12/17/2025	Community Member	2025-SPWB-19	N/A	Service Provider	Financial abuse/exploitation; neglect; possible retaliatory behavior.	1. Staff have had long-term unauthorized access to her bank accounts. Reports of missing funds and unexplained negative balances. **Unsubstantiated** 2. Consumer passwords are repeatedly changed without her consent. **Unsubstantiated** 3. consumer felt manipulated and pressured by staff. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated** **3. Unsubstantiated**	CLOSED	4/8/2026	112	Arshalous Garlanian, Community Services Director	
1/4/2026	NLACRC Employee	2026-EWB-21	1/8/2026	NLACRC	Leadership/Governance practices	1. Leadership Conduct. 2. Governance Practices. 3. Conflicts of Interest and Operational Integrity.	**Open. Referred to Board Legal Counsel for response and investigati**	Open		94	Sheila King, HR Manager	
1/5/2026	Community Member	2026-SPWB-24	N/A	Service Provider	Violations of consumer due process rights, unlawful service termination, vendor retaliation, Failure of regional center oversight.	1. Consumer was not provided with a proper written 30-day notice as required by Title 17.	**OPEN**	Open		69	Arshalous Garlanian, Community Services Director	
1/5/2026	Community Member	2026-SPWB-26	N/A	Service Provider	Unlawful service termination; denial of due process; failure to provide 30-day notice; consumer retaliation from vendor.	1. Consumer was removed from day program without a clear explanation of reason for termination. 2. Vendor failed to provide transparency and accountability despite having received multiple requests as to the nature of his termination. 3. Consumer alleges he was treated differently after an incident involving himself and another consumer.	**OPEN**	OPEN		93	Arshalous Garlanian, Community Services Director	
1/7/2026	Community Member	2026-SPWB-27	N/A	Service Provider	Suspected healthcare fraud; falsification of service records' and potential financial exploitation	1. Billing for services not rendered while consumer was out of town. **Substantiated** 2. Falsification of documents. **Substantiated**	**1. Substantiated** **2. Substantiated**	**CLOSED**	3/12/2026	64	Arshalous Garlanian, Community Services Director	
1/7/2026	Community Member	2026-SPWB-28	1/7/2026	Service Provider	Health and safety risks; suspected neglect, fraud, and financial exploitation.	1. SLS worker failed to provide required support, including meal preparation. **Unsubstantiated** 2. Consumer has fallen out of her chair while staff are outside in their car. **Unsubstantiated** 3. SLS worker hired an individual to work with staff, individual was not authorized to provide support. Potential HIPPA violation. ~~**Unsubstantiated**~~ **Substantiated** 4. Consumer is threatened by staff to not say anything due to potential threats of losing services. **Unsubstantiated** 5. Program owners are aware of these issues but have not addressed them. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated** **3. ~~Unsubstantiated~~ Substantiated** **4. Unsubstantiated**	3/4/2026	2/5/2026; reopened 2/12/26	98	Arshalous Garlanian, Community Services Director	
1/9/2026	Community Member	2026-SPWB-31	N/A	Service Provider	Suspected neglect; timecard fraud.	1. Job Coach left consumer unattended during work hours. **Substantiated** 2. Job Coach left work early on multiple occasions and was observed sitting in their car instead of providing on-site support. **Inconclusive**	**1. Substantiated** **2. Inconclusive**	CLOSED	3/18/2026	96	Arshalous Garlanian, Community Services Director	
1/9/2026	Community Member	2026-SPWB-33	1/9/2026	Service Provider	Services not rendered; health and safety; time fraud; Lack of clearance.	1. Staff clocks in and documents overtime but does not show up to work, sits outside the home in her car, or does not support client. as required (e.g., not cooking meals). **Unsubstantiated** On numerous occasions, resident has fallen out of her chair while staff is outside in her car.**Unsubstantiated** 2. SLS staff hired a woman to support client. but this individual is not authorized to work and has not been fingerprinted. ~~**Unsubstantiated**~~ **Substantiated** Client does not say anything because staff buys her things she wants (e.g., amazon purchases). Staff also threatens client by stating she won't receive help if she fires her. **Unsubstantiated** 3. The program owners, are aware of these issues but do not address them. **Unsubstantiated**	**1a. Unsubstantiated** **1b. Unsubstantiated** **2a. ~~Unsubstantiated~~ Substantiated** **2b. Unsubstantiated** **3. Unsubstantiated**	3/4/2026 Corrective Action	2/5/2026; reopened 2/12/26	96	Arshalous Garlanian, Community Services Director	
1/11/2026	Community Member	2026-SPWP-41		Service Provider	Excessive Fees	1. Excessive Fees for Social Recreation Activities 2. Lack of itimized breakdown for fees	**OPEN**	OPEN		94	Arshalous Garlanian, Community Services Director	
1/13/2026	Community Member	2026-SPWB-35	1/13/2026	Service Provider	Client Rights	1. Alleged that home staff and/or NLACRC staff may be withholding resident's SSI check.	**OPEN**	OPEN		92	Arshalous Garlanian, Community Services Director	
1/26/2026	Community Member	2026-SPWB-39	N/A	Service Provider	Client Rights	1. Consumer's mother is enabling harm and creating a dangerous environment for this individual. **Unsubstantiated** 2. Consumer's mother has a personal relationship with a caretaker from SLS agency who allegedly abused and pulled a gun on consumer. **Unsubstantiated** 3. The caretaker was reportedly fired in November because of this abuse **Unsubstantiated**; although, it's unclear if this individual is still around Consumer. **Inconclusive**	**1. Unsubstantiated** **2. Unsubstantiated** **3a. Unsubstantiated** **3b. Inconclusive**	**CLOSED**	3/10/2026	43	Arshalous Garlanian, Community Services Director	
1/29/2026	Community Member	2026-SPWP-40	N/A	Service Provider	Staff not trained; Failure to maintain vehicles: Unprofessional	1. Vehicles not maintained. 2. Staff not certified to train. 3. Unprofessional staff. Additional allegations from original complaint: 4. Excessive workload, fatigue, and staffing concerns. 5. Lack of Management, Supervisory, and safety oversight. 6. Alleged illegal activities on company premises.	**OPEN**	OPEN		76	Arshalous Garlanian, Community Services Director	
2/6/2026	Anonymous/Unknown	2026-EWB-36	2/6/2026	NLACRC Employee	Inappropriate Work Conduct	1. Inappropriate workplace conduct . 2. Making inappropriate and/or sexually explicit comments. **Unsubstantiated** 3. Repeated aggressive behavior. **Unsubstantiated** 4. Persistent and unwelcome flirting. **Unsubstantiated** 5. Inappropriate attire .**Substantiated**	1. **Substantiated** 2. **Unsubstantiated** 3. **Unsubstantiated** 4. **Unsubstantiated** 5. **Substantiated**	**CLOSED**	2/22/2026	16	Sheila King, HR Manager	

Annual Reporting of FY25-26 Whistleblower Complaints

NLACRC Whistleblower Complaint Log

ATTACHMENT 1

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Fiscal Year 2025-26

2/17/2026	Community Member	2026-SPWB-42	2/24/2026	Service Provider	Retaliatory Termination of Employment	1. Assault Incidents doe to Behaviorial Plan not consistently followed 2. Staff Burnout and Supervision Concerns 3. Failure of 2:1 Supervision Ratios 4. Lack of Follow up to reported concerns 5. Driver Availability Concerns	**OPEN**	OPEN		57	Arshalous Garlanian, Community Services Director	
3/9/2026	Community Member		(4731 Complaint)	SRF	Allegeded Abuse; Failure to provide support & services to residents.	1.Staff members sexually assaulted by sticking their finger in his anus and have hit him in the testicles. **Unsubstantiated** 2.Staff feed residents of the home old food. **Unsubstantiated** 3.Staff refuse to assist him in cleaning himself. **Unsubstantiated** 4.Staff do not include him in outings. **Unsubstantiated** 5.Staff allege that he breaks windows and doors. **Unsubstantiated** 6.Staff allowed him to run out of his medications. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated** **3. Unsubstantiated** **4. Unsubstantiated** **5. Unsubstantiated** **6. Unsubstantiated**	CLOSED	4/6/2026	28	Arshalous Garlanian, Community Services Director	
3/18/2026	Anonymous/Unknown	2026-EWB-44	N/A	NLACRC Employee	Report of Concerns	1. Employee promoted due to favoritism. **Unsubstantiated** 2. Employee has a history of getting into physical altercations and threatening people. **Unsubstantiated** 3. Employee is armed and will carry a gun. **Unsubstantiated**	**1. Unsubstantiated** **2.** **Unsubstantiated** **3.** **Unsubstantiated**	**CLOSED**	4/7/2026	20	Sheila King, HR Manager	
3/19/2026	Family Member	2026-SWB45	3/24/2026	Service Provider	Report of Concerns	1. Inappropriate Conduct by a DSP assigned to work in home setting, in the presence of a minor child	OPEN	OPEN		27	Arshalous Garlanian, Community Services Director	
3/23/2026	Family Member	2026-SWB46	3/24/2026	Service Provider	Report of Concerns;HealthY & Safety; Failure to meet IPP; Clients Rights	1. Discriminatory Language 2. Safety Neglect and Medical Risk 3. ADA Violations 4. Professional Misconduct 5. Documentation and Care Failures Additional allegations: 6 Safety & Abandonment: Client requires 24/7 care but is frequently abandoned at sister's home because the vendor fails to staff shifts. 7. Denial of Service Animal: Staff continue to refuse her IPP-mandated service dog, a violation of both the ADA and her right to mandated supports. 9. Medical Neglect: Against her repeated refusals, staff forced her into a workout that resulted in a seizure. 10. Privacy & Dignity: Her request for a female worker for hygiene tasks was ignored for three months, forcing her into an unsafe situation with a male worker.	OPEN	OPEN		23	Arshalous Garlanian, Community Services Director	

Annual Reporting of FY25-26 Whistleblower Complaints

ATTACHMENT 1

NLACRC Whistleblower Complaint Log

Fiscal Year 2024-25

	Time Period:	03/16/2025 -04/15/2026										
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7/22/2025	Anonymous/Unknown	DDS 24-110801 re-opened: new information	N/A	NLACRC Employee	Alleged sexual harassment (hostile work environment)	Original complaint alleges: 1. NLACRC Management individual is intimidating, bullying, harassing and sexually harassing NLACRC staff. New allegation: 2. Type 4 Workplace Violence perpertrator allegedly verbally, digitally and physically harassed NLACRC staff member due to improper relationship/association with NLACRC Management individual	**Open**	**Open**		267	Betsy Monahan, HR Director	
11/10/2025	Family Member	2025-BDWB-17	N/A	NLACRC	Ongoing issues with services and access to required planning documents.	1. Denial of access to consumer IPP 2. Pattern of Retaliatory Denial of Social-Recreation Services	**Open. Referred to Board Legal Counsel for response and investigati**			156	Sheila King, HR Manager	
12/17/2025	Community Member	2025-SPWB-19	N/A	Service Provider	Financial abuse/exploitation; neglect; possible retaliatory behavior.	1. Staff have had long-term unauthorized access to her bank accounts. Reports of missing funds and unexplained negative balances. **Unsubstantiated** 2. Consumer passwords are repeatedly changed without her consent. **Unsubstantiated** 3. consumer felt manipulated and pressured by staff. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated** **3. Unsubstantiated**	CLOSED	4/8/2026	112	Arshalous Garlanian, Community Services Director	
1/4/2026	NLACRC Employee	2026-EWB-21	1/8/2026	NLACRC	Leadership/Governance practices	1. Leadership Conduct. 2. Governance Practices. 3. Conflicts of Interest and Operational Integrity.	**Open. Referred to Board Legal Counsel for response and investigati**	Open		94	Sheila King, HR Manager	
1/5/2026	Community Member	2026-SPWB-24	N/A	Service Provider	Violations of consumer due process rights, unlawful service termination, vendor retaliation, Failure of regional center oversight.	1. Consumer was not provided with a proper written 30-day notice as required by Title 17.	**OPEN**	Open		69	Arshalous Garlanian, Community Services Director	
1/5/2026	Community Member	2026-SPWB-26	N/A	Service Provider	Unlawful service termination; denial of due process; failure to provide 30-day notice; consumer retaliation from vendor.	1. Consumer was removed from day program without a clear explanation of reason for termination. 2. Vendor failed to provide transparency and accountability despite having received multiple requests as to the nature of his termination. 3. Consumer alleges he was treated differently after an incident involving himself and another consumer.	**OPEN**	OPEN		93	Arshalous Garlanian, Community Services Director	
1/7/2026	Community Member	2026-SPWB-27	N/A	Service Provider	Suspected healthcare fraud; falsification of service records' and potential financial exploitation	1. Billing for services not rendered while consumer was out of town. **Substantiated** 2. Falsification of documents. **Substantiated**	**1. Substantiated** **2. Substantiated**	**CLOSED**	3/12/2026	64	Arshalous Garlanian, Community Services Director	
1/7/2026	Community Member	2026-SPWB-28	1/7/2026	Service Provider	Health and safety risks; suspected neglect, fraud, and financial exploitation.	1. SLS worker failed to provide required support, including meal preparation. **Unsubstantiated** 2. Consumer has fallen out of her chair while staff are outside in their car. **Unsubstantiated** 3. SLS worker hired an individual to work with staff, individual was not authorized to provide support. Potential HIPPA violation. ~~**Unsubstantiated**~~ **Substantiated** 4. Consumer is threatened by staff to not say anything due to potential threats of losing services. **Unsubstantiated** 5. Program owners are aware of these issues but have not addressed them. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated** **3. ~~Unsubstantiated~~ Substantiated** **4. Unsubstantiated**	3/4/2026	2/5/2026; reopened 2/12/26	98	Arshalous Garlanian, Community Services Director	
1/9/2026	Community Member	2026-SPWB-31	N/A	Service Provider	Suspected neglect; timecard fraud.	1. Job Coach left consumer unattended during work hours. **Substantiated** 2. Job Coach left work early on multiple occasions and was observed sitting in their car instead of providing on-site support. **Inconclusive**	**1. Substantiated** **2. Inconclusive**	CLOSED	3/18/2026	96	Arshalous Garlanian, Community Services Director	
1/9/2026	Community Member	2026-SPWB-33	1/9/2026	Service Provider	Services not rendered; health and safety; time fraud; Lack of clearance.	1. Staff clocks in and documents overtime but does not show up to work, sits outside the home in her car, or does not support client. as required (e.g., not cooking meals). **Unsubstantiated** On numerous occasions, resident has fallen out of her chair while staff is outside in her car.**Unsubstantiated** 2. SLS staff hired a woman to support client. but this individual is not authorized to work and has not been fingerprinted. ~~**Unsubstantiated**~~ **Substantiated** Client does not say anything because staff buys her things she wants (e.g., amazon purchases). Staff also threatens client by stating she won't receive help if she fires her. **Unsubstantiated** 3. The program owners, are aware of these issues but do not address them. **Unsubstantiated**	**1a. Unsubstantiated** **1b. Unsubstantiated** **2a. ~~Unsubstantiated~~ Substantiated** **2b. Unsubstantiated** **3. Unsubstantiated**	3/4/2026 Corrective Action	2/5/2026; reopened 2/12/26	96	Arshalous Garlanian, Community Services Director	
1/11/2026	Community Member	2026-SPWP-41		Service Provider	Excessive Fees	1. Excessive Fees for Social Recreation Activities 2. Lack of itimized breakdown for fees	**OPEN**	OPEN		94	Arshalous Garlanian, Community Services Director	
1/13/2026	Community Member	2026-SPWB-35	1/13/2026	Service Provider	Client Rights	1. Alleged that home staff and/or NLACRC staff may be withholding resident's SSI check.	**OPEN**	OPEN		92	Arshalous Garlanian, Community Services Director	
1/26/2026	Community Member	2026-SPWB-39	N/A	Service Provider	Client Rights	1. Consumer's mother is enabling harm and creating a dangerous environment for this individual. **Unsubstantiated** 2. Consumer's mother has a personal relationship with a caretaker from SLS agency who allegedly abused and pulled a gun on consumer. **Unsubstantiated** 3. The caretaker was reportedly fired in November because of this abuse **Unsubstantiated**; although, it's unclear if this individual is still around Consumer. **Inconclusive**	**1. Unsubstantiated** **2. Unsubstantiated** **3a. Unsubstantiated** **3b. Inconclusive**	**CLOSED**	3/10/2026	43	Arshalous Garlanian, Community Services Director	
1/29/2026	Community Member	2026-SPWP-40	N/A	Service Provider	Staff not trained; Failure to maintain vehicles: Unprofessional	1. Vehicles not maintained. 2. Staff not certified to train. 3. Unprofessional staff. Additional allegations from original complaint: 4. Excessive workload, fatigue, and staffing concerns. 5. Lack of Management, Supervisory, and safety oversight. 6. Alleged illegal activities on company premises.	**OPEN**	OPEN		76	Arshalous Garlanian, Community Services Director	
2/6/2026	Anonymous/Unknown	2026-EWB-36	2/6/2026	NLACRC Employee	Inappropriate Work Conduct	1. Inappropriate workplace conduct . 2. Making inappropriate and/or sexually explicit comments. **Unsubstantiated** 3. Repeated aggressive behavior. **Unsubstantiated** 4. Persistent and unwelcome flirting. **Unsubstantiated** 5. Inappropriate attire .**Substantiated**	1. **Substantiated** 2. **Unsubstantiated** 3. **Unsubstantiated** 4. **Unsubstantiated** 5. **Substantiated**	**CLOSED**	2/22/2026	16	Sheila King, HR Manager	

Annual Reporting of FY25-26 Whistleblower Complaints

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NLACRC Whistleblower Complaint Log

Fiscal Year 2024-25

2/17/2026	Community Member	2026-SPWB-42	2/24/2026	Service Provider	Retaliatory Termination of Employment	1. Assault Incidents doe to Behaviorial Plan not consistently followed 2. Staff Burnout and Supervision Concerns 3. Failure of 2:1 Supervision Ratios 4. Lack of Follow up to reported concerns 5. Driver Availability Concerns	**OPEN**	OPEN		57	Arshalous Garlanian, Community Services Director	
3/9/2026	Community Member		(4731 Complaint)	SRF	Allegeded Abuse; Failure to provide support & services to residents.	1.Staff members sexually assaulted by sticking their finger in his anus and have hit him in the testicles. **Unsubstantiated** 2.Staff feed residents of the home old food. **Unsubstantiated** 3.Staff refuse to assist him in cleaning himself. **Unsubstantiated** 4.Staff do not include him in outings. **Unsubstantiated** 5.Staff allege that he breaks windows and doors. **Unsubstantiated** 6.Staff allowed him to run out of his medications. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated** **3. Unsubstantiated** **4. Unsubstantiated** **5. Unsubstantiated** **6. Unsubstantiated**	CLOSED	4/6/2026	28	Arshalous Garlanian, Community Services Director	
3/18/2026	Anonymous/Unknown	2026-EWB-44	N/A	NLACRC Employee	Report of Concerns	1. Employee promoted due to favoritism. **Unsubstantiated** 2. Employee has a history of getting into physical altercations and threatening people. **Unsubstantiated** 3. Employee is armed and will carry a gun. **Unsubstantiated**	**1. Unsubstantiated** **2.** **Unsubstantiated** **3.** **Unsubstantiated**	**CLOSED**	4/7/2026	20	Sheila King, HR Manager	
3/19/2026	Family Member	2026-SWB45	3/24/2026	Service Provider	Report of Concerns	1. Inappropriate Conduct by a DSP assigned to work in home setting, in the presence of a minor child	OPEN	OPEN		27	Arshalous Garlanian, Community Services Director	
3/23/2026	Family Member	2026-SWB46	3/24/2026	Service Provider	Report of Concerns;HealthY & Safety; Failure to meet IPP; Clients Rights	1. Discriminatory Language 2. Safety Neglect and Medical Risk 3. ADA Violations 4. Professional Misconduct 5. Documentation and Care Failures Additional allegations: 6 Safety & Abandonment: Client requires 24/7 care but is frequently abandoned at sister's home because the vendor fails to staff shifts. 7. Denial of Service Animal: Staff continue to refuse her IPP-mandated service dog, a violation of both the ADA and her right to mandated supports. 9. Medical Neglect: Against her repeated refusals, staff forced her into a workout that resulted in a seizure. 10. Privacy & Dignity: Her request for a female worker for hygiene tasks was ignored for three months, forcing her into an unsafe situation with a male worker.	OPEN	OPEN		23	Arshalous Garlanian, Community Services Director	

Annual Reporting of FY25-26 Whistleblower Complaints

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Monthly Whistleblower Log May 16, 2026 - June 15, 2026

Time Period: 05/16/2026 -06/15/2026

Date Complaint Received	Complainant Type	Investigation Case No.	Date Acknowledgment Sent to Complainant	Entity That is Target of Complaint	Nature of Complaint	Investigation Allegation Details	Investigation Results	Corrective Action Taken (if applicable)	Date Complaint Closed	Complaint Investigation Duration (in Days)	Submitted/Logged by
7/18/2025	Anonymous/Unknown	DDS 25-062602; amended to 2025 -EWB - 05	N/A	NLACRC Employee(s)	Fiscal malfeasance; violation of Board/regional center policy	Complainant alleges: 1. The combined contract totals for two I.T. consultants exceeded $600,000 annually in Fiscal Years 2021-22, 2022-23, and 2023-24. However, the contracts were intentionally split to evade review by the NLACRC Board of Trustees (Board). 2. The contracts were presented to the Board for approval without the appropriate parties disclosing the cumulative financial and functional impact, compromising fiduciary responsibility and public trust.	Complainant alleges: 1. The combined contract totals for two I.T. consultants exceeded $600,000 annually in Fiscal Years 2021-22, 2022-23, and 2023-24. However, the contracts were intentionally split to evade review by the NLACRC Board of Trustees (Board). 2. The contracts were presented to the Board for approval without the appropriate parties disclosing the cumulative financial and functional impact, compromising fiduciary responsibility and public trust.	Pending Direction - Submitted Responses to DDS on 8/18/2025 , 09/02/2025, and 09/04/2025		332	Betsy Monahan, HR Director
7/22/2025	Anonymous/Unknown	DDS 24-110801 re-opened: new information	N/A	NLACRC Employee	Alleged sexual harassment (hostile work environment)	Original complaint alleges: 1. NLACRC Management individual is intimidating, bullying, harassing and sexually harassing NLACRC staff. New allegation: 2. Type 4 Workplace Violence perpertrator allegedly verbally, digitally and physically harassed NLACRC staff member due to improper relationship/association with NLACRC Management individual.	**Open**	**Open**		328	Betsy Monahan, HR Director
11/10/2025	Family Member	2025-BDWB-17	N/A	NLACRC	Ongoing issues with services and access to required planning documents.	1. Denial of access to consumer IPP 2. Pattern of Retaliatory Denial of Social-Recreation Services	**Open. Referred to Board Legal Counsel for response and investiga**	Opem		217	Sheila King, HR Manager
1/4/2026	NLACRC Employee	2026-EWB-21	1/8/2026	NLACRC	Leadership/Governance practices	1. Leadership Conduct. 2. Governance Practices. 3. Conflicts of Interest and Operational Integrity.	**Open. Referred to Board Legal Counsel for response and investiga**	Open		162	Sheila King, HR Manager
1/5/2026	Community Member	2026-SPWB-24	N/A	Service Provider	Violations of consumer due process rights, unlawful service termination, vendor retaliation, Failure of regional center oversight.	1. Consumer was not provided with a proper written 30-day notice as required by Title 17.	**1. Substantiated**	Plan of Improvement 5/18/2026	5/18/2026	133	Arshalous Garlanian, Community Services Director
1/57/2026 (correction)	Community Member	2026-SPWB-26	N/A	Service Provider	Unlawful service termination; denial of due process; failure to provide 30-day notice; consumer retaliation from vendor.	1. Consumer was removed from day program without a clear explanation of reason for termination. 2. Vendor failed to provide transparency and accountability despite having received multiple requests as to the nature of his termination. 3. Consumer alleges he was treated differently after an incident involving himself and another consumer.	**1. Substantiated** **2. Unsubstantiated** **3. Unsubstantiated**	Plan of Improvement 5/18/2026	5/18/2026	131	Arshalous Garlanian, Community Services Director
1/7/2026	Community Member	2026-SPWB-28	1/7/2026	Service Provider	Health and safety risks; suspected neglect, fraud, and financial exploitation.	1. SLS worker failed to provide required support, including meal preparation. **Unsubstantiated** 2. Consumer has fallen out of her chair while staff are outside in their car. **Unsubstantiated** 3. SLS worker hired an individual to work with staff, individual was not authorized to provide support. Potential HIPPA violation. ~~**Unsubstantiated**~~ **Substantiated** 4. Consumer is threatened by staff to not say anything due to potential threats of losing services. **Unsubstantiated** 5. Program owners are aware of these issues but have not addressed them. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated** **3. ~~Unsubstantiated~~ Substantiated** **4. Unsubstantiated**	3/4/2026	2/5/2026; reopened 2/12/26	159	Arshalous Garlanian, Community Services Director
1/9/2026	Community Member	2026-SPWB-33	1/9/2026	Service Provider	Services not rendered; health and safety; time fraud; Lack of clearance.	1. Staff clocks in and documents overtime but does not show up to work, sits outside the home in her car, or does not support client. as required (e.g., not cooking meals). **Unsubstantiated** On numerous occasions, resident has fallen out of her chair while staff is outside in her car.**Unsubstantiated** 2. SLS staff hired a woman to support client. but this individual is not authorized to work and has not been fingerprinted. ~~**Unsubstantiated**~~ **Substantiated** Client does not say anything because staff buys her things she wants (e.g., amazon purchases). Staff also threatens client by stating she won't receive help if she fires her. **Unsubstantiated** 3. The program owners, are aware of these issues but do not address them. **Unsubstantiated**	**1a. Unsubstantiated** **1b. Unsubstantiated** **2a. ~~Unsubstantiated~~ Substantiated** **2b. Unsubstantiated** **3. Unsubstantiated**	3/4/2026 Corrective Action	2/5/2026; reopened 2/12/26	157	Arshalous Garlanian, Community Services Director
1/11/2026	Community Member	2026-SPWP-41		Service Provider	Excessive Fees	1. Excessive Fees for Social Recreation Activities 2. Lack of itimized breakdown for fees	**OPEN**	OPEN		155	Arshalous Garlanian, Community Services Director
1/13/2026	Community Member	2026-SPWB-35	1/13/2026	Service Provider	Client Rights	1. Alleged that home staff and/or NLACRC staff may be withholding resident's SSI check.	**OPEN**	OPEN		153	Arshalous Garlanian, Community Services Director
1/29/2026	Community Member	2026-SPWP-40	N/A	Service Provider	Staff not trained; Failure to maintain vehicles: Unprofessional	1. Vehicles not maintained. - **Unsubstantiated** 2. Staff not certified to train. - **Unsubstantiated** 3. Unprofessional staff. - **Unsubstantiated** Additional allegations from original complaint: 4. Excessive workload, fatigue, and staffing concerns. - **Unsubstantiated** 5. Lack of Management, Supervisory, and safety oversight. - **Unsubstantiated** 6. Alleged illegal activities on company premises. - **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated** **3. Unsubstantiated** **4. Unsubstantiated** **5. Unsubstantiated** **6. Unsubstantiated**	N/A	6/9/2026	131	Arshalous Garlanian, Community Services Director
2/17/2026	Community Member	2026-SPWB-42	2/24/2026	Service Provider	Retaliatory Termination of Employment	1. Assault Incidents doe to Behaviorial Plan not consistently followed 2. Staff Burnout and Supervision Concerns 3. Failure of 2:1 Supervision Ratios 4. Lack of Follow up to reported concerns 5. Driver Availability Concerns	**OPEN**	OPEN		118	Arshalous Garlanian, Community Services Director
3/19/2026	Family Member	2026-SPWB45	3/24/2026	Service Provider	Report of Concerns	1. Inappropriate Conduct by a DSP assigned to work in home setting, in the presence of a minor child	OPEN	OPEN		88	Arshalous Garlanian, Community Services Director
3/23/2026	Family Member	2026-SPWB46	3/24/2026	Service Provider	Report of Concerns;HealthY & Safety; Failure to meet IPP; Clients Rights	Allegations: 1.Safety & Abandonment: Client requires 24/7 care but is frequently abandoned at sister's home because the vendor fails to staff shifts. **Unsubstantiated** 2. Denial of Service Animal: Staff continue to refuse her IPP-mandated service dog, a violation of both the ADA and her right to mandated supports. **Unsubstantiated** 3. Medical Neglect: Against her repeated refusals, staff forced her into a workout that resulted in a seizure. **Inconclusive** 4. Privacy & Dignity: Her request for a female worker for hygiene tasks was ignored for three months, forcing her into an unsafe situation with a male worker. **Unsubstantiated**	**1. Unsubstantiated** **2. Unsubstantiated** **3. Inconclusive** **4. Unsubstantiated**	CLOSED	4/29/2026	37	Arshalous Garlanian, Community Services Director

Annual Reporting of FY25-26 Whistleblower Complaints

ATTACHMENT 1

Monthly Whistleblower Log May 16, 2026 - June 15, 2026

4/22/2026	Community Member	2026-SPWB47	N/A	Service Provider	Health & Safety; Client's Rights; Failure to protect.	1. The Incident & De-escalation (Thursday, April 16) - **Substantiated** 2. The Brutality of law enforcement - **Unsubstantiated** 3. The Neglect & Physical Protection - **Unsubstantiated** 4. Medical Dumping (Friday, April 17) - **Unsubstantiated**	**1. Substantiated** **2. Unsubstantiated** **3. Unsubstantiated** **4. Inconclusive**	N/A	6/9/2026	48	Arshalous Garlanian, Community Services Director
4/30/2026	Community Member	2026-SPWB48	N/A	Service Provider	Unprofessional Staff Conduct; Failure to provide services as specified in the IPP.	1. Administrator does not treat staff fairly, expectations are not consistent, talks about staff with other staff. **Outside RC Scope** 2. Staff was sleeping in a resident's room on 4/27/2026 from 9:00pm - 9:40pm instead of working. Resident requires 2:1. **Substantiated**	**1. Outside of RC scope - reported to Agency Management** **2. Substantiated**	CAP to be issued 5/18/2026	5/12/2026	12	Arshalous Garlanian, Community Services Director
5/1/2026	Community Member	2026-SPWB-56	5/1/2026	Service Provider	Staff not trained; Failure to maintain staffing ratios: Staff not having appropriate qualification	1. The program is not providing staff training including new employee training and mandated reporter training. – **Substantiated** 2. The program is not consistently following required staffing ratios. – **Unsubstantiated** 3. Dating back to June 2025, and potentially prior, the program has fraudulently billed for services. – **Substantiated** This includes billing for services that are supposed to be provided by Board Certified Behavior Analysts but are provided by other individuals (potentially technicians). - **– Unsubstantiated**	**1. Substantiated** **2. Unsubstantiated** **3a. Substantiated** **3b. Unsubstantiated**	Plan of Improvement 6/12/2026	6/12/2026	42	Arshalous Garlanian, Community Services Director
5/1/2026	Community Member	2026-SPWB49	5/1/2026	Service Provider	Inadequate food supply; Health & Safety - Work Environment; Unprofessional Staff Conduct; Failure to provide services as specified in the IPP;	1. Inadequate food supply available for clients. **Unsubstantiated** 2.Staff have been found sleeping or are on their phones while in clients' rooms instead of working with individuals served. **Substantiated** 3. Staff made derogatory comments about other staff in front of individuals served. **Unsubstantiated** 4. Property's landscape not being maintained creating an increased risks during snake season as the grass is too high to see snakes. **Substantiated** 5. A client stepped on a snake. **Unsubstantiated**	**1. Unsubstantiated** **2. Substantiated** **3. Unsubstantiated** **4. Substantiated** **5. Unsubstantiated**	CAP to be issued 5/18/2027	5/12/2026	11	Arshalous Garlanian, Community Services Director
5/4/2026	Community Member	2026-SPWB50	5/5/2026	Service Provider	Failure to provide services; Neglect; Clients Rights; Unprofessional Staff	1.Allegations of not receiving help with grocery shopping, attending appointments, cleaning her apartment, and building life skills. **Unsubstantiated** 2.Allegations of her assigned caregiver has been neglectful and unprofessional. One caregiver allegedly used her personal items and food, while another failed to perform required duties. - **Unsubstantiated** 3.Lack of support, the member reports she nearly lost her apartment due to lack of support, she nearly failed an inspection putting her housing in jeopardy. She feels unable to manage tasks independently because of her mental illness and disability. - **Unsubstantiated** 4. Staff picked up family member while on duty and transporting client. Client expressed feeling uncomfortable due to the family member using foul language. - **Inconclusive**	**1. Unsubstantiated** **2. Unsubstantiated** **3. Unsubstantiated** **4. Inconclusive**	N/A	5/18/2026	14	Arshalous Garlanian, Community Services Director
5/4/2026	Community Member	2026-SPWB51	5/5/2026	Service Provider	Neglect	1. On 4/29/26 staff from vendored agency reported that on 4/28/26 that an individual served by FDLRC was found covered in her own urine when the caregiver arrived on shift and no one from her facility offered to help. 2. The electric chair is also in bad shape; caregiver had to assist with repairing it to prevent from the resident collapsing in it.	**OPEN** **with CCL**	OPEN		42	Arshalous Garlanian, Community Services Director
5/20/2026	Community Member	2026-SPWB52	N/A	Service Provider	HR practices; Lack of Training; Staff driving with suspended license; Failure to Report	1. Concerns with HR related practices – outside of RC Scope referred to DOL 2. "Administrator" (mother of owner) asks residents to send complaints about staff so they can fire them 3. "Administrator" encouraging behaviors so they can request/keep 1:1s. Residents don't all need one 4. "Administrator" allows staff with suspended driving license drive residents 5. "Administrator" has people/relatives telling home staff what to do when they don't work in the home 6. "Administrator" allows staff who don't have DSP certification to administer medication and sign the Administrator's name while she is on FACETIME 7. "Administrator" staff don't have CEUs or their DSP 1 and 2 8. "Administrator" does not submit SIRs for incidents – Client 1and Client 2 (residents) had an altercation, but no SIR was submitted.	**OPEN**			26	Arshalous Garlanian, Community Services Director
5/29/2026	Anonymous/Unknown	2026-EWB-55	5/29/2026	NLACRC Employee	Leadership/Workplace Equity	1. Non-management staff are receiving a per payperiod gas stipend, while management staff receive no comparable compensation. 2.A "loyalty pay" bonus applies only to non-management staff 3. Consultants hired to improve workplace fairness have been ineffective. 4. Management is being pressured to discipline employees who voice concerns 5. Executive Director is making unilateral decisions without proper investigation.	**Open. Referred to Board Legal Counsel for response and investigation**			24	Sheila King, HR Manager
6/1/2026	Community Member	2026-SPWB-57	6/1/2026	Service Provider	Staffing ratios; Failure to meet PD; Training; Health & Safety	1. The program is not complying with staffing ratios. When direct care staff take scheduled 15-minute breaks, there is no floater or relief staff. Management instructs staff who are already actively supervising their own assigned individuals to simultaneously monitor the absent staff member's assigned individual. In multiple instances, this has left individuals unattended in the community, presenting safety and elopement concerns. - **Substantiated** 2. The program's daily structure does not align with the approved program design. **- Unsubstantiated** 3. Personnel are not qualified and/or lack specialized training that the agency represented they would possess within the program design, specifically for program managers and program directors. **– Substantiated** 4. The program accepts placements that are not aligned with its current clinical and behavioral support capacity, including C1 and C2. - **Unsubstantiated** 5. The program's Executive team dismisses staff concerns for C3 hygiene, cockroach infestation at home, and alleged abuse by her mother. No mandated reports are filed. **– Unsubstantiated**	**1. Substantiated** **2. Unsubstantiated** **3. Substantiated** **4. Unsubstantiated** **5. Substantiated**	Plan of Improvement TBD		14	Arshalous Garlanian, Community Services Director
6/5/2026	Community Member	2026-SPWB-53	6/9/2026	Service Provider	Financial Misonduct/fraud/Misappropriation of funds;Failure to adhere to Title 17 audit requirement; Human Resource concerns; Conflict of Interest; Intimidation	1. Financial misconduct, fraud, or misappropriation of organizational funds. 2. Intimidation by ED.	**OPEN**			10	Arshalous Garlanian, Community Services Director
6/5/2026	Community Member	2026-SPWB-54	6/10/2026	Service Provider	Failure to adhere to Title 17 audit requirement; Human Resource concerns; Conflict of Interest; Intimidation	1. Agency ED Deceptive Information of Vendorization Termination 2. Refusal to submit Financial Audits and Discrepancies 3. Internal Obstruction and Lack of Proper Oversight (Conflict of Interest between ED and Board) 4. Workplace and Staff Intimidation	**OPEN**			10	Arshalous Garlanian, Community Services Director

Annual Reporting of FY25-26 Whistleblower Complaints

ATTACHMENT 1

Monthly Whistleblower Log May 16, 2026 - June 15, 2026

6/8/2026	Community Member	2026 -SPWB-58	6/8/2026	Service Provider	Improper Data Collection and Documentation; Reporting and Billing Concerns	1. Improper Data Collection and Documentation a. Dating back to October 2025, and potentially years prior, the program allegedly falsified client data, did not maintain proper data documentation, and submitted progress reports lacking objective metrics. b. The program's service protocols state that AST services will be conducted using specific methodologies with progress measured by defined metrics; however, the data collected was unquantifiable, unrelated to those metrics, and could not substantiate the performance presented in official progress reports. c. There are inconsistences between the stated goal methodologies and the actual data collected. d. There are discrepancies between raw data and the final progress reports submitted. e. Clinical metrics and data tracking were fabricated or missing entirely. f. End-of-session summaries are missing, incomplete, or unprofessional. g. The program could not produce requested historical documentation and data records. h. Physical data submissions were left uncollected and/or unreviewed for at least a year. 2. Reporting and Billing Concerns a. Program leaders are aware of these issues but did not initiate an audit or notify the regional center. b. The program potentially billed	**OPEN**			7	Arshalous Garlanian, Community Services Director
6/9/2026	Community Member	2026-SWPB-59	6/10/2026	Service Provider	Lack of Supervision; Client Rights; Driver Qualification; Health & Safety; Lack of Training	1. Staff 1 leaves participants unsupervised (e.g. outside the building or out of visual proximity). - **Unsubstantiated** a. The most recent incident occurred on January 14, 2026, and was formally reported to the Regional Director and Program Director. 2. Demeaning and disrespectful treatment of participants by staff Staff 1 - **PENDING** 1. Staff 1 allegedly threatened to take away activities or remove Client 2 access to his personal belongings if he did not listen to her. - **PENDING** 2. A formal complaint was reportedly filed (potentially on or around January 15, 2026) by C2 with Admin and the CEO becauseStaff 1 was rude to him. - **PENDING** 3. Driver Qualifications a. Staff drivers do not have the correct license to operate the program's commercial vehicles that transport 12+ passengers. **- Unsubstantiated** 4. Exposure to Extreme Weather and Environmental Hazards **- Unsubstantiated** 1. Staff 2 regularly schedules strenuous activities during periods of extreme weather, regardless of participants' medical vulnerabilities. 2. On June 3, 2026, a cooking activity utilizing hot ovens was mandated and conducted in weather exceeding 90°F. Medically fragile participants, including Client 3, were exposed to dangerous thermal conditions. **- Unsubstantiated** 3. Lack of staff training, specifically: **- Substantiated** 1. Safe lifting and transfer procedures 2. Mechanical lift operation and wheelchair securement 3. Restroom and mobility assistance 4. Appropriate personal protective equipment (PPE)	**OPEN**			6	Arshalous Garlanian, Community Services Director
6/10/2026	Community Member	2026-SWPWB-60	N/A	Service Provider	Health & Safety; Unsafe driving practices; Failure to protect by not following policies & procedures; Unfair/equitable work practices by management; Extended breaks; Lack of supervision	1. Client sustained head injury due to lack of supervision and not taking appropriate precautions. 2. Several staff (drivers/attendants) have reported Driver 1's behavior to management and no meaningful action appears to have been taken. 3. Driver 1 has made inappropriates comments and unsafe conduct. 4. Inappropriate behavior between Driver 1 and Attendant 1 in public areas and near group homes. 5. Driver 1 taking long breaks. 6. Driver 1 making inappropriate comments to Attendant 2. 7. Appears to be "very little supervision in the field".	**OPEN**			5	Arshalous Garlanian, Community Services Director
Summary: for the May 16-June 15, 2026 period, there were a total of 28 cases. Of those , 19 were open and 9 were closed. Out of the 28, 23 were under Community Services											