

Board of Trustees Meeting

Wednesday, November 4, 2026

6:00 p.m.

Hybrid - NLACRC

Santa Clarita Valley

Office/Zoom

Board of Trustees Meeting

November 4, 2026

Table of Contents

Cover Page 1

Table of Contents 2

Agenda 4

Agenda Item 7. A. Approval of Meeting Minutes September 9, 2026 8

Agenda Item 8. A. Approval of to Authorize an Officer to Secure Worker's Compensation for Calendar Year 2027 21

Agenda Item 8. B. Ratification of Operations Contracts Approved by the Executive Finance Committee on Behalf of the Board of Trustees

- Sheridan Group 22
- Semetra 24
- Photo Scan of Los Angeles 26

Agenda Item 8. F. Board Policies 28

- Transparency and Public Information Policy 28
- Board of Trustees Code of Conduct Policy 34
- Board of Trustees Board Member Responsibilities Policy 41
- Board of Trustees Board Member Support Policy 44
- Board of Trustees Board Staff Interaction Policy 50
- Board Member of Trustees Conflict of Interest Policy 52
- Social Media Policy 64
- Zero Tolerance Policy for Consumer Abuse or Neglect 70
- Anti-Retaliation Policy 79
- Board Executive Director Relationship Policy 81
- Board Governance Policy 83
- Board Training Policy 86
- Inclusion, Equity and Diversity Policy 87
- Whistleblower Policy 94

Agenda Item 10. Executive Director's Report 100

Agenda Item 13. A. SDLVAC Liaison Report 103

Agenda Item 13. B. SDP Implementation Report 104

Agenda Item 16.B. Financials Reports 108

Agenda Item 22. Old Business/New Business

- Board and Committee Meeting Attendance Sheets and Time Reports 117
- Updated Acronyms Listing 124

Agenda Item 23. Reference Documents

Board of Trustees Meeting Calendar.....**130**
Board of Trustees Committee List.....**131**

North Los Angeles County Regional Center

Board of Trustees Meeting -

Wednesday, November 4, 2026

6:00 p.m.

~AGENDA ~

1. **Call to Order & Welcome** *(5 min.)*

2. **Housekeeping** *(1 min.)*
   A. Spanish Interpretation Available
   B. Public Attendance (please note name in Chat)
   C. *Update Zoom Screen Name to include full name, board position, and geographic location (SFV, AV, or SCV)

3. **Share Impact Story from Individual Served** *(5 min.)*

4. **Board Member Attendance/Quorum** *(1 min.)*

5. **Agenda –** [APPROVAL] *(1 min.)*

6. **Public Input & Comments** -Reserved for Agenda Items (3 minutes per comment, 3-person limit) *(9 min.)*

7. **Consent Items** *(1 min.)*
   All Consent Items are to be approved in one motion unless a Board Member or a member of the public requests a separate action or discussion on a specific item.

   A. Approval of Board of Trustees Meeting Minutes September 9, 2026

8. **Action Items**
   A. Approval to Authorize an Officer to Secure Worker's Compensation for Calendar Year 2027 – Vini Montague *(3 min.)*
   B. Ratification of Operations Contracts Approved by the Executive Finance Committee on Behalf of the Board of Trustees – Vini Montague *(5 min.)*
      1. Sheridan Group
      2. Semetra
      3. Photo Scan of Los Angeles
   C. Approval of Strategic Plan – Angela Pao-Johnson *(5 min.)*

D. Approval to Send 2025-2026 Board Composition Semi-annual Progress Report to DDS – Angela Pao-Johnson *(5 min.)*
E. Approval of Performance Measures FY2026-27 with Baseline Data – Angela Pao-Johnson *(15 min.)*
F. Approval and Adoption of Board Policies – Sharmila Brunjes *(15 min.)*
    1. Transparency and Public Information Policy
    2. Board Member Code of Conduct Policy
    3. Board Member Responsibilities Policy
    4. Board Member Support Policy
    5. Board Staff Interaction Policy
    6. Board Member Conflict of Interest Policy
    7. Social Media Policy
    8. Zero Tolerance Policy for Consumer Abuse or Neglect
    9. Anti-Retaliation Policy
    10. Board Executive Director Relationship Policy
    11. Board Governance Policy
    12. Board Training Policy
    13. Inclusion, Equity and Diversity Policy
    14. Whistleblower Policy
        a. Approval to Change the Name of the Whistleblower Policy to Include "Vendors" (e.g. Whistleblowers for Staff, Board **& Vendors**)

9. Board Business
A. 5-Minute Fiscal Brief: Core Staffing Formula *(5 min.)*

10. Executive Director's Report – Angela Pao-Johnson *(10 min.)*
A. Introduction of Interim Human Resources Director Jonathan Harvey
B. NLACRC's Plan of Action to Address Community Concerns About Staff Responsiveness

11. Public Input & Comments *(3 minutes per comment)*

12. Closed Session *(45 min.)*
A. Executive Director Performance Evaluation

13. Self-Determination Program (SDP) Report – Jennifer Koster *(3 min.)*
A. SDLVAC Liaison Report
B. SDP Implementation Report
C. Next Self Determination Local Advisory Committee Meeting: Thursday,

November 19, 2026, at 6:30 p.m.

14. **Association of Regional Center Agencies** – Jeremy Sunderland *(3 min.)*
    A. ARCA Liaison Report
    B. Next meeting: January 15, 2027

15. **Consumer Advisory Committee** – Juan Hernandez *(2 min.)*
    A. This committee has not met since the last Board of Trustees meeting.
    B. Next Meeting: Thursday, January 7, 2027, 5:00 p.m.

16. **Executive Finance Committee** – Sharmila Brunjes *(2 min.)*
    A. Committee Summary
    B. Financial Reports
    C. Next Meeting: Thursday, November 19, 2026, 6:05 p.m.

17. **Community Relations Committee** – Jeremy Sunderland *(2 min.)*
    A. The committee has not met since the last Board of Trustees meeting.
    B. Next Meeting: Wednesday, November 18, 2026, 5:00 p.m.

18. **Nominating Committee** – Curtis Wang *(2 min.)*
    A. The committee has not met since the last Board of Trustees meeting.
    B. Next Meeting: Wednesday, January 6, 2027, at 5:30 p.m.

19. **Post-Retirement Medical Trust Committee** – Sharmila Brunjes *(1 min.)*
    A. The committee has not met since the last Board of Trustees meeting.
    B. Next Meeting: Thursday, November 19, 2026, 5:00 p.m.

20. **Vendor Advisory Committee** – Tal Segalovitch *(2 min.)*
    A. Committee Summary
    B. Next Meeting: Thursday, November 12, 2026, 9:30 a.m. *(Hybrid)*

21. **Old Business/New Business** *(2 min.)*
    A. Board and Committee Meeting Attendance Sheets and Time Reports
    B. Updated Acronyms Listing

22. **NLACRC Announcements/Information** *(2 min.)*
    A. Reference Documents
        1. Board of Trustees Meeting Calendar
        2. Board of Trustees Committee List
    B. Next Meeting: Wednesday, January 13, 2027, at 6:00 p.m. (Virtual)

23. Adjournment

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

NORTH LOS ANGELES COUNTY REGIONAL CENTER (NLACRC)
9200 OAKDALE AVENUE, SUITE 100
CHATSWORTH, CA 91311

MINUTES OF THE BOARD OF TRUSTEES MEETING
HYBRID MEETING – NLACRC CHATSWORTH VALLEY OFFICE/ZOOM
SEPTEMBER 9, 2026 6:00 P.M.

BOARD OF TRUSTEES:
Sharmila Brunjes (President), Juan Hernandez (Vice President), Anna Hurst (Treasurer), Curtis Wang (Secretary), Leticia Garcia (ARCA Rep), Tal Segalovitch (VAC Chair), Puja Trivedi, Kulwant Dosanjh, George Alvarado, Cathy Blin, Nicholas Abrahms, Jacquie Colton, Jeremy Sunderland, Laura Monge, Jennifer Koster, Jason Taketa

ABSENT:
Jacquie Colton, Sonia Campos, Tal Segalovitch, Curtis Wang

STAFF:
Angela Pao-Johnson - Executive Director, Evelyn McOmie – Deputy Director, Vini Montague – Chief Financial Officer, Dr. Carlo DeAntonio – Director, Clinical Services, Silvia Renteria-Haro, Arshalous Garlanian, Donna Rentsch, Sarah Yap, Elisa Hill, Lindsay Granger, Arezo Abedi

GUESTS:
Lori Walker – NLACRC SDLVAC Chair

---

1. INTRODUCTIONS AND CALL TO ORDER

Upon confirmation of quorum, the meeting was called to order by President Sharmila Brunjes at 6:01 PM. Opening remarks included a welcome to the new Board of Trustees members, reminders for participants to display their full names, and guidance for Board members to state their names when making or seconding motions to support accurate minute-taking.

The Board reviewed the organization's mission and vision statements, reaffirming its commitment to supporting individuals with developmental disabilities in leading healthy, productive, and inclusive lives. Meeting protocols were also outlined, including public comment procedures—limited to agenda items at the beginning of the meeting, with general public input scheduled later—and adherence to the civility code to ensure respectful and inclusive dialogue.

Housekeeping items included confirmation that Spanish interpretation was available and instructions for Board members to update their display names to include their role and geographic designation.

2. IMPACT STORY FROM INDIVIDUAL SERVED

Executive Director Angela Pao-Johnson shared an impact story from Isaac Prendis an individual served.

3. BOARD MEMBER ATTENDANCE/QUORUM

Board members were confirmed in attendance on Zoom. Quorum was confirmed by staff.

4. AGENDA – APPROVAL

Sharmila Brunjes noted one change to the agenda an additional 15 minutes would be added to the closed session.

Absent objection, the agenda was approved as amended.

5. PUBLIC INPUT & COMMENTS—RESERVED FOR AGENDA ITEMS

During the public input portion of the meeting, Sharmila Brunjes reminded attendees that comments were limited to agenda items, with a three-minute time limit per speaker.

Lori Walker, Chair of the Self-Determination Local Advisory Committee (SDLAC), shared ongoing feedback from participants and families regarding delays, administrative burdens, inconsistent information and support, and accountability and access within the Self-Determination Program (SDP). Lori Walker also emphasized participants' continued support for SDP, including its flexibility and participant choice. Lori Walker encouraged the Board to review the committee's monthly feedback and support efforts to address identified areas for improvement.

Claudia Wenger, Claudia Cares Consulting, expressed concerns regarding delays experienced by individuals entering SDP and those transitioning into subsequent program years. Claudia Wenger reported delays with POS authorizations, scheduling IPP meetings, and receiving IPP agreements. Claudia Wenger requested that the Board review and track turnaround times, consider additional service coordinator training related to SDP requests, and establish clear timelines for providing IPP agreements following meetings.

Jon Francis, SDLAC member and Board liaison, echoed concerns regarding SDP and discussed the need for greater transparency and continuity throughout the process. Jon Francis noted that clearer information regarding where participants are in the process could help families better understand delays and next steps.

6. CONSENT ITEMS

Board President Sharmila Brunjes presented the consent calendar and noted that all consent items would be approved in one motion unless a Board member or member of the public requested discussion. No requests or objections were made. Sharmila Brunjes noted that Consent Item B had been removed from consideration.

The Board approved the following consent items:

A. Approval of the Board of Trustees meeting minutes from August 12, 2026

Sharmila Brunjes asked if there was any discussion.

Absent objection, it was resolved to approve the consent items. Motion carried.

7. ACTION ITEMS

7.1 Approval of Operations Contract – Spectrum Enterprise

Vini Montague presented a new three-year operations contract with Spectrum Enterprise for internet services at all three NLACRC office locations. The contract term is October 1, 2026 through September 30, 2029, for a total of $296,115. Vini Montague shared that NLACRC's IT Director assessed the available options and determined that remaining with Spectrum Enterprise, a Tier 1 service provider, was in NLACRC's best interest.

During discussion, Jeremy Sunderland and Jennifer Koster requested that staff attempt to negotiate removal of the $750 one-time upgrade fee. Vini Montague confirmed that the contracts team would attempt to negotiate the fee.

On a motion made by Jeremy Sunderland, seconded by Jennifer Koster, the Board approved the three-year Spectrum Enterprise contract for internet services in the amount of $296,115. Motion carried.

7.2 Approval of Investment Strategy for PRMT Trust; and

7.3 Approval of Investment Strategy for CalPERS UAL Trust

Vini Montague presented the annual review of the investment strategies for the Post-Retirement Medical Trust (PRMT) and CalPERS Unfunded Accrued Liability (UAL) Trust, which were reviewed and recommended by the PRMT Committee.

Vini Montague explained that the PRMT Trust has a longer-term investment outlook and currently maintains an allocation of approximately 60% stocks and 40% bonds. The higher stock allocation reflects the longer investment timeframe. The PRMT Committee recommended maintaining the existing investment strategy.

Vini Montague also reviewed the investment strategy for the CalPERS UAL Trust, which has a shorter investment timeframe due to annual distributions made toward NLACRC's unfunded liability obligation with CalPERS. The UAL Trust currently maintains an allocation of approximately 40% stocks and 60% bonds. The PRMT Committee recommended maintaining the existing investment strategy.

Sharmila Brunjes recognized the strong performance of the accounts and Vini Montague and the Finance team's management of the investments.

As both recommendations came from the PRMT Committee, no motion or second was required. The Board approved maintaining the existing investment strategies for the PRMT Trust and CalPERS UAL Trust. Motion carried.

7.4 Review and Approve Fiscal year 2026-2027 Committee Assignments

Sharmila Brunjes provided an overview of the Board's current committee structure, including the committee consolidations implemented during FY 2025–26. Sharmila Brunjes encouraged Trustees to evaluate the effectiveness of the current structure over the coming months, including meeting frequency and whether the combined committees are serving the Board effectively.

Sharmila Brunjes explained that the Bylaws require Board approval of committee assignments and committee chairs. Trustees may attend and participate in discussions at any committee meeting but may only vote on committees to which they are assigned. Committee assignment changes may be brought back to the Board for approval at future meetings.

On a motion made by Jennifer Koster, seconded by Kulwant Dosanjh, the Board approved the FY 2026–27 committee assignments and committee chairs. Motion carried.

7.5 Approval of Change in Community Relations Committee Name to Community and Government Relations Committee

Jeremy Sunderland presented the Community Relations Committee's recommendation to rename the committee following the consolidation of the Consumer Services Committee and Government and Community Relations Committee during the previous fiscal year. Jeremy Sunderland explained that the committee considered a new name that would better represent the responsibilities of the combined committee and encompass NLACRC's stakeholders and broader community.

The committee recommended changing the name to the Community and Government Relations Committee to better reflect the scope and purpose of the combined committee.

As the recommendation was brought forward by the committee, no second was required. The Board approved changing the committee's name to the Community and Government Relations Committee. Motion carried.

7.6 Approval of Board of Trustees Fiscal Year 2026-2027 Priorities

Sharmila Brunjes presented the proposed FY 2026–27 Board of Trustees priorities, which were developed through discussions at the June Board Retreat and subsequent Board trainings. Sharmila Brunjes explained that while the Strategic Plan guides the Regional Center, the Board priorities are intended to focus on the Board's specific governance and leadership responsibilities and how the Board can support the organization in achieving its goals.

The proposed Board priorities are to listen to consumer and family experiences and what they communicate about the Regional Center as a whole; guide the Strategic Plan through regular dialogue regarding progress, adjustments, and outcomes; advance the Regional Center through a strong and accountable partnership with the Executive Director; reinforce the policies, practices, conduct, and roles through which the Board governs; and build a Board that is equipped, well-integrated, and prepared for the work ahead. Sharmila Brunjes noted that strategies and desired outcomes associated with each priority are still being developed and will return to the Board separately.

During discussion, Lety Garcia expressed support for the priorities but emphasized the importance of establishing timelines, strategies, and accountability measures to ensure the priorities result in meaningful action. In particular, Lety Garcia discussed the priority of listening to consumer and family experiences and the importance of demonstrating how feedback received from individuals served and families will be translated into action. Lety Garcia initially suggested returning within 30 days with strategies and implementation goals and later suggested having at least a draft available by the November Board meeting.

Anna Hurst agreed with the importance of moving from priorities to actionable strategies and discussed the need for an intentional process that captures meaningful consumer and family feedback rather than focusing solely on quantitative outputs. Anna Hurst suggested considering a workgroup or utilizing the Community and Government Relations Committee to identify strategies for obtaining feedback from groups experiencing service barriers and other areas of concern.
Sharmila Brunjes clarified that the item before the Board was limited to approval of the priorities and that the specific process for developing strategies and outcomes did not need to be determined during the meeting. Sharmila Brunjes stated that the Board would organize

next steps following the meeting, which could include committee work, a workgroup, or Board volunteers, with the goal of developing strategies and outcomes for discussion or presentation at the November Board meeting.

On a motion made by George Alvarado, seconded by Jennifer Koster, the Board approved the FY 2026–27 Board of Trustees priorities. Motion carried.

ACTION: The Board will organize next steps to develop strategies and outcomes associated with the priorities, with the goal of bringing progress forward at the November Board meeting.

8. BOARD BUSINESS

8.1 Presentation on Clinical Services Department

Dr. Carlo DeAntonio, Director of Clinical Services, provided an overview of NLACRC's Clinical Services Department and the scope of clinical support provided to individuals served, families, case management, service providers, and Regional Center operations. Dr. Carlo DeAntonio explained that the department consists of three primary areas: Behavioral Services, Intake and Psychological Services, and Medical and Nursing Services, with additional dental consultation and coordination services.

Dr. Arpi Arabian provided an overview of Behavioral Services, which is staffed by Board Certified Behavior Analysts (BCBAs). Behavioral Services provides behavioral consultation and observation, reviews Applied Behavior Analysis (ABA) service requests, participates in interdisciplinary consultations for complex cases, reviews program designs, assists with due process testimony and complex care reviews, and provides clinical oversight and support for Enhanced Behavioral Support Homes (EBSH) and Community Crisis Homes (CCH). Dr. Arpi Arabian explained that EBSH and CCH homes serve individuals with highly complex care needs.

Dr. Arpi Arabian highlighted the volume and complexity of Behavioral Services' work. The team receives approximately 400 behavioral consultation and observation referrals and approximately 400 initial ABA service requests for minors each month. The team also completes approximately 65 interdisciplinary clinical consultations monthly for complex cases requiring multidisciplinary expertise. Behavioral Services currently participates in monitoring four operational EBSH and CCH homes, with four additional homes planned to open during the year, which would bring the total under oversight to eight.

Dr. Carlo DeAntonio presented an overview of Medical and Nursing Services on behalf of Dr. Margaret Swain. The nursing team provides more than 100 consultations each month and assists with determining medical levels of care for respite requests and out-of-home residential placements. The team also reviews approximately 60–70 medically related Special Incident Reports each month, completes approximately 50 ICF recertification forms monthly, assists with complex hospital discharge planning and post-discharge levels of care, and participates in required monitoring of EBSH and CCH homes. Dr. Carlo DeAntonio also noted that Clinical Services includes a registered dental hygienist who serves as a dental consultant.

Dr. Sandy Fischer, Intake and Psychological Manager, reviewed the department's role in determining eligibility for Regional Center services. Intake and Psychological Services evaluates children transitioning from the Early Start program as well as individuals over age three applying for Regional Center services. Dr. Sandy Fischer reported that the team conducts approximately 470 evaluations each month for children exiting Early Start, approximately 450 evaluations for individuals over age three, and approximately 521 psychological assessments monthly.

Dr. Sandy Fischer explained that psychological assessments are used to determine whether an applicant has a qualifying developmental disability. Licensed and supervised psychologists conduct the assessments, and a multidisciplinary clinical team meets daily to review cases and make eligibility determinations. Individuals determined eligible are transitioned to case management. When an individual is determined not eligible, the team works to identify appropriate community resources, including medical, mental health, and school-based services, and individuals retain due process rights regarding eligibility determinations.

Dr. Carlo DeAntonio highlighted the significant volume of individuals entering NLACRC services and the effect of continued growth on the organization. Dr. Carlo DeAntonio noted that the volume of Early Start and over-age-three intake referrals can result in the addition of multiple new caseloads each month, creating an ongoing need for additional case management capacity as NLACRC continues to grow.

In response to a question from Lety Garcia regarding staffing, Dr. Carlo DeAntonio reported that Clinical Services has approximately 40–45 staff, including approximately 28 staff within Intake, six nursing staff, and six Behavioral Services staff, along with administrative and scheduling support. Dr. Carlo DeAntonio stated that the department is fully staffed under its current staffing plan, with one intake position being actively recruited, but noted that additional positions may be necessary to accommodate continued growth.

In response to questions from Laura Monge, Dr. Carlo DeAntonio discussed assistance available to families needing conservatorship or other benefit-related documentation. Dr. Carlo DeAntonio explained that families are generally directed first to the individual's treating physician or provider; however, Clinical Services may assist on a case-by-case basis when the treating provider is unavailable or unable to complete the required documentation. Some conservatorship documentation may require a new psychological evaluation before the forms can be completed.

Dr. Carlo DeAntonio also reviewed dental coordination services available to individuals served. NLACRC's dental coordinator, Lisa Butters, assists families with identifying appropriate dental resources, including providers capable of providing treatment under sedation or anesthesia when necessary. Dr. Carlo DeAntonio noted that some specialized dental services can be difficult to locate due to limitations in the available provider network. Families needing assistance may contact their case manager for a referral to the dental coordinator to help identify an appropriate community resource.

No additional questions were raised.

8.2 <u>5-Minute Fiscal Brief: Purchase of Services Expenditure Projection (PEP)</u>

Vini Montague presented a five-minute fiscal brief on the Purchase of Services Expenditure Projection (PEP) Report and explained how the report is used by NLACRC and the Department of Developmental Services (DDS). The PEP is required under NLACRC's contract with DDS and identifies actual and projected Purchase of Services (POS) expenditures for the fiscal year.

Vini Montague explained that the PEP estimates NLACRC's total POS expenditures for the fiscal year and requires analysis of several factors that can affect projected spending. These include actual year-to-date expenditures, anticipated late billing, projected caseload growth and the expenditures necessary to support that growth, changes in service utilization compared with prior years, provider rate changes, health and safety rates, minimum wage increases, new vendor programs, program closures, legislative changes through trailer bills, and other changes affecting services and expenditures. Vini Montague noted that although

the report may appear straightforward, developing an accurate projection is a complex process.

Vini Montague explained that NLACRC compares the PEP projection against its DDS allocation to assess whether the organization is projected to have sufficient funding for the fiscal year and whether a surplus or deficit is anticipated. The PEP also assists NLACRC in assessing cash sufficiency because the cash advance received from DDS is based on the allocation. Understanding the relationship between projected expenditures and the allocation helps NLACRC anticipate its cash needs throughout the year.

Vini Montague further explained that DDS uses PEP reports submitted by all 21 regional centers to evaluate funding needs across the statewide regional center system. DDS uses the information to assess overall funding sufficiency as well as the adequacy of individual regional center allocations. Depending on expenditure projections and the timing within the fiscal year, DDS may adjust allocations between regional centers when one is projecting a surplus and another is projecting a deficit. The reports also assist DDS in estimating funding requirements for future fiscal years.

Vini Montague demonstrated how the results of the PEP are reflected in NLACRC's financial statements. Within the POS section, the financial statements identify NLACRC's allocation and PEP projection, allowing the Board to see whether current projections indicate an anticipated surplus or deficit.

In response to a question from Lety Garcia regarding the reporting schedule, Vini Montague clarified that under the standard schedule, the first PEP report for a fiscal year is due December 10, with reports generally submitted monthly through September 10 of the following year. Vini Montague noted that DDS has waived the PEP reporting requirement for certain months due to the significant workload associated with rate implementation.

Lety Garcia also asked about the factors contributing to the approximately $11 million projected POS shortfall reflected in the financial information. Vini Montague explained that the projected deficit results from a combination of factors. DDS typically does not provide 100% of projected funding needs in the initial allocations and may hold back a portion of funding while monitoring expenditure trends throughout the fiscal year. DDS may subsequently provide additional allocations, and in some years may issue a third allocation based on demonstrated needs.

Vini Montague also identified rate implementation as a significant factor affecting the current projection. Rate implementation has made it more challenging for both regional centers and DDS to accurately forecast expenditures. In particular, FY 2025–26 included the movement or "crosswalk" of expenditures from one service code to another, which further complicated expenditure projections.

9. EXECUTIVE DIRECTOR'S REPORT

Angela Pao-Johnson provided updates on NLACRC initiatives, service delivery, staffing and caseloads, legislative developments, compliance activities, and community engagement efforts.

Angela Pao-Johnson recognized Javier Zepeda, NLACRC's LGBTQ+ Specialist, for being invited to present at the ARCA Cultural Specialist Meeting. Javier Zepeda shared NLACRC's work and experience supporting and engaging diverse communities with Cultural Specialists from regional centers statewide. Angela Pao-Johnson also highlighted the LGBTQ+ support group facilitated by Javier Zepeda and encouraged individuals, families, and community members who may benefit from the group to participate. Angela Pao-Johnson noted that the

recognition reflects NLACRC's efforts toward meaningful engagement with its diverse community.

Angela Pao-Johnson reported that Case Management finalized a new Self-Determination Program (SDP) Manual for individuals served and their families. The manual is intended to provide information and guidance regarding the Self-Determination Program and is currently being translated into Spanish. NLACRC plans to release the English and Spanish versions together once the translation is completed.

During discussion, Lety Garcia asked about the anticipated release date and distribution of the SDP Manual. Evelyn McOmie reported that the manual had been sent for translation approximately two weeks earlier and estimated that the translation could take approximately six weeks due to the size of the document. Evelyn McOmie stated that staff would obtain a more specific estimated completion date and provide that information to the Board. The manual is currently in digital format, and NLACRC will work with Public Information to develop a distribution plan. Distribution options may include online access, QR codes linking directly to the manual, and hard copies for individuals who need them.

Angela Pao-Johnson announced that NLACRC will be joining the LANES Medical Information Exchange, a secure health information exchange that allows participating healthcare organizations to share and access patient medical information. Angela Pao-Johnson explained that obtaining medical information can create delays during the intake process and that participation in LANES is expected to improve access to necessary records and reduce the time spent waiting for medical information.

Angela Pao-Johnson reported continued progress in reducing Adult and Transition caseloads. Santa Clarita Valley Adult and Transition units are currently in the mid-60s, bringing the office closer to statutory caseload requirements. Adult and Transition caseloads in the Antelope Valley and San Fernando Valley are generally in the mid-70s, with the exception of the San Fernando Valley Transition unit, which has increased into the 80s. Angela Pao-Johnson noted that NLACRC continues to hire staff to address caseload needs.

Angela Pao-Johnson provided an update regarding Senate Bill 163 and potential changes affecting the Consumer Advisory Committee and Board composition. Under the new requirements described during the presentation, the Board will appoint an advisory group composed of individuals with lived experience with intellectual and developmental disabilities. The advisory group will select two of its members and one family member or legal guardian of a member to serve on the Board. At least one of the designees must also serve as a voting member of the Board committee responsible for recruitment.

Angela Pao-Johnson discussed concerns regarding how the new structure could affect the independence of consumer representation. Because the Board would appoint the advisory group that subsequently selects individuals to serve on the Board, Angela Pao-Johnson noted concerns regarding potential Board influence over the composition of the group. Angela Pao-Johnson explained that NLACRC's current Consumer Advisory Committee intentionally maintains an open membership model in which an individual automatically becomes a member after attending five meetings, allowing individuals served to participate without the Board determining who may hold membership in the committee. Angela Pao-Johnson reported that the Consumer Advisory Committee would like to preserve this structure.

Angela Pao-Johnson also discussed how the new requirements interact with existing Board composition requirements, including requirements related to representation of individuals receiving Regional Center services and family members. Additional concerns were raised regarding the requirement for a family member or legal guardian to be included among the advisory group's Board designees and whether this could unintentionally suggest that

individuals served require another person to represent their interests. Angela Pao-Johnson noted that regional centers have until January 1, 2028 to comply and that ARCA continues advocacy efforts related to implementation. Angela Pao-Johnson recommended that NLACRC remain engaged, seek clarification regarding implementation, and retain its current Consumer Advisory Committee structure while awaiting further direction.

Angela Pao-Johnson reported that NLACRC currently has 985 filled positions and continues to make progress in recruitment. Angela Pao-Johnson reported eight new hires at the beginning of the September hiring cycle and five confirmed hires for the next cycle, with additional hires anticipated. During discussion, Lety Garcia recognized NLACRC's progress in reducing vacancies and noted that the organization had previously averaged significantly more open positions. Lety Garcia acknowledged Human Resources, staff training, and other staff involved in recruitment for their efforts. Angela Pao-Johnson stated that the recognition would be shared with Human Resources.

Angela Pao-Johnson reported that NLACRC currently serves 43,371 individuals. During August, 573 Early Start intakes and 554 intakes for individuals over age three were opened. These figures represent newly opened intakes during August and do not include cases that remained in the intake process from previous months. Angela Pao-Johnson noted that the intake volume reflects the significant workload discussed earlier during the Clinical Services presentation.

Angela Pao-Johnson also provided an update on compliance activities. NLACRC completed 132 residential visits, including 36 unannounced in-person visits. Three corrective action plans were issued, and no plans of improvement were issued for non-licensed providers during the reporting period.

Angela Pao-Johnson highlighted the Vietnamese Lotus Village gathering, which was developed in response to feedback received from Vietnamese families during previous focus groups. The gathering was designed to provide families with an opportunity to connect with one another while celebrating culture and building community. NLACRC also provided information regarding Regional Center services and generic community resources available to families. Twelve families attended the gathering and participated in the potluck-style event. Angela Pao-Johnson noted that NLACRC does not currently have a Vietnamese support group and expressed interest in the possibility of continued engagement opportunities for the community.

Angela Pao-Johnson concluded the report by highlighting upcoming meetings and opportunities for engagement, including the Self-Determination Local Advisory Committee meeting on September 17, Disability Rights California's Board meeting on September 19, and the State Council on Developmental Disabilities Council meeting on September 29.

10. PUBLIC INPUT & COMMENTS

Sharmila Brunjes opened public input and allotted approximately 30–35 minutes for comments, with each speaker provided up to three minutes.

Diem Johnson expressed concern about delays in processing a recreational service request, reporting that approval took 43 days. Diem Johnson emphasized the need for timely decisions, clear communication, and accountability.

Fernando Gomez, Co-Founder of the Integrated Community Collaborative (ICC), expressed concern about increased issues within NLACRC's service area. Fernando Gomez supported the Board's consideration of a Community and Government Relations Committee and recommended establishing a community liaison to improve communication. Fernando Gomez

raised concerns about meeting chat restrictions and emphasized the importance of open community participation. Fernando Gomez indicated plans to contact Executive Director Angela Pao-Johnson to address concerns. Sharmila Brunjes clarified that the meeting chat was closed and a participant was removed due to a violation of the Code of Conduct shared in the chat.

Elizabeth Gomez, Integrated Community Collaborative (ICC), shared concerns reported by families regarding service and reimbursement delays, unanswered communications, and lengthy SDP transitions. Elizabeth Gomez encouraged clearer SDP timelines and more open opportunities for community feedback.

Manuela Herrera raised concerns regarding the accuracy of interpretation services, the lack of regional center services for the speaker's son for two years, unanswered communications, and limited opportunities for parent participation in Board meetings.

Josefina Romo, Integrated Community Collaborative (ICC), expressed concern about restrictions on meeting microphones and chat, questioning how effective communication could occur. Josefina Romo also raised concerns about delays and barriers in transitioning to the Self-Determination Program despite beginning the process months in advance. Josefina Romo emphasized that regional center services should reflect participants' individual preferences rather than decisions made by service coordinators.

Janeth Vargas discussed difficulty reaching service coordinators and extended waits for services. Janeth Vargas also expressed concern regarding lengthy SDP transition timelines and requested greater attention to these delays.

Mary Angela Flores expressed concern about delays in service approvals, previously approved services being questioned without clear justification or explanation of policy changes, and recurring communication issues. Mary Angela Flores stated that these delays can effectively result in denial of services without formal notification. Mary Angela Flores requested that the Committee review the causes of delays, the justification for questioning previously approved services, and measures to ensure timely communication and approvals. Mary Angela Flores emphasized the need for a formal, transparent, and objective review.

Rosa Crespo expressed concern about service delays, the discontinuation of a service for her son, and difficulty obtaining responses by telephone and email. Rosa Crespo reported waiting since July for a response regarding the Self-Determination Program and urged NLACRC to address families' concerns.

Sharmila Brunjes noted that comments submitted through the meeting chat could be translated and reviewed following the meeting.

Gabriela Alatorre expressed concern about administrative delays, unanswered communications, and service disruptions affecting individuals' safety and well-being and creating financial burdens for families. Gabriela Alatorre also raised concerns about delays in the Self-Determination Program, including vendor changes and annual transitions, and urged the Board to address these issues.

Karla expressed concern about confusion surrounding the Self-Determination Program transition process, including unfamiliar folders and unanswered questions. Karla also expressed support for other parents who raised similar concerns.

Christina Canarella, former Board member, expressed concern about ongoing service coordination issues, barriers to accessing services, and delays in transitioning to the Self-Determination Program. Christina Canarella reported that DDS found violations of her son's

rights following a Section 4731 complaint and that service coordination concerns continued following corrective action. Christina Canarella also raised concerns about delayed services, unanswered communications, and being asked to agree to her son's day program termination as a condition of receiving music therapy.

Yolanda Gracia echoed concerns about service delays and barriers affecting families, including a pending service request. Yolanda Gracia encouraged NLACRC to identify ways to reduce delays, simplify processes, and prevent disruptions to services.

Laura Olide expressed concern about longstanding, unresolved parent complaints, restrictions on the meeting chat, and the lack of responses to requests for assistance. Laura Olide urged the Board to listen to parents, provide meaningful responses and solutions, and recognize the importance of parents advocating for children who may be unable to express their needs independently.

Sharmila Brunjes concluded public input after the allotted time and encouraged individuals with additional comments to submit them by email or participate at a future meeting.

With no additional public comments, the Board proceeded to closed session.

11. CLOSED SESSION

Sharmila Brunjes announced that the Board would move into closed session to discuss personnel and the Executive Director Performance Evaluation.

Absent objection the Board moved into closed session at 8:05 p.m.

A motion was made by the Negotiating Committee. An amendment was made by Juan Hernandez, seconded by Lety Garcia. An amendment to the amendment was made by Sharmila, seconded by Anna Hurst, and the motion was carried regarding the topic on personnel.

No other votes were made.

Absent objection, the Board left closed session at 9:19 p.m.

12. SDLVAC LIAISON REPORT AND SELF-DETERMINATION (SDP) IMPLEMENTATION REPORT

Jennifer Koster provided an update following attendance at the Self-Determination Local Advisory Committee meeting. Jennifer Koster reported that participants and families raised concerns similar to those shared during public comment, including delayed responses, lengthy transitions into the Self-Determination Program (SDP), and delays during various stages of the process.

Jennifer Koster noted that concerns involved coordination with Client Services Coordinators, supervisors, and staff overseeing SDP. Sharmila Brunjes noted that Jennifer Koster's more comprehensive written report was included in the Board packet. Jennifer Koster also requested that SDP-related concerns raised during public comment be reflected in the meeting minutes.

Evelyn McOmie reported that as of September 1, 2026, NLACRC had 958 certified budgets, 896 approved plans, 30 spending plans in progress, and 777 completed Person-Centered Plans. The co-employer model remains the most commonly used FMS model, and SDP transitions continue to generally trend upward.

Evelyn McOmie concluded with reminders regarding SDP orientations, the upcoming Self-Determination Support Group, and the September 17 Self-Determination Local Advisory Committee meeting.

13. ITEMS 13-20

The Board received the following committee reports for information:

- Association of Regional Center Agencies presented by Jeremy Sunderland.

  Jeremy Sunderland reported that ARCA's upcoming priorities include supporting DSP workforce training and retention, developing benefits counseling services, and pursuing adequate funding under the regional center allocation methodology. Jeremy Sunderland also encouraged Trustees to attend the upcoming ARCA Academy for training and networking with regional center Board members statewide.

  The next ARCA meeting is scheduled for October 15, 2026, in San Diego.

- Consumer Advisory Committee presented by Juan Hernandez

  Jennifer Koster provided an update in Juan Hernandez's absence and reported that the committee held elections and approved two co-chair positions. The next CAC meeting is scheduled for November 5 at 5:00 p.m.

- Executive Finance Committee presented by Sharmila Brunjes and Anna Hurst.

  Sharmila Brunjes reported that the Executive Finance Committee completed its orientation and reviewed insurance, audit requirements and updates, financial reports, whistleblower logs, Human Resources, program closures, and conflict-of-interest matters. The next EFC meeting is scheduled for September 24 at 5:00 p.m.

- Community Relations Committee presented by Jeremy Sunderland and Cathy Blin.

  Jeremy Sunderland and Cathy Blin reported that the committee completed its orientation, reviewed its priorities and meeting schedule, and received regular departmental reports. The Legislative Town Hall is scheduled for November 17, and the committee's next meeting is November 18.

- Nominating Committee presented by Curtis Wang.

  Evelyn McOmie reported that the committee tabled the co-chair election until its next meeting to allow additional time for interested members to come forward. The committee also reviewed Board recruitment efforts and interest forms received to date. The next meeting is scheduled for November 4.

- Post-Retirement Medical Trust Committee presented by Sharmila Brunjes.

  Sharmila Brunjes reported that the committee reviewed the investment strategies addressed earlier under action items and received an economic and market update from its investment advisors. The next PRMT Committee meeting is scheduled for November 19 at 5:00 p.m.

- Vendor Advisory Committee presented by Tal Segalovitch.

  Sharmila Brunjes reported on behalf of Tal Segalovitch that the VAC welcomed Lea Munoz and Alona Yorkshire, bringing membership to 15 vendors. The committee also received an update from accounting regarding the ticketing system used to assist vendors with authorization and billing matters.

The Board acknowledged the committee and liaison reports and proceeded to the next agenda item.

14. OLD BUSINESS/NEW BUSINESS

Sharmila Brunjes reminded Trustees to review the attendance records, committee assignments, and meeting calendar included in the Board packet.

No additional old or new business was presented.

15. ANNOUNCEMENTS / INFORMATION

Evelyn McOmie announced the upcoming Santa Clarita Family Expo and dance for individuals served.

16. NEXT MEETING

The next Board meeting will be held Wednesday, November 4, 2026, at 6:00 p.m. as a hybrid meeting from the Santa Clarita Valley office and Zoom.

17. ADJOURNMENT

Absent objection the meeting was adjourned at 9:38 p.m.

DISCLAIMER

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

DRAFT

North Los Angeles County Regional Center

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

Executive Finance Committee Recommendation to the Board

The North Los Angeles County Regional Center, Inc. ("NLACRC") Executive Finance Committee is recommending the Board of Trustees to authorize the Executive Director, Chief Financial Officer or Deputy Director to execute insurance binders and purchase workers compensation insurance for the period of January 1, 2027 through December 31, 2027.

_____ September 24, 2026

Sharmila Brunjes, Board President Date

Board Resolution for Workers Compensation Insurance

The following resolution was adopted at a meeting of The North Los Angeles County Regional Center, Inc. Board of Trustees held on the 4th day of November 2026, in accordance with the laws and by-laws of the above organization.

RESOLVED that the Board of Trustees of the North Los Angeles County Regional Center authorizes the Executive Director, Chief Financial Officer or Deputy Director to execute insurance binders and purchase workers compensation insurance for the period of January 1, 2027 through December 1, 2027.

CERTIFICATION BY SECRETARY: I certify that (1) I am the Secretary of the North Los Angeles County Regional Center; (2) the foregoing Resolution is a complete and accurate copy of the Resolution duly adopted by the North Los Angeles County Regional Center Board of Trustees; and (3) the Resolution is in full force and has not been revoked or changed in any way.

_____ November 4, 2026

Curtis Wang, Board Secretary Date

CONTRACT SUMMARY AND BOARD RESOLUTION

NO.	DESCRIPTION	CONTRACT SUMMARY
1.	**Contract Overview: (New or Amendment) (POS or OPS)**	Operations – New Contract
2.	**Name of Vendor or Service Provider**	Sheridan Group
3.	**The Purpose of the Contract**	San Fernando Valley Office Expansion – Phase 1 NLACRC extended its San Fernando Valley ("SFV") office lease, which includes expansion to the 6th and 10th floors and reconfiguration of some existing space. The contract is for the purchase and installation of cubicles and furniture during Phase 1 of the SFV Expansion Project.
4.	**Contract Term(s)**	September 24, 2026 to December 31, 2027
5.	**Total Amount of the Contracts**	Maximum of $2,492,553.10
6.	**Rate of Payment or Payment Amount**	50% deposit due upon contract execution 40% progress payment 10% balance due after completion
7.	**Method or Process Utilized to Award the Contract**	NLACRC obtained three competitive bids and selected Sheridan Group based on factors including pricing and quality. Sheridan Group is NLACRC's existing furniture vendor.
8.	**Method or Process Utilized to Establish the Rate or the Payment Amount**	Usual & Customary Rate
9.	**Exceptional Conditions or Terms: Yes/No** **If yes, provide explanation**	Under the terms of the SFV lease amendment, the landlord will provide NLACRC with a tenant improvement allowance in an amount of up to $4,839,143.00 for costs that include furniture, fixtures, and/or equipment.

North Los Angeles County Regional Center
Main 818-778-1900 • Fax 818-756-6140 #9200 Oakdale Avenue #100, Chatsworth, CA 91311 #www.nlacrc.org

CONTRACT SUMMARY AND BOARD RESOLUTION

The North Los Angeles County Regional Center ("NLACRC") Executive Finance Committee reviewed and discussed the Sales Agreement between NLACRC and **Sheridan Group**.

RESOLVED THAT in compliance with NLACRC's Board of Trustees Contract Policy, on September 24, 2026, the **Sheridan Group** Sales Agreement ("Agreement") was reviewed and discussed by the Executive Finance Committee of the Board of Trustees. The Executive Finance Committee, acting pursuant to its authority and on behalf of the Board of Trustees, hereby approves the Agreement and authorizes and designates any Officer of NLACRC to execute and deliver the Agreement on behalf of NLACRC, in such form as NLACRC's legal counsel may advise, and on such further terms and conditions as such Officer may approve. The final terms of the Agreement shall be conclusively evidenced by the execution of the Agreement by such Officer. For purposes of this authorization, an "Officer" means NLACRC's Executive Director, Deputy Director, Chief Financial Officer, and no one else.

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

_____

Curtis Wang, Board Secretary

CONTRACT SUMMARY AND BOARD RESOLUTION

NO.	DESCRIPTION	CONTRACT SUMMARY
1.	**Contract Overview: (New or Amendment) (POS or OPS)**	Operations – New Contracts
2.	**Name of Vendor or Service Provider**	Semetra
3.	**The Purpose of the Contract**	San Fernando Valley Office Expansion – Phase 1 NLACRC extended its San Fernando Valley ("SFV") office lease, which includes expansion to the 6th and 10th floors and reconfiguration of some existing space. The contract is for design, purchase, installation and integration of audio visual equipment and structured cabling in Phase 1 of the SFV expansion project.
4.	**Contract Term(s)**	September 24, 2026 to December 31, 2027
5.	**Total Amount of the Contracts**	Maximum of $1,033,374.07 in three separate contracts as follows: 1) $43,821.00 for design 2) $636,025.65 for audio visual integration 3) $203,527.42 for IT structured cabling 4) $150,000.00 maximum contingency for contract amendments in the event of change orders
6.	**Rate of Payment or Payment Amount**	Equipment, sales tax & freight due upon contract execution. Labor billed monthly based on progress.
7.	**Method or Process Utilized to Award the Contract**	NLACRC obtained competitive bids and selected Semetra. Semetra is an existing vendor.
8.	**Method or Process Utilized to Establish the Rate or the Payment Amount**	Usual & Customary Rate
9.	**Exceptional Conditions or Terms: Yes/No** **If yes, provide explanation**	Under the terms of the SFV lease amendment, the landlord will provide NLACRC with a tenant improvement allowance in an amount of up to $4,839,143.00 for costs that include furniture, fixtures, and/or equipment.

North Los Angeles County Regional Center
Main 818-778-1900 • Fax 818-756-6140 #9200 Oakdale Avenue #100, Chatsworth, CA 91311 #www.nlacrc.org

CONTRACT SUMMARY AND BOARD RESOLUTION

The North Los Angeles County Regional Center ("NLACRC") Executive Finance Committee reviewed and discussed the Contract Agreements between NLACRC and **Semetra**.

RESOLVED THAT in compliance with NLACRC's Board of Trustees Contract Policy, on September 24, 2026, the **Semetra** Contract Agreements ("Agreements") were reviewed and discussed by the Executive Finance Committee of the Board of Trustees. The Executive Finance Committee, acting pursuant to its authority and on behalf of the Board of Trustees, hereby approves the Agreements and authorizes and designates any Officer of NLACRC to execute and deliver the Agreements on behalf of NLACRC, in such form as NLACRC's legal counsel may advise, and on such further terms and conditions as such Officer may approve. The final terms of the Agreements shall be conclusively evidenced by the execution of the Agreements by such Officer. For purposes of this authorization, an "Officer" means NLACRC's Executive Director, Deputy Director, Chief Financial Officer, and no one else.

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

_____

Curtis Wang, Board Secretary

CONTRACT SUMMARY AND BOARD RESOLUTION

NO.	DESCRIPTION	CONTRACT SUMMARY
1.	**Contract Overview: (New or Amendment) (POS or OPS)**	Operations – New Contract
2.	**Name of Vendor or Service Provider**	Photo-Scan of Los Angeles ("PSLA")
3.	**The Purpose of the Contract**	San Fernando Valley Office Expansion – Phase 1 NLACRC extended its San Fernando Valley ("SFV") office lease, which includes expansion to the 6th and 10th floors and reconfiguration of some existing space. The contract is for purchase and installation of access control and video surveillance equipment in Phase 1 of the SFV expansion project.
4.	**Contract Term(s)**	September 24, 2026 to December 31, 2027
5.	**Total Amount of the Contracts**	Maximum of $601,566.88 The maximum amount is for an initial contract of up to $551,566.88 plus a contingency of up to $50,000.00 for contract amendments in the event of change orders.
6.	**Rate of Payment or Payment Amount**	20% deposit due upon contract execution 80% balance invoiced upon final completion, due within 30 days
7.	**Method or Process Utilized to Award the Contract**	NLACRC obtained competitive bids and selected PSLA. PSLA is an existing vendor.
8.	**Method or Process Utilized to Establish the Rate or the Payment Amount**	Usual & Customary Rate
9.	**Exceptional Conditions or Terms: Yes/No** **If yes, provide explanation**	Under the terms of the SFV lease amendment, the landlord will provide NLACRC with a tenant improvement allowance in an amount of up to $4,839,143.00 for costs that include furniture, fixtures, and/or equipment.

North Los Angeles County Regional Center
Main 818-778-1900 • Fax 818-756-6140 #9200 Oakdale Avenue #100, Chatsworth, CA 91311 #www.nlacrc.org

CONTRACT SUMMARY AND BOARD RESOLUTION

The North Los Angeles County Regional Center ("NLACRC") Executive Finance Committee reviewed and discussed the Contract Agreement between NLACRC and **Photo-Scan of Los Angeles**.

RESOLVED THAT in compliance with NLACRC's Board of Trustees Contract Policy, on September 24, 2026, the **Photo-Scan of Los Angeles** Contract Agreement ("Agreement") was reviewed and discussed by the Executive Finance Committee of the Board of Trustees. The Executive Finance Committee, acting pursuant to its authority and on behalf of the Board of Trustees, hereby approves the Agreement and authorizes and designates any Officer of NLACRC to execute and deliver the Agreement on behalf of NLACRC, in such form as NLACRC's legal counsel may advise, and on such further terms and conditions as such Officer may approve. The final terms of the Agreement shall be conclusively evidenced by the execution of the Agreement by such Officer. For purposes of this authorization, an "Officer" means NLACRC's Executive Director, Deputy Director, Chief Financial Officer, and no one else.

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

_____

Curtis Wang, Board Secretary

Transparency and Public Information Policy

I. General

The purpose of the Transparency and Public Information Policy is to establish guidelines for timely public access to information and records in accordance with Welfare and Institutions Code (WIC) Sections 4629.5, 4640.6(l), 4639, 4639.5, 4519.5, 4519.6, 4571(h), 4572, 4622(g)(3), 4652.5(d)(2) the Internal Revenue Service (IRS), and the state's contract with the regional center Article 1, Section 10, Transparency and Access to Public Information and Article VII, Section 6, Data Compilation.

II. Departments Affected

This policy applies to all NLACRC employees in the San Fernando Valley, Antelope Valley, and Santa Clarita Valley offices.

III. Responsibility

The center's publications information officer shall have the overall responsibility to monitor compliance of the Transparency and Public Information Policy. All NLACRC employees must ensure that they comply with the policy as outlined below.

IV. Policy

A. To promote transparency and access to public information [WIC 4629.5], NLACRC shall include on its Internet website the following information:

1. Annual independent audits [WIC 4629.5(b)(1)]. NLACRC will maintain the two most current annual independent audit reports on its website.

2. Biennial fiscal audits conducted by the Department of Developmental Services (DDS) [WIC 4629.5(b)(2)]. NLACRC will maintain the two most current biennial fiscal audit reports conducted by DDS on its website.

3. Current salary schedule for all personnel classifications [WIC 4629.5(b)(3) and (13)]. NLACRC will maintain the most current personnel classification report on its website.

4. Prior fiscal year expenditures from the regional center operations budget for all administrative services, including managerial, consultant, accounting, personnel, labor relations, and legal services, whether procured under a written contract or otherwise [WIC 4629.5(b)(3) and (13)]. NLACRC will maintain the most current report of administrative expenditures on its website.

5. The annual performance contract and year-end performance contract entered into with the department [WIC 4629.5(b)(9)]. NLACRC will maintain the most current annual performance contract and year-end performance contract on its website.

6. The biennial Home and Community-Based Services (HCBS) waiver program review conducted by DDS and the state Department of Health Care Services [WIC 4629.5(b)(10)]. NLACRC will maintain the two most current biennial HCBS waiver program review on its website.

7. Purchase of Service policies and any other policies, guidelines, or regional center-developed assessment tools used to determine the transportation, personal assistant, independent living services, or supported living services of a consumer [WIC 4629.5(b)(5) & WIC 4434(d)].

8. The names, type of service, and contact information of all purchase of service vendors, except consumers or family members of consumers [WIC 4629.5(b)(6)].

9. Contract awards, including the organization or entity awarded the contract, and the amount and purpose of the award [WIC 4629.5(b)(4)]. NLACRC will maintain the contract award information on its website for open contract years only.

10. Bylaws of the regional center governing board [WIC 4629.5(b)(8)].

11. Board meeting agendas and approved minutes of open meetings of the board and all committees of the board [WIC 4629.5(b)(7)]. NLACRC will maintain thirteen months of information on its website.

12. The board approved Transparency and Public Information Policy [WIC 4629.5(b)(11)].

13. The board approved Conflict of Interest Policy [WIC 4629.5(b)(12)].

14. The board approved Request for Proposal Policy [WIC 4648.11 and

Article 2, Section 2(b)] of the state's contract with NLACRC.

15. The board approved Service Provider Attendance File Policy.

16. The board approved Whistleblower Policy (Article 1, Section 9 of the state's contract with NLACRC).

17. The board approved Zero Tolerance Policy for Consumer Abuse or Neglect (Article 1, Section 8 of the state's contract with NLACRC).

18. Notice of privacy practices.

19. Purchase of Services Expenditure Data [WIC 4519.5, 4519.6, and Article VII, Section 6]. NLACRC shall maintain all previous years' purchase of services expenditure data on its website.

20. Report by fiscal year of the number of instances when the written copy of the individual program plan was provided at the request of the consumer and, when appropriate, his or her parents, legal guardian or conservator, or authorized representative, in a language other than a threshold language if that written copy was provided more than 60 days after request [WIC, 4519.5(a)(6)].

21. The salaries, wages, and employee benefits for all managerial positions for which the primary purpose is the administrative management of the regional center including, but not limited to, directors and chief financial officers. [WIC 4629.5(b)(15)].

22. The ABX2-1 funding increases reports submitted to the Department of Developmental Services regarding regional center staff wages, salaries, benefits, staff turnover, administrative expenditures, and methodology used to allocate funding increases [WIC 4629.5(b)(13) & WIC 4639.5(d)].

23. Publish a dashboard and post a hyperlink to DDS's dashboard on DDS's website. The dashboard shall include, but not be limited to, all of the following metrics [WIC 4572 and 4652.5(d)(2)]:

a. Recognized quality and access measures
b. Measures to indicate the movement toward compliance with the federal Home and Community-Based Services
c. Measures to evaluate the changes in the number of consumers who work in competitive employment
d. The number of complaints referred to DDS pursuant to subdivision 4731, for every 1,000 consumers served, by each regional center
e. The number of administrative appeals held, separated by eligibility and service issues, for individuals ages three and over, for every 1,000 consumers served by each regional center
f. Vendor compliance with audit requirements and opinions resulting from audit reports

24. Post hyperlinks to the protection and advocacy agency and the clients' rights advocate [WIC 4519.2 (d)].

25. A hyperlink to the page on DDS's website that includes both a list of services purchased by regional centers or provided directly to consumers by regional centers and a brief description of those services [WIC 4629.5 (d) and (b)(14)].

26. The data collected from and the findings of the quality assurance instrument utilized to assess the comparative performance of the regional center and identify improvements in services for consumers, including but not limited to case management services. All regional center-specific reports generated by DDS shall be made publicly available on the regional center's website in a machine-readable format. The report published shall include the following: [WIC 4571 (h)]

a. Copies of the presentation.
b. Minutes from the public meeting and attendee comments.
c. Regional center recommendations and plans to use the information to address regional center priorities, strategic direction, or both.

27. The training and support provided to board members (WIC 4622(f)(6).

B. To promote timely public access to information, NLACRC shall provide timely access to information that includes but is not limited to:

1. Service provider rates [WIC 4629.5(a)].

2. Documentation related to establishment of negotiated rates for service providers [WIC 4629.5(a)].

3. Department of the Treasury IRS Return of Organization Exempt From Income Tax, Form 990, for the past 3 years [WIC 4629.5(a)] and the IRS.

4. Management letter issued to NLACRC by NLACRC's independent audit firm [WIC 4639].

5. Employment contracts with regional center staff or contractors [WIC 4640.6(l)(1)].

6. Articles of Incorporation (IRS).

7. IRS determination letter that established NLACRC as a non-profit corporation (IRS).

8. Tax Exemption Application (if organization was formed after July 1, 1987) (IRS).

v. Procedure

A. Public records maintained by NLACRC are available for inspection by members of the public during NLACRC's regular business hours or, where applicable, through records made available on NLACRC's website at www.nlacrc.org. For additional information regarding access to records, please refer to NLACRC's California Public Records Act[1] ("CPRA") policy [Gov. Code § 7920.000 *et seq.*].

B. NLACRC shall maintain the most current document or records required by WIC, Section 4629.5 on its website. All prior documents and records previously posted on its website for the past 7 years [WIC Section 4629.5] will be available upon request.

[1] Gov. Code § 7920.000 et seq.

C. NLACRC shall not disclose any records or information which is exempt from disclosure by statute or regulation or the disclosure of records or information violates WIC, Section 4514.

D. NLACRC shall not disclose to a member of the public the Social Security number reported in the employment contract between regional center and an employee or contractor [WIC 4640.6(l)(2)]. Therefore, Social Security numbers shall be redacted by NLACRC personnel from all employment contracts prior to inspection by the public.

E. NLACRC shall not disclose information that is confidential or exempt from disclosure under applicable law. This includes confidential information about consumers or family members of consumers.

F. Requests by the public for inspection of records shall not interfere with the ordinary course business of NLACRC.

G. The operational functions of NLACRC shall not be suspended to permit public inspection of records during periods in which such records are reasonably required by NLACRC personnel in the performance of their duties.

H. If a request involves a large volume of records requiring review, NLACRC will work with the requester to establish a mutually agreeable time for inspection of the records.

Board of Trustees
CODE OF CONDUCT

I, _____, recognize the important roles and responsibilities that I am undertaking in serving as a member of the Board of Trustees of the NLACRC. I hereby pledge to carry out in a trustworthy and diligent manner the duties and obligations in my role as Board member:

- ✓ To support NLACRC's mission, goals and policies, and act in NLACRC's best interests.

- ✓ To attend and actively participate in Board meetings.
  - To be on time.
  - To be prepared, including having read the agenda and materials prior to meeting.

- ✓ To join and actively participate in at least one committee each year.
  - To attend committee meetings and take on tasks as needed or requested.

- ✓ To volunteer skills, experience, and contacts in service to NLACRC's goals and needs.

- ✓ To represent NLACRC in a positive and supportive manner at all times and in all places. To seek the involvement and interest of the community in NLACRC's programs and activities.

- ✓ To respect the perspectives and contributions of fellow Board members and staff, and to set aside my personal interests in Board discussions and votes.

- ✓ To serve with respect, concern, courtesy, and responsiveness in carrying out the organization's mission and demonstrate the highest standards of personal integrity, truthfulness, honesty, and fortitude in all our activities in order to inspire confidence and trust in our activities.

- ✓ To use sensitivity and make efforts to avoid offensive or malicious language or statements that could be considered bullying, threatening or intimidating. Board members should not make disparaging remarks about age, gender, race, ethnicity, disability, religious orientation, or sexual orientation of other Board members, the Executive Director, NLACRC staff, consumers or families. Good faith efforts should be made toward cultural sensitivity.

- ✓ Avoid representing myself on behalf of, or as a spokesperson, for NLACRC or the Board of Trustees without prior expressed consent of the Board of Trustees or NLACRC. This does not mean you cannot identify yourself as a NLACRC Trustee of the Board; however, you cannot use your position as a Trustee to obtain or attempt to obtain any

benefit that you would not otherwise be entitled.

_____ _____

Signature Date

Board of Trustees

Policy Code of

Conduct

Scope

This policy applies to NLACRC Board of Trustees.

Purpose

To establish a policy to support, facilitate, and enhance the participation of Board members in Board meetings, Board committee meetings, Board retreats, and any other Board-sanctioned activities, through the establishment of guidelines for Board member conduct.

Rationale

- Governance of the Regional Center is predicated upon the establishment and maintenance of a viable volunteer governing Board, composed of individuals with demonstrated interest in, or knowledge of, developmental disabilities.
- Effective governance requires Board members to dedicate their time, skills, knowledge, and perspectives to ensure that all actions taken by the Board support NLACRC's mission, vision, values, and strategic goals, and are in the best interests of the Center.
- Adherence to a Code of Conduct will ensure that the Board is able to govern the Center effectively, and will limit actions or conduct that interferes with the Board's ability to perform their important role here at the Center.

Policy

All board members are expected to adhere to the following Code of Conduct in the performance of their roles and duties as a member of the Board of Trustees of NLACRC:

- To support NLACRC's mission, goals and policies, and act in NLACRC's best interests even if the interests of NLACRC conflict with an individual Trustees best interests.
- To attend and actively participate in Board meetings.

    - To be on time.
    - To be prepared, including having read the agenda and materials prior to meeting.
- To join and actively participate in (a) committee(s) each year.
    - To attend committee meetings and take on tasks as needed or requested.
- To volunteer skills, experience, and contacts in service to NLACRC's goals and needs.
- To represent NLACRC in a positive and supportive manner at all times and in all places. To seek the involvement and interest of the community in NLACRC's programs and activities.
- To respect the perspectives and contributions of fellow Board members and staff, and to set aside my personal interests in Board discussions and votes.
- To serve with respect, concern, courtesy, and responsiveness in carrying out the organization's mission and demonstrate the highest standards of personal integrity, truthfulness, honesty, and fortitude in all our activities in order to inspire confidence and trust in our activities.
- To use sensitivity and make efforts to avoid offensive or malicious language or statements that could be considered bullying, threatening or intimidating. Board members should not make disparaging remarks about age, gender, race, ethnicity, disability, religious orientation, or sexual orientation of other Board members, the Executive Director, NLACRC staff, consumers or families. Good faith efforts should be made toward cultural sensitivity.
- Avoid representing myself on behalf of, or as a spokesperson, for NLACRC or the Board of Trustees without prior expressed consent of the Board of Trustees or NLACRC. This does not mean you cannot identify yourself as a NLACRC Trustee of the Board; however, you cannot use your position as a Trustee to obtain or attempt to obtain any benefit that you would not otherwise be entitled.
- Annually, or upon seating on the Board, acknowledge and sign the Code of Conduct pledge, a copy of which is attached hereto as Exhibit A.

Failure to Adhere

In the event that a Board member fails to adhere to the Code of Conduct Policy, a complaint may be filed with the President of the Board of Trustees, or any other Officer of the Board, or the Chief Human Resources Officer ("CHRO"). All complaints will be investigated promptly, resulting in a recommended resolution if noncompliance is found.

Procedure

1. Complaints regarding a Board member's conduct should be directed to the Executive Finance Committee. Complaints may be verbal or may be submitted in writing to

NLACRC Board Support at boardsupport@nlacrc.org. All complaints submitted to boardsupport@nlacrc.org will be provided to the Executive Finance Committee. Should any member of the Executive Finance Committee be the subject of such complaint, that individual shall be recused from all discussion, voting, or any other act regarding the complaint. Failure of an individual on the Executive Finance Committee to recuse themselves from discussion, voting, or any other act regarding the complaint to which they are the subject may subject that individual to further discipline including, but not limited to, recommendations for removal from the board.

2. Complaints will be addressed by a designee of the Executive Committee, which may include the Chief Human Resources Officer and/or outside counsel.

   In the event that noncompliance with the Code of Conduct is found, a resolution will be recommended by the Executive Finance Committee. Depending upon the nature and frequency of the noncompliance, recommended resolutions may range from counseling the Board member, to providing additional training, to a recommendation of removal from the Board for cause, among other remedial actions commensurate with the severity of the offense. In recommending a resolution, the Executive Finance Committee may take into consideration conduct that is related to the presence of a developmental disability and may make an accommodation.

North Los Angeles County Regional Center
Main 818-778-1900 • Fax 818-756-6140 | 9200 Oakdale Avenue #100, Chatsworth, CA 91311 | www.nlacrc.org

Code of Conduct
Complaint Form

Complaint Filing Instructions:

To file a Code of Conduct Complaint, please fill out the Code of Conduct Complaint Form below. You may then submit electronically to boardsupport@nlacrc.org or you may print and mail the completed Complaint form to the following address:

North Los Angeles County Regional Center Attn: Executive Administrative Assistant - Board 9200 Oakdale Ave, Suite 100 Chatsworth, CA, 91311

Your Name: _____ **Date**: _____

Email Address: _____ **Phone Number**: _____

Complaint Information

Date of Incident: _____ **Time of Incident**: _____ **Location of Incident**: _____ **This complaint is regarding Board Member**: _____ **Please describe the conduct in detail:**

_____

_____

_____

If there are others who have witnessed the conduct described above, please provide their names and contact information below:

_____

_____

_____

_____

Signature: _____ **Print Name**:

_____

Date: _____

Board of Trustees

Board Roles and Responsibilities Policy

The purpose of this policy to provide guidance and structure to board member's responsibilities to the Board of Trustees.

Among the roles of the Board of Trustees ("Board") of the North Los Angeles County Regional Center ("NLACRC") is to make policy for the operation of NLACRC. Policy is developed through recommendations from Board committees and NLACRC's Executive Director, with final approval from the Board. In addition, the Board also selects, supports and reviews the performance of the Executive Director, and selects members for, and reviews, the performance of the Board. The Board also approves the budget for NLACRC, and reviews and approves contracts for which Board approval is required by law. Furthermore, it is the Board's role to oversee NLACRC to ensure that its values, vision and mission are implemented and accomplished.

The responsibilities of Board members include, but not be limited to, the following:

1. Attend (either virtual or in-person) and actively participate at Board meetings, which are usually held at 6:00 p.m. on the second Wednesday of each month at one of NLACRC's three offices. Arrive at meetings in a timely fashion. One will be considered "absent" from a meeting if they are absent for more than 25% of the timeframe designated in the Agenda for the meeting. Notify Board President or Executive Director in advance if unable to attend Board meeting.

2. Attend and actively participate at committee meetings. Arrive at meetings in a timely fashion. Notify committee Chair or Executive Director in advance if cannot attend a committee meeting.

3. Read materials in Board packet before each Board and committee meeting in order to be prepared for the meetings, and ask any questions about items or issues in advance of the meetings.

4. Visit at least one disability community organization, service provider program/event, or legislator/legislative event. Visits to NLACRC-vendored programs informs Board members about the developmental disabilities service system. Programs include a wide variety of residential and day programs as well as those providers who deliver a specific service (e.g., transportation).

5. Identify of any Board member conflicts of interest or potential conflicts of interest as set forth in Welfare and Institutions Code Sections 4626 and 4627 and Title 17, sections 54500 and following, of the California Code of Regulations, and report to the Board. Complete a Conflict of Interest Reporting Statement annually and when there is a change of status.

6. Adhere to NLACRC's Bylaws and amendments thereto.

7. Adhere to the Board's Governance Policy and fulfill responsibilities listed therein.

8. Attend annual Board orientation as a newly-seated Board member.

9. Participate in Board trainings and the annual Board retreat.

10. Refer issues regarding individual consumers, families or services to the Executive Director's Office.

11. Meet with, and seek information from, NLACRC staff to familiarize selves with NLACRC's operations and properly discharge duties as Board members.

Board members shall also adhere to the Board Code of Conduct, which includes, in addition to the above responsibilities, the following obligations:

1. Support NLACRC's mission, goals and policies, and act in NLACRC's best interests.
2. Volunteer skills, experience, and contacts in service to NLACRC's goals and needs.
3. Represent NLACRC in a positive and supportive manner at all times and in all places.
4. Seek the involvement and interest of the community in NLACRC's programs and activities.
5. Respect the perspectives and contributions of fellow Board members, the Executive Director, NLACRC staff, consumers and families, and set aside my personal interests in Board discussions and votes.
6. Serve with respect, concern, courtesy, and responsiveness in carrying out NLACRC's mission and demonstrate the highest standards of personal integrity, truthfulness, honesty, and fortitude in all activities in order to inspire confidence and trust in our activities.
7. Promote collaboration by allowing for a safe and welcoming environment.
8. Use sensitivity and make efforts to avoid offensive or malicious language or statements that could be considered bullying, threatening or intimidating. Board members should not make disparaging remarks about age, gender, race, ethnicity, disability, religious orientation, or sexual orientation of other Board members, the Executive Director, NLACRC staff, consumers or families. Good faith efforts should be made toward cultural sensitivity.
9. Critique ideas and suggestions, but not individual Board members, the Executive Director, NLACRC staff, consumers or families.
10. Avoid representing self on behalf of, or as a spokesperson, for NLACRC or the Board without prior expressed consent of the Board or NLACRC. This does not mean you cannot identify yourself as a NLACRC Board member.

In the event that a Board member fails to adhere to the Board Code of Conduct, either or both of the following may occur:

1. A whistleblower complaint may be filed with the President of the Board, or any other Officer of the Board, or the Human Resources Director. All complaints will be investigated promptly, resulting in a recommended resolution if noncompliance is found; and/or
2. The Board member may be subject to a vote of removal for cause by other Board members, pursuant to the Bylaws.

Board of Trustees Policy Board Member Support

Scope

This policy applies to NLACRC Board of Trustees.

Purpose

To establish a policy to support, facilitate, and enhance the participation of board members in board meetings, board committee meetings, board activities, and any other board sanctioned activities.

Rationale

- Governance of the regional center is predicated upon a viable volunteer governing Board, composed of individuals with demonstrated interest in, or knowledge of, developmental disabilities.
    - Board members are required to freely give their time to serve on NLACRC's Board of Trustees.

Procedure

1. It is NLACRC's policy to support its board members to fully participate on the Board of Trustees. Therefore, NLACRC may pay or reimburse board members for the expenditures incurred that are associated with transportation services, child care services, or attendant care services in order for board members to fully participate in Board meetings, Board committee meetings, or Board activities.
2. The executive director may approve the following Board member expenses:
    a. Transportation services: Transportation services will be reimbursed based on the one of the following methods:

i. The actual miles driven starting from the board member's home or place of employment to attend a board meeting, committee, or activity and for the actual miles driven to return home. Actual miles shall also include the additional miles driven to deliver and pick up a minor child from day care settings. The mileage reimbursement rate shall be based on the Internal Revenue Service ("IRS") standard mileage rate for the use of a car (also includes vans, pickups, or panel trucks).

ii. The actual cost of transportation services paid for the use of Uber, Lyft, taxi, or other forms of public transportation based on submission of a receipt for the transportation services expense.

b. Child Care services or Attendant Care Services: Child care services and attendant care services shall be reimbursed during the time that the board member is participating in a board meeting, board committee meeting, or board activity.

i. Virtual Participation: The time for child care services and attendant care services may include up to thirty (30) minutes prior to the scheduled start time of a board meeting, committee, or activity and up to thirty (30) minutes after the actual end time of a board meeting, board committee, or board activity.

ii. In-Person Participation: The time for child care services and attendant cares services will begin at the time the caretaker begins services and will end at the time the caretaker ends services.

iii. Reimbursement for child care services or attendant care services shall be reimbursed at the Department of Developmental Services set hourly rate for voucher/participant directed in-home respite services. Board members may seek an exception regarding the time incurred for child care services or attendant care services, by submitting a written request to the executive director. Such written request must be provided to the executive director

prior to the board member incurring such day care or attendant care expenses and shall be subject to the executive director's approval.

iv. Board members may seek an exception to use a minor child, under the age of 18 years old, to provide child care services or attendant care services. Such written request must be provided to the executive director prior to the board member incurring such day care or attendant care expenses and shall be subject to the executive director's approval.

3. NLACRC will provide support to Board Members to allow full participation in board meetings, board committees, or board activities by providing board members with the following support:

   a. Office Supplies: Office supplies will be available to all board members upon request, and such office supplies includes binders, indexes, sheet protectors, writing instruments, clips and fasteners, notepads, filing supplies, post-it notes and labels. Other types of offices supplies may be requested by board members. Such additional request for other types of office supplies shall be subject to the executive director's approval.
   b. Equipment and Devices: Portable equipment and devices to provide connectivity to the internet will be available for all board members, upon request, in order for board members to fully participate in Board meetings, Board committees, and Board activities remotely. Board members understand that the equipment and devices are the property of NLACRC and must be returned to NLACRC upon the board member's departure from the Board of Trustees. Further, board members understand that board members receiving equipment and devices must adhere to NLACRC's acceptable use policy which accompanies this policy.

4. NLACRC will strive to provide support for all board members to facilitate full participation in Board meetings, committee meetings, or board activities to include producing documents prepared by

NLACRC in larger font or print size, providing verbal translations during Board meetings, and providing a board meeting packet review.

5. NLACRC will strive to protect the personal information of all its board members. In the unlikely event of a breach of personal information, NLACRC will provide the impacted board members with credit monitoring services for at least 12 months, at regional center's expense if the following information is disclosed in the breach:

    - The individual's first name or first initial and last name in combination with any one or more of the following:

        - Social Security Number
        - California Driver's License Number or California Identification Card Number
        - Medical or Health Information, such as personal, medical or insurance identifiers that could result in financial theft or fraud
        - Account Number, Credit/Debit Card Number in combination with any required security code, access code or password
        - Username or email address in combination with a password or security question and answer that would permit access to an online account

6. All other requests for support will be considered by NLACRC on a case-by-case basis, subject to the executive director's written approval.

A Child Care or Attendant Care Services Billing form must be completed and signed an order to receive reimbursement from NLACRC for childcare or attendant care services. The completed and signed Child Care/Attendant Care Services billing Form, along with all payment documentation, should be submitted to NLACRC within sixty (60) days after the date of the meeting, and no later than 12 months from the date of service delivery. An exception to the 12-month deadline may be granted by the Chief Financial Officer or Executive Director. Payment will be issued within 30 days of the date of submission. Any board member that receives childcare, personal assistance or respite services through a vendored agency as a result of his or her child's Individual Program

Plan, must provide a certification from the vendored agency that demonstrates the dates and hours of service reflected on the billing form were not provided by the vendored agency.

7. A Travel Expense Claim form must be completed and signed in order to receive reimbursement from NLACRC for mileage reimbursement or transportation costs to attend meetings. The completed and signed Travel Expense Claim Form, along with all supporting documentation, should be submitted to NLACRC within sixty (60) days after the date of the meeting, and no later than 12 months from the date of service delivery. An exception to the 12-month deadline may be granted by the Chief Financial Officer or Executive Director. Payment will be issued within 30 days of the date of submission.

8. All reimbursements made to board members by NLACRC shall be reported annually to the Internal Revenue Services in the form of a 1099-NEC Form (non-employee compensation), unless the board member provides the following documentation within sixty (60) days of the date the actual expenditure was incurred.

    a. Day Care Services or Attendant Care Services: Copies of cancelled checks, invoice from the day care provider demonstrating a payment was made, or other documentation that demonstrates an actual payment was made to the day care or attendance care worker.

    b. Mileage Reimbursement: Documentation from either Google, MapQuest, or other resource that demonstrates (i) the actual mileage driven; (ii) the starting address; (iii) the day care setting address, if applicable; and (iv) the ending address.

    c. Transportation Reimbursement: Copies of an invoice, receipt, or other documentation that demonstrates an actual payment was made for transportation services.

    d. If it is determined the payment received from NLACRC exceeds the actual expenses incurred by the board member, the amount of reimbursement that is in excess of the actual expenses incurred by the board member must be paid back to NLACRC by the board member within one-hundred,

twenty days (120) of the actual date the expenditure was incurred. Such amounts not reimbursed to NLACRC within the 120-day timeline shall be reported to the IRS.

[Policy.Bd.Support] Adopted 02-14-18
Rev: 09-14-22

Board of Trustees Policy Board/Staff Interaction

The purpose of this policy to provide guidance and structure to the interactions between board members and NLACRC Staff.

- Board members are encouraged to meet with staff designated by the Executive Director to meet and interact with the Board to enable members to familiarize themselves with regional center operations.

- Board members are encouraged to seek information from designated staff to enable members to discharge their duties as board members.

- If a board member's request to staff would require the staff member to allocate his or her time in a manner that interferes with his or her job responsibilities, the staff member should so inform the Executive Director, who will discuss with the Board President.

- When a board member's request for staff assistance has been met with a response that accommodation would require a reallocation of staff time away from the staff member's usual job responsibilities, the board member should redirect his or her request through the president of the board, the executive director, or the appropriate board committee.

[policy.bd.BSI] Revised: 08-16-2021 Approved: 09/09/2021

Board of Trustees Conflict of Interest Policy

The purpose of this policy to provide specific guidance to Trustees regarding their obligations to avoid specific Conflicts of Interest that are proscribed by law.

1. General

The Board of Trustees of North Los Angeles County Regional Center ("NLACRC") places a high priority on ensuring that Board Members, the Executive Director, employees and others acting on behalf of NLACRC maintain the highest personal and professional ethical standards and act in the course of their duties solely in the best interest of NLACRC clients and their families, without regard to the interests of any other organization with which they are associated or persons to whom they are related. NLACRC shall comply with the provisions of the Lanterman Developmental Disabilities Services Act ("Lanterman Act") which address conflicts of interest ("COI"), including Welfare and Institutions Code ("W&I Code") sections 4626, 4626.5 and 4627, as well as the Lanterman Act's implementing regulations located at Title 17, of the California Code of Regulations ("Title 17"), Section 54500 and following.

The purpose of the COI Policy ("Policy") is to define specific areas which may give rise to potential or actual COIs for NLACRC's Board Members, Executive Director, employees and others acting on behalf of NLACRC. Board Members, the Executive Director, employees and others acting on behalf of NLACRC shall be free from COIs that could adversely influence their judgment, objectivity and loyalty to NLACRC, its clients and its mission. This Policy is intended to supplement applicable laws and regulations governing COIs, not replace them.

2. General Scope of Conflicts Laws

This Policy applies to all NLACRC Board members, the NLACRC Executive Director, NLACRC employees in the San Fernando Valley, Antelope Valley, and Santa Clarita Valley offices, NLACRC Advisory Committee Board members, and NLACRC contractors, agents and consultants.

A. Executive Director

The provisions for handling COI Reporting Statements and conflicts by an Executive Director are contained in W&I Code Section 4626, and Title 17, Sections 54532, 54533, and 54534.

B. Board Members

The provisions for handling COI Reporting Statements and conflicts by Board Members are contained in W&I Code Section 4626, and Title 17, Sections 54532, 54533, and 54534.

C. Advisory Committee Board Members

Title 17 also identifies possible conflicts for Advisory Committee Board Members. Title 17, Section 54521 states that there is a COI when a regional center Advisory Committee Board Member (appointed pursuant to W&I Code, Sections 4622(i)) is in any of the following positions for a business entity, entity, or provider from which NLACRC purchases, obtains, or secures services for persons served: (a) a member of the governing

board, (b) a board committee member; (c) an owner; (d) a partner; (e) a shareholder; (f) an agent; (g) a manager; (h) an employee; (i) a contractor; or (j) a consultant, and that person does any of the following: (a) serves as an officer of the regional center board; (b) votes on any fiscal manner affecting purchase of services from any regional center provider; or (c) votes on any matters where the member has a financial interest. A "fiscal matter" as used herein includes setting purchase of service priorities, making any fiscal commitments, transferring purchase of service funds, and establishing policies and procedures with respect to payment of services.

An "Advisory Committee Board Member," as a Board member, is required to complete a COI Reporting Statement just like all other Board members (Title 17, Sections 54532, 54533, and 54534).

D. Employees

The provisions prohibiting conflicts of interest for employees are contained at Title 17, Sections 54526, 54527, 54528, 54529, and 52530. Regional center employees cannot place themselves in a position in which their private, personal interests may conflict with their official duties (Title 17, Section 54529). Employees must be guided solely by the interests of NLACRC and the individuals served by NLACRC. They may not place themselves in a situation that creates a dilemma about advancing their personal interests instead of acting in the best interests of NLACRC. Title 17 generally provides that the only employees who will have a conflict are employees with "decision or policy making authority" (Title 17, Section 54526). This is generally defined to include all employees except those with purely secretarial or clerical duties. Service Coordinators are deemed to be employees with "decision or policy making authority."

E. Contractors, Agents and Consultants

The provisions for handling COI Reporting Statements and conflicts for Contractors, Agents and Consultants are similar to those for employees. Title 17, Sections 54526, 54527, 54528, 54529, and 54530 identify what will constitute a conflict.

3. Definitions

A. The following definitions are applicable to the within Policy:

1. "Potential COI" means a situation which, based upon circumstances reasonably expected to occur at a point in the future, may result in a COI, as specified in Title 17, Section 54520 and following.

2. "Present COI" means a situation in which a COI currently exists, as specified in Title 17, Section 54520 and following.

3. "Business Entity, Entity or Provider" means any individual, business venture, or state or local governmental entity from whom or from which the regional center purchases, obtains, or secures goods or services to conduct its operations. These entities or providers include, but are not limited to, residential facilities, intermediate care facilities, skilled nursing facilities, supported and independent living services, hospitals, medical groups, activity centers, housing providers, entities formed in support of the regional center, infant programs, clinics, laboratories, pharmacies, drug stores, ambulance services, furniture stores, equipment and supply stores, physicians, psychologists, nurses, therapists,

teachers, social workers, and contract case managers. For purposes of this Policy, "Business Entity, Entity or Provider" does not include a consumer or family member of a consumer who receives vouchers for consumer services.

4. "Decision or Policy-Making Authority" means the authority an individual possesses when the person:

a. Exercises discretion or judgment, without significant intervening substantive review, in making, advising, or recommending a decision or in making a final decision; or

b. May compel a decision or may prevent a decision either by reason of an exclusive power to initiate the decision or by reason of a veto which may or may not be overridden;

c. Makes substantive recommendations which are, and over an extended period of time have been, regularly approved without significant amendment or modification by another person or entity or provider; or

d. Votes on matters, obligates or commits his or her agency to any course of action, or enters into any contractual agreement on behalf of his or her agency.

e. Votes to approve, appoint or ratify, or approves, or hires any director, trustee, member of the board, member of a board committee, officer, agent, employee, contractor, or consultant for his or her entity or any other business entity or provider.

f. "Decision or Policy-Making Authority" does not include actions of the individuals which are solely secretarial or clerical in nature.

5. "Prospective Client" means any individual person who has presented himself or herself at NLACRC and might require services but who has not yet been determined by a regional center to meet the eligibility criteria for regional center services.

6. "Regional Center" means a diagnostic, counseling, and service coordination center for persons with developmental disabilities and their families which is established and operated pursuant to the California Welfare and Institutions Code by a private, nonprofit corporation acting as a contracting agency.

7. "NLACRC Employee" means any person who performs services for wages, salary or a fee under a contract of employment, express or implied, with NLACRC. For purposes of this Policy, a Business Entity, Entity or Provider as defined herein is not a NLACRC Employee.

8. "Contractor, Agent and Consultant" means any person who performs services for wages, salary or a fee for NLACRC who has Decision or Policy-Making Authority or the authority to act on behalf of NLACRC, but who do not work under a contract of employment, express or implied, with NLACRC and is otherwise not an NLACRC Employee. The term "Contractor, Agent and Consultant" may include a NLACRC-vendored clinician if they have Decision or Policy-Making Authority or the authority to act on behalf of NLACRC. For purposes of this

Policy, a NLACRC Contractor, Agent and Consultant is treated like an Employee and must comply with laws and Regulations regarding Conflicts of Interest, including, but not limited to the completion of Conflict of Interest Reporting Statements.

9. "Regional Center Operations" means those activities or services which regional centers are required by law, regulation, or contract with the state to provide, obtain, or purchase. Such activities include, but are not limited to, case finding, outreach, prevention, intake and assessment, individual program planning, case management, community programs, program development, and consumer advocacy and protection.

10. "Supervisors" are those individuals who serve as reviewing officers for reports of performance.

11. "Family Members" shall include spouse, domestic partner, parents, stepparents, grandparents, siblings, step-siblings, children, stepchildren, grandchildren, parents-in-law, brothers-in-law, sisters-in-law, sons-in-law, and daughters-in-law.

12. "Financial Interest" is defined in Title 17, Sections 54522 and 54527 as follows: Financial interest includes any current or contingent ownership, equity, or security interest that could result, directly or indirectly, in receiving a pecuniary gain or sustaining a pecuniary loss as a result of the interest in any of the following: (1) business entity worth two thousand dollars ($2,000) or more. (2) real or personal property worth two thousand dollars ($2,000) or more in fair market value. (3) stocks or bonds worth two thousand dollars ($2,000) or more. (4) intellectual property rights worth five hundred dollars ($500) or more. (5) sources of gross income aggregating five hundred dollars ($500) or more within the prior 12 months. (6) future interest for compensation of five hundred dollars ($500) or more. (7) personal finances of two hundred fifty dollars ($250) or more.

4. Rules and Guidelines Regarding Conflicts of Interest

The following rules and guidelines arise from the provisions of Welfare and Institutions Code section 4626 and Title 17, California Code of Regulations, section 54520 and following, which are attached hereto, and the below rules and guidelines should be interpreted in accordance with those laws.

A. **Conflicts of Interest**. As detailed below, no NLACRC Employee, Contractor, Agent, Consultant, or Executive Director shall continue working with NLACRC, and no Trustee shall remain on the Board of Trustees of NLACRC, if the Employee, Contractor, Agent, Consultant, Executive Director or Board member has a COI in violation of these provisions, unless the individual eliminates the COI or obtains a waiver. NLACRC Employees, Contractors, Agents, Consultants, the Executive Director and Board members must, at a minimum, follow these rules and guidelines to avoid COIs:

1. **Conflict by Holding Position with Business Entity/Provider**. A COI exists when: a NLACRC Board Member, an Executive Director, or a Family Member of such person (Title 17, Section 54520), or an NLACRC Employee with decision making authority, a Contractor, an Agent, or a Consultant with authority to act on behalf of NLACRC, or Family Member of such person (Title 17, Section 54526), is any of the following for a Business Entity, Entity or Provider: (1) a governing

board member, (2) a board committee member, (3) a director, (4) an officer, (5) an owner, (6) a partner, (7) a shareholder, (8) a trustee, (9) an employee, (10) an agent, (11) a contractor, (12) a consultant, (13) holds any position of management, or (14) has decision or policy making authority.

2. No Employee Shall Have a Financial Interest in a Business Entity/Provider.

a. **No Financial Interest in NLACRC Decisions**. No NLACRC Employee shall make or participate in making a regional center decision in which he or she knows, or has reason to know, he or she, or his or her Family Member, has a Financial Interest.

b. **No Financial Interest in NLACRC Contracts**. No NLACRC Employee shall participate in the making of contracts in which he or she, or his or her Family Member, has a financial interest. For example, if NLACRC is purchasing new copy machines, a regional center employee could not contract with his or her spouse for the purchase of those machines. For purposes of this subdivision b., "financial interest," means any financial interest, direct or indirect, regardless of the dollar amount, and includes aiming to achieve a financial gain or avoid a financial loss. The financial interest includes any monetary or proprietary benefit, gain of any sort, or the contingent possibility of monetary or proprietary benefits, and extends to expectations of economic benefit. Certainty of financial gain is not necessary to create a COI.

(1) NLACRC Employees may make a contract which is financially beneficial to a Family Member if the benefits associated with the contract are available to regional center consumers or their families generally.

3. No Board Member or Executive Director Shall Have a Financial Interest in a Business Entity/Provider.

a. **No Financial Interest in NLACRC Decisions**. No NLACRC Board member or Executive Director shall make or participate in making a NLACRC decision in which he or she knows, or has reason to know, he or she, or his or her Family Member, has a Financial Interest

b. **No Financial Interest in NLACRC Contracts**. NLACRC Board members and Executive Director, and their Family Members, shall not be financially interested in any contract in which they participate in making. For purposes of this subdivision b., "financially interested" means having any financial interest, direct or indirect, regardless of the dollar amount, and includes aiming to achieve a financial gain or avoid a financial loss. The financial interest includes any monetary or proprietary benefit, gain of any sort, or the contingent possibility of monetary or proprietary benefits, and extends to expectations of economic benefit. Certainty of financial gain is not necessary to create a COI.

(1) If a NLACRC Board member or Executive Director, or their Family Member, has a financial interest in a potential contract that creates a Present or Potential COI, the Board member or Executive Director shall do all of the following prior to the first consideration of the potential contract: (a) Fully disclose the existence and nature of the conflicting financial interest to the

NLACRC Board; (b) Have it noted in the official Board records; (c) Recuse himself or herself from making, participating in making, or in any way attempting to use his or her position to influence a decision on the matter; (d) Leave the room during any discussion or deliberations of the matter and not return until disposition of the matter is concluded; and (e) Refrain from casting his or her vote upon any matter or contract concerning the financial interest or be counted for purposes of a quorum. This subparagraph does not apply if the Board member is an individual served by NLACRC and the financial benefit is available to any NLACRC consumer. A NLACRC Board member and Executive Director may make a contract which is financially beneficial to a Family Member if the benefits associated with the contract are available to NLACRC consumers or their families generally.

4. **No Supervision of Family Member**. A NLACRC Employee may not be the Supervisor of another Employee who is a Family Member.

5. **No Hiring or Promotion of Family Member**. No NLACRC Employee, Executive Director or Board member shall screen, evaluate the application of, or interview, an employee applicant or an applicant for the Board of Trustees at NLACRC, who is a Family Member. No NLACRC Employee or Executive Director shall consider for, or award, a promotion to a NLACRC Employee who is a Family Member. No NLACRC senior staff member may hire a Family Member to work at NLACRC or any ancillary foundation or organization.

6. **No Receipt of Gifts Valued at Over Fifteen Dollars.** NLACRC Employees are prohibited from accepting a gift or gifts from a service provider, consumer, or a consumer's Family Member valued at over fifteen dollars ($15) per year.

7. **No Employment by Department of Developmental Services**. No NLACRC employee, Executive Director, Contractor, Agent, Consultant, or Board member shall be an employee of the Department of Developmental Services (DDS), or an employee of any state or local agency that provides services to regional center clients, if employed in a capacity which includes administrative or policymaking responsibility, or responsibility for the regulation of NLACRC.

8. **No State Council Membership**. No member of the Board of Trustees shall be a member of the State Council or a State Council Regional Advisory Committee.

9. **No COI with Entity that Receives Regional Center Funding**. No NLACRC Employee, Executive Director, Contractor, Agent, Consultant, or Board member shall have a COI with an entity that receives regional center funding, including, but not limited to, a nonprofit housing organization or an organization qualified under Section 501(c)(3) of the Internal Revenue Code, that actively functions in a supporting relationship to NLACRC.

10. **General Prohibition of Conflicts of Interest**. In addition to the specific COI requirements and restrictions set forth above, NLACRC Board members, Executive Director, Employees, Contractors, Agents and Consultants are obligated to discharge their responsibilities with integrity and fidelity and are prohibited from placing themselves in a position where their private, personal interests may conflict with their official duties. A NLACRC Board member, Executive Director, Employee, Contractor, Agent or Consultant is impliedly

bound to exercise the powers conferred on him or her with disinterested skill, zeal and diligence and for the benefit of NLACRC and its consumers. If a situation arises that has not been specifically addressed in this Policy, where a Present or Potential COI exists as to a particular transaction or decision, the Board member, Executive Director, Employee, Contractor, Agent or Consultant, or their Family Member, is disqualified from taking any part in the discussion or from making any recommendation or decision regarding the particular matter. In interpreting and applying this section, the common law doctrine against COI and the authorities interpreting that doctrine shall govern.

11. **Board Member Designated by Service Provider Advisory Committee**. The requirement that no Board member shall be an employee or member of the governing board of any Business Entity, Entity or Provider from which NLACRC purchases consumer services, shall not apply to the Board member who is designated to serve on the Board by the members of the Vendor Advisory Committee. To prevent a COI, the Board member designated by the Vendor Advisory Committee is prohibited from (1) serving as an officer on the Board; (2) voting on any fiscal matter affecting the purchase of services from any NLACRC provider; and (3) voting on any other issue in which the member has a "financial interest" as determined by the NLACRC Board. That member must provide a list of their financial interests, as defined in Government Code, Section 87103, to the NLACRC Board and must provide ongoing information about any changes.

5. COI Procedures.

A. COI Disclosures.

1. **Initial COI Reporting Statement by Executive Director and Board Members**. Each new Executive Director and Board member shall prepare and file with the Board an initial COI Reporting Statement on a standard form published by DDS within 30 days of assuming his or her position. All such COI Reporting Statements must be reviewed by the Board.

2. **Initial COI Reporting Statement by Employees, Contractors, Agents and Consultants**. Every NLACRC Employee, Contractor, Agent, and Consultant shall complete and file an initial COI Reporting Statement with his or her respective regional center within 30 days of assuming the position. All such COI Reporting Statements must be reviewed by the Executive Director.

3. **Annual COI Statement by Executive Director and Board Members**. Every current Executive Director and Board member shall complete and file a COI Reporting Statement with the Board annually, by August 1 of each year. All COI Reporting Statements must be reviewed by the Board.

4. **Annual COI Statement by Employees, Contractors, Agents and Consultants**. Every current NLACRC Employee, Contractor, Agent and Consultant shall complete and file a COI Reporting Statement with NLACRC, whether or not the individual has identified a Present or Potential COI, annually, by August 1 of each year. All such COI Reporting Statements must be reviewed by the Executive Director.

5. **New Candidate for Board and Executive Director**. Each new candidate for

the Board and for Executive Director shall disclose any present or potential conflicts of interest to the NLACRC Board, prior to being appointed, elected, or approved for hire by NLACRC or the Board.

6. **Change in Status of Executive Director and Board Members**. Every current Executive Director and Board member shall file a subsequent COI Reporting Statement with the Board within 30 days of any change in status that creates a Present or Potential COI. A change in status includes, but is not limited to, a previously unreported activity that should have been reported, a change in the circumstance of a previously reported activity, a change in financial interests, familial relationship or legal commitment, and a change to outside position or duties, whether compensated or not. For example, getting married is a change in status.

7. **Change in Status of Employees, Contractors, Agents and Consultants**. Every current regional center Employee, Contractor, Agent, and Consultant shall file a subsequent COI Reporting Statement with NLACRC within 30 days of any change in status that creates a Present or Potential COI. A change of status includes, but is not limited to, a previously unreported activity that should have been reported, change in the circumstance of a previously reported activity, change in a financial interest, familial relationship, or legal commitment(s), change in regional center position or duties, or change to outside position or duties.

8. **Review of Executive Director and Board Member COI Reporting Statements**. The NLACRC Board shall submit copies of the completed COI Reporting Statements of the members of the Board and the Executive Director to DDS within 10 days of receipt of the completed Statements. DDS and the NLACRC Board shall review the COI Statement of the NLACRC Executive Director to determine whether the Statement identifies a Present or Potential COI.

9. **Review of Employee, Contractor, Agent, and Consultant COI Reporting Statements**. The Executive Director or acting Executive Director shall review the COI Reporting Statement of each NLACRC Employee, Contractor, Agent, and Consultant within 10 days of receipt of the Statement and determine whether the Statement identifies a Present or Potential COI. The COI Reporting Statements shall be maintained in the Executive Director's office.

10. **Declaration Under Penalty of Perjury**. COI Reporting Statements shall be dated, signed, and contain a declaration, under penalty of perjury, that the NLACRC Executive Director, Board member, Employee, Contractor, Agent or Consultant has:

    a. No Present or Potential COI;
    b. A Present COI;
    c. A Potential COI; or
    d. Both a Present and Potential COI.

B. Conflict Resolution Plans. (Title 17, Section 54533)

When a Present or Potential COI is identified for a Board member, Executive Director, Employee, Contractor, Agent or Consultant, the Present or Potential COI shall be either eliminated or mitigated and managed through a Conflict Resolution Plan, or the individual shall resign his or her position with NLACRC or the Board.

1. NLACRC Employees, Contractors, Agents and Consultants.

a. When a Present or Potential COI has been identified by the Executive Director, or independently by DDS, for a NLACRC Employee, Contractor, Agent or Consultant, NLACRC shall submit a copy of the completed COI Reporting Statement and a proposed Conflict Resolution Plan, in accordance with the parameters set forth in Title 17, Section 54533(g), for eliminating or mitigating and managing the Present or Potential conflict, to DDS within 30 days of receipt of the completed COI Reporting Statement from the Employee, Contractor, Agent or Consultant, or within 30 days of receipt of DDS's notification.

b. DDS shall determine whether the proposed Conflict Resolution Plan is sufficient or needs to be modified to adequately eliminate, or mitigate and manage, the Present or Potential COI. DDS may impose additional restrictions and additional obligations to the proposed Conflict Resolution Plan and/or make a determination that further information is required. DDS is responsible for making the final decision as to what conditions, restrictions, obligations, or actions, if any, shall be imposed or taken by the NLACRC Board, NLACRC, and/or the individual(s), to eliminate, or mitigate and manage, the Present or Potential COI.

c. If the proposed Conflict Resolution Plan of an Employee, Contractor, Agent or Consultant is denied by DDS, the individual shall have 30 days from the date of receipt of DDS's written denial in which to take the necessary action to eliminate the COI or resign his or her position. DDS may, in exercise of its discretion, grant the individual an extension in which to complete any actions necessary to eliminate the COI.

d. If the proposed Conflict Resolution Plan is approved by DDS, the approved Conflict Resolution Plan shall be implemented not later than 30 days after written notification is mailed by DDS, unless DDS grants the individual(s) an extension in which to complete any actions necessary to implement the approved Conflict Resolution Plan.

e. The submission of a proposed Conflict Resolution Plan does not authorize an individual with a Present or Potential COI to engage in any activity that constitutes a Present or Potential COI. The proposed Conflict Resolution Plan must be approved, in writing, by DDS, and the Conflict Resolution Plan fully implemented prior to the individual engaging in otherwise prohibited conduct.

f. DDS's approval of a proposed Conflict Resolution Plan is not valid unless it is based upon full disclosure of all relevant information. Nondisclosure or misrepresentation of a Present or Potential COI or of material information bearing on the proposed Conflict Resolution Plan decision shall result in DDS's rescission of its approval in addition to any civil penalties imposed pursuant to Welfare and Institutions Code section 4626.

2. Conflict Resolution Plans for NLACRC Executive Director and Board Members.

a. When a present or potential COI has been identified by the NLACRC Board, or has been independently identified by DDS, for a Board member or the Executive Director, the Board shall submit a copy of the completed COI Reporting Statement and a proposed Conflict Resolution Plan, in accordance with the parameters set forth in Title 17, Section 54533(g), for eliminating or mitigating and managing the Present or Potential COI, to DDS and to the State Council within 30 days of receipt of the completed COI Reporting Statement, or within 30 days of receipt of DDS's notification.

b. Not later than 90 calendar days after the State Council receives copies of the completed COI Reporting Statement and the proposed Conflict Resolution Plan for a NLACRC Board member or Executive Director, the State Council shall provide to DDS their written approval or disapproval of the proposed Conflict Resolution Plan. If the State Council fails to provide DDS with its written approval or disapproval of the proposed Plan within that timeframe, DDS alone may make the decision to disapprove the proposed Plan. DDS shall not approve a proposed Conflict Resolution Plan without the approval of the State Council.

c. DDS shall determine whether a proposed Conflict Resolution Plan is sufficient or needs to be modified to adequately eliminate, or mitigate and manage, the Present or Potential COI. DDS may impose additional restrictions and additional obligations to the proposed Conflict Resolution Plan and/or make a determination that further information is required. DDS is responsible for making the final decision as to what conditions, restrictions, obligations, or actions, if any, shall be imposed or taken by the NLACRC Board, NLACRC, and/or the individual(s), to eliminate, or mitigate and manage, the Present or Potential COI.

d. If the proposed Conflict Resolution Plan of a NLACRC Board member or Executive Director is denied by DDS and/or the State Council, the Board member or Executive Director shall have 30 days from the date of receipt of DDS's written denial in which to take the necessary action to eliminate the COI or resign his or her position as a Board member or Executive Director. DDS may, in exercise of its discretion, grant the Board, Board member, Executive Director or NLACRC, an extension in which to complete any actions necessary to eliminate the COI.

e. If the proposed Conflict Resolution Plan is approved by DDS, the approved Conflict Resolution Plan shall be implemented not later than 30 days after written notification is mailed by DDS, unless DDS grants the NLACRC Board, NLACRC and/or the individual(s), an extension in which to complete any actions necessary to implement the approved Conflict Resolution Plan.

f. The submission of a proposed Conflict Resolution Plan does not authorize an

individual with a Present or Potential COI to engage in any activity that constitutes a Present or Potential COI. The proposed Conflict Resolution Plan must be approved, in writing, by DDS, and the Conflict Resolution Plan fully implemented prior to the individual engaging in otherwise prohibited conduct.

g. DDS approval of a proposed Conflict Resolution Plan is not valid unless it is based upon full disclosure of all relevant information. Nondisclosure or misrepresentation of a Present or Potential COI or of material information bearing on the proposed Conflict Resolution Plan decision shall result in DDS's rescission of its approval in addition to any civil penalties imposed pursuant to Welfare and Institutions Code section 4626.

3. Other Rules Regarding Conflict Resolution Plans.

a. To promote transparency, NLACRC shall post on its internet website each completed COI Reporting Statement that identifies a Present or Potential COI that cannot be resolved within 30 days of receipt by the Board or the Executive Director, or within 30 days of receipt of DDS's notification that it has independently identified a Present or Potential COI. The completed COI Reporting Statement shall remain on NLACRC's internet website until the Present or Potential COI has been eliminated, or the individual has resigned his or her regional center position.

b. A new proposed Conflict Resolution Plan shall be submitted to DDS on an annual basis and upon any change of status that creates a Present or Potential COI.

c. The NLACRC Board and/or NLACRC shall retain a copy of each COI Reporting Statement and any approved Conflict Resolution Plan for the period of time consistent with the record retention requirements in its state contract.

4. Sanctions.

a. If a NLACRC Executive Director, Board member, Employee, Contractor, Agent, or Consultant has any questions about whether he or she may have a Present COI or Potential COI under the W&I Code or Title 17, he or she should bring them to the attention of the NLACRC Board immediately. The failure to do so could result in sanctions against NLACRC by DDS, or an employee or Executive Director's termination from employment, or a Board member's removal from the Board.

b. Civil Penalties. A person who knowingly provides false information on a COI Reporting Statement shall be subject to a civil penalty in an amount up to fifty thousand dollars ($50,000), in addition to any civil remedies available to DDS. An action for a civil penalty may be brought by DDS or any public prosecutor in the name of the people of the State of California.

c. DDS Sanctions. (Title 17, Section 54535)
If DDS finds a NLACRC Executive Director, Board Member, Employee, Contractor, Agent or Consultant in violation of this Policy, DDS shall:
(1) Immediately inform the party or parties in writing of such violation, including the supporting facts or information upon which the determination of violation was made; and

(2) Require that the party or parties take appropriate action, within 30 days of the notice of violation, to resolve COI or otherwise eliminate the violation. DDS may extend this 30-day period only once and for a period not to exceed 30 days.
(3) If the violation is not resolved or eliminated within the 30 days provided, and no extension of time has been granted by DDS, DDS may take immediate action to:

(a) Withhold part of the funding for NLACRC; or
(b) Commence procedures for termination or non-renewal of NLACRC's contract pursuant to the Welfare and Institution Code.

The State Council shall be notified of the action.

6. **Policy Review**. The NLACRC Board shall review/update and approve this COI policy on an annual basis.

Social Media Policy

I. Scope

This policy applies to all North Los Angeles County Regional Center (NLACRC) employees, officers, and board members.

II. Purpose

Social media offers ways to engage with the individuals we serve, our community, and the world at large. Social media can help build stronger, more successful relationships and contribute immensely to advancing NLACRC's reputation and interests if used properly. As technologies and social networking platforms and tools emerge NLACRC must update its guidelines in response to these changes.

The primary purpose of NLACRC's Social Media Policy is to provide outreach and to disseminate information to our consumers, families, service providers, business partners, and diverse community at large, to help build stronger, more successful relationships with our community; and to advance NLACRC's reputation and interests.

III. Responsibility

The NLACRC Board of Trustees has the overall responsibility to establish NLACRC's guidelines for the use of NLACRC's social media platforms. The board's Community Relations Committee will review and update this Social Media Policy, as appropriate from time to time.

All NLACRC staff shall strictly abide by the requirements of this policy when posting on, accessing, commenting and/or linking to NLACRC's social media platforms.

All material to be posted on social media sites must be approved by NLACRC's Public Information Supervisor, or his/her designee, in consultation with other NLACRC departments, as appropriate.

IV. Assumptions

A. Social media is a powerful way to provide outreach and communicate with our consumers, families, service providers, business partners and our community.

B. Social media provides a cost-effective means to share useful, interesting, important, and meaningful information with NLACRC's community in an efficient and timely manner.

C. Social media allows active participation and involvement of our community and other interested parties, pertaining to community events, legislative updates, and other information.

D. While NLACRC's official website offers up-to-date information, NLACRC's social media will seek to:

1. Provide immediate information to our users.

2. Redirect users to NLACRC's website.

3. Generate essential and complementary knowledge about NLACRC services.

V. Policy and Guiding Principles

A. All social media information and content must support NLACRC's mission, vision, and values.

B. Information and content posted on social media must follow these guidelines and principles:

1. Information and content must be relevant, helpful or important to our consumers, families, service providers, business partners, employees, and community.

2. Information and content must reinforce or enhance NLACRC's reputation and mission.

3. Information and content must be professional and respectful and adhere to standards of professional conduct at all times. No posting of information or content may be made that aims to embarrass or ridicule

any person or organization.

4. Information and content posted must not infringe or violate someone else's rights, be disparaging or otherwise violate laws, including those laws governing privacy, defamation, discrimination, harassment, trademark, copyright, and fair use.

5. All postings must clearly indicate that NLACRC is the source for such postings.

6. All references to third parties' trademarks must be limited in scope and respectful. Third parties' trademarks must be referenced using any markings required/requested by the owner of such marks, such as ™ (for unregistered marks) or ® (for registered marks). In all postings referencing other parties' marks, NLACRC postings must indicate that the trademarks referenced are those of their respective owners and not of the NLACRC.

7. Information and content must be transparent and avoid inadvertent misrepresentation.

8. Information and content must abide by all NLACRC policies, including limits on posting frequency.

9. No participant may disseminate proprietary information or content on NLACRC's social media platforms (whether relating to NLACRC, other businesses or persons) without NLACRC's Public Information Supervisor's prior written authorization

10. No participant may use, circulate or disseminate in any postings, any photographs, audio (such as songs, music or voice recordings), videos, graphics, cartoons or other audiovisual content from another website or social media account without first obtaining the written consent of the owner of rights in such content. No text or other written content may be copied, used or disseminated without properly crediting the source, and, when necessary, obtaining written permission from the source prior to use.

11. Prior to posting any photograph, video or voice recording, participant must ensure they have the written consent of the person(s) appearing in the photographs, videos and voice recordings. The NLACRC has forms for this purpose. If any person whose image or voice appears in a photograph, video or voice recording is a minor (i.e. under 18), the participant must obtain the minor's parent or guardian's written

consent prior to use. If any person appearing in a photograph, video or voice recording is incapacitated, participant must first seek the incapacitated person's guardian or conservator's prior written consent before use.

12. NLACRC will act judiciously to protect privacy rights, confidentiality, and reputation.

13. NLACRC will strive to maintain its social media site to ensure information and content is kept current, postings are made consistently, and responses are timely.

14. NLACRC does not permit any participant to accept free services, products, or money in exchange for publishing information on NLACRC's social media platforms.

15. NLACRC's social media must not be used to resolve issues, complaints, or provide suggestions about services or support. This does not mean NLACRC does not want to know about such concerns or feedback. Instead, these types of concerns and feedback should be directed to appropriate representatives of NLACRC for handling and response.

16. NLACRC may in its sole discretion, delete information or content on its social media at any time and without prior notice and reserves the right to block any user.

17. Questions about this Policy should be directed to NLACRC's Public Information Supervisor.

VI. Definitions

A. By "*social media*" we mean the variety of available social media platforms, including, but not limited to, Facebook, Twitter, YouTube, Instagram, Snap Chat, LinkedIn, TikTok, and any other platform now existing or that may be developed in the future by which NLACRC intends to provide outreach and to disseminate information to consumers, families, service providers, business partners, and community using social media platforms.

B. By "*information*" we mean facts and information about NLACRC, including actions taken by users and non-users who interact with the social media platforms selected by NLACRC.

C. By "content" we mean anything that NLACRC or others post on NLACRC's social media sites that would not be included in the definition of information.

D. By "post" we mean post, publish or announce on NLACRC's social media sites or otherwise make available by using social media platforms.

E. By "use" we mean use, run, copy, publicly perform or display, distribute, modify, translate, and/or create.

F. By "participants" or "participant" we mean any employee, officer, or board member of NLACRC.

G. By "user" we mean any employee, consumer, family member, business partner, service provider, individual, entity, or company who accesses NLACRC's social media platforms.

North Los Angeles County Regional Center

Zero Tolerance Policy for Consumer Abuse or Neglect

1. Scope

Pursuant to the requirements in Article 1, section 17 of NLACRC's master contract with the State of California, the Board of Trustees hereby adopts the following Zero Tolerance Policy for Consumer Abuse or Neglect. This policy applies to:

A. All of NLACRC's vendored service providers that provide direct services and supports (as defined by Welfare & Institutions Code (WIC) section 4512(b)) to individuals with developmental disabilities within NLACRC's catchment area (consumers).

B. All long-term health care facilities serving NLACRC's consumers.

C. NLACRC employees, if any, who are considered "mandatory reporters" under either of the reporting laws described in sections 4 and 5 below.

2. Background

The California Legislature has adopted various laws to protect all children, dependent adults, and elders from various types of abuse and neglect. These laws also apply to individuals with developmental disabilities. This policy concerns the application of such laws to consumers.

3. The Adult Reporting Law

California WIC sections 15600-15675, known as the Elder Abuse and Dependent Adult Civil Protection Act (adult reporting law) provides (among other things) that any person who has assumed responsibility for the care or custody of an adult consumer, including administrators, supervisors, and any licensed staff of a facility that provide care or services for adult consumers, is a mandated reporter.[1] Under the adult reporting law, any mandated reporter who experiences any of the following shall report the abuse to the applicable governmental authorities (subject to certain limited exceptions described in the adult reporting law)[2].

[1] The definition of "mandated reporter" under the Adult Reporting Law is found in Welfare and Institutions Code (WIC) section 15630(a). The list of care custodians who are mandated reporters is found in WIC section 15610.17.
[2] Definitions of elder and adult abuse are found in WIC sections 15610-15610.70.

A. Has observed or has knowledge of an incident that reasonably appears to be physical abuse, abandonment, abduction, isolation, financial abuse, or neglect of an adult consumer.

B. Is told by an adult consumer that he or she has experienced adult abuse, and reasonably believes that such abuse has occurred.

C. Reasonably suspects the existence of adult abuse.

4. The Child Reporting Law

California Penal Code sections 11164 – 11174.3., known as the Child Abuse and Neglect Reporting Act (child reporting law) provides (among other things) that various categories of persons who interact with a consumer under the age of 18 are mandated reporters.[3] Under Penal Code section 11166, any mandated reporter who has knowledge of or observes a person under 18 whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect (child abuse), shall report the abuse to the applicable government authorities (subject to certain limited exceptions described in the child reporting law).[4] It is important to note that the list of mandated reporters who are obligated to report child abuse is different than the list of mandated reporters obligated to report adult abuse.

5. Purpose

The purpose of this policy is to protect the interests of NLACRC's consumers and their families by:

A. Educating all mandated reporters about their legal obligation to report adult and child abuse (consumer abuse).

B. Requiring mandated reporters to fully comply with the adult and child reporting laws (reporting laws).

C. Providing information to assist mandated reporters in reporting consumer

[3] Penal Code section 11165.7 identifies those individuals who are mandated reporters under the child reporting law.

[4] "Child abuse or neglect" is defined in Penal Code section 11165.6, which in turn references specific forms of abuse and neglect, which are defined in Penal Code sections 11165.1-11165.4.

abuse to the proper authorities.

D. Describing the consequences resulting from a mandated reporter's failure to comply with the reporting laws and this policy. The implementation of this policy will assist in ensuring a safe and healthful environment to all individuals with a developmental disability who are provided services or supports by a service provider or a long-term health care facility.

6. Responsibility for Enforcement of Policy

NLACRC's Board of Trustees has general oversight of this policy. The Board of Trustees delegates the oversight and implementation of this policy to NLACRC's executive director.

8. The Policy

A. Duty to Comply with Reporting Laws. All service providers and long-term health care facilities shall ensure all of their employees and contractors who are mandated reporters strictly comply with the reporting laws at all times. All of NLACRC's employees who are mandated reporters (if any) shall also strictly comply with the reporting laws at all times. A mandated reporter must (unless exempt under law) report all consumer abuse to the applicable governmental authorities immediately, or as soon as practically possible, after his or her discovery or reasonable belief of consumer abuse.

B. Service Provider/Health Care Facility Compliance Policies. Each service provider and long-term health care facility shall ensure maximum compliance with the reporting laws by developing its own written compliance policy for its respective employees and contractors (provider compliance policy) within 120 days after the effective date of this policy. Each provider compliance policy shall incorporate all of the following information:

1. The types and signs of consumer abuse.
2. The responsibility to protect consumers from consumer abuse.
3. The process for reporting consumer abuse to applicable authorities under the reporting laws.
4. Identification of the entities entitled to receive reports of consumer abuse under the reporting laws.
5. A requirement that this policy be provided to all employees upon hire.
6. A requirement that this policy be reviewed annually by all employees.
7. The consequences of failing to follow the reporting laws and this policy.

C. Delivery of Provider Compliance Policy to NLACRC. All service providers and long-term health care facilities shall provide their provider compliance policies to NLACRC upon request.

D. Taking Action to Ensure Consumer Health and Safety. If NLACRC, a service provider, or a long-term health care facility becomes aware of consumer abuse, such entity shall take immediate action, to the extent permitted by law, to ensure the health and safety of the affected consumer and all other consumers receiving services and supports from NLACRC, such service provider or long-term health care facility. This obligation is in addition to a mandated reporter's obligation to report consumer abuse under the reporting laws.

9. Procedures

A. NLACRC's Annual Notice. NLACRC shall notify its employees, service providers and long-term health care facilities of this policy on an annual basis.

B. NLACRC's Posting of this Policy on its Website. NLACRC shall promptly post and maintain this policy on its website.

C. Vendor's Distribution of Policies to its Employees and Contractors. Each service provider and long-term health care facility shall:

1. Provide a copy of this policy and its own provider compliance policy to each of its respective employees and contractors upon hire/engagement, as well as annually thereafter.
2. Retain documentation of its compliance with this requirement (such as signed and dated receipts from its employees). Each service provider or long-term health care facility shall provide such compliance documentation to NLACRC upon request.

D. Incorporation of this Policy into Vendor Contracts. This policy shall be attached as an exhibit and/or incorporated by reference into all NLACRC contracts and contract amendments that are entered into after the effective date of this policy with NLACRC's service providers and long-term health care facilities.

10. How to Report Adult Abuse Under the Adult Reporting Law

A. Reporting rules for a consumer in a long-term care facility. When adult abuse occurs in a long-term care facility (as defined by the reporting law), the scope of the mandated reporter's duties depends on the nature of abuse.

1. Serious Bodily Injury. If a consumer suffers physical abuse which results in serious bodily injury (as defined in WIC section 15610.67), the mandated reporter must:

   - Immediately report such abuse by phone to the local law enforcement agency, and
   - Submit a written report on Department of Social Services (DSS) form SOC 341 (defined in section 10E. below) to law enforcement, the local ombudsman, and the applicable licensing agency within 2 hours.

2. Other Physical Abuse. If a consumer suffers physical abuse which does not result in serious bodily injury, the mandated reporter must:

   - Report such abuse by phone to law enforcement within 24 hours and
   - Submit a written report on DSS form SOC 341 to law enforcement, the ombudsman, and the applicable licensing agency within 24 hours.

3. Other Non-Physical Adult Abuse. If a consumer suffers other types of adult abuse, the mandated reporter must:

   - Report such abuse by phone to law enforcement or the ombudsman immediately, or as soon as practically possible, and
   - Submit a written or Internet report to law enforcement or the ombudsman within 2 working days.

B. Reporting Rules for a Consumer Not in a Long-Term Care Facility. When a consumer suffers adult abuse at any place other than a long-term care facility[5] [5], the mandated reporter shall immediately, or as soon as practically possible, submit such report to the county adult protective services agency or law enforcement. The mandated reporter shall submit either:

1. A confidential Internet report (as noted in section 10.C. below) or
2. Both a telephonic and written report (as noted in sections 10.D. and 10.E. below).

C. Internet Report. To report suspected adult abuse to APS via the Internet, the mandated reporter should complete a confidential Internet report. For

[5] Other than developmental centers and state mental health hospitals, which have separate reporting requirements.

consumers residing in Los Angeles County, the reporting website is: https://hsslacountyprod.wellsky.com/assessments/?WebIntake=A6DCB64F-7D31-4B6D-88D6-0A8FA7EA505F/.

D. Telephonic Report. To report suspected adult abuse to APS via telephone, the mandated reporter should call the office of APS in the county where the consumer is located. In Los Angeles County, the reporting phone number is: (877)477-3646. Within two working days after the mandated reporter submits a telephonic report, the mandated reporter shall submit either the Internet report described in section 10.C above or the written report described in section 10.E below.

E. Written Report. To report suspected adult abuse to APS in writing, the mandated reporter should file a report on California Department of Social Services (DPSS) Form SOC 341 (entitled, "Report of Suspected Dependent Adult/Elder Abuse"). The form can be found on the following website: https://cdss.ca.gov/MandatedReporting/story_content/external_files/SOC341.pdf .

F. Contents of Report. A telephonic report or Internet report of adult abuse shall include, if known:

1. The name of the person making the report.
2. The name and age of the consumer.
3. The present location of the consumer.
4. The names and addresses of family members or any other adult responsible for the consumer's care.
5. The nature and extent of the consumer's condition.
6. The date of the incident, and any other information, including information that led that person to suspect adult abuse, as requested by the agency receiving the report.

G. Review the Law in Full to Understand Your Responsibilities. This policy only highlights a portion of the adult reporting law. All service providers, long term health care facility providers, and mandated reporters are encouraged to read the adult reporting law in full. A copy of the adult reporting law can be downloaded from the Internet at http://www.leginfo.ca.gov/calaw.html by checking the box next to "Welfare and Institutions" and looking for the appropriate section numbers.

H. Additional Resources. The California Office of the Attorney General has published two videos and a related training document, entitled, "Your Legal Duty…Reporting Elder and Dependent Adult Abuse,"which contain additional information. The videos are on the web at: http://oag.ca.gov/dmfea. The training document is on the web at: https://oag.ca.gov/sites/all/files/agweb/pdfs/bmfea/yld_text.pdf.

11. How to Report Child Abuse Under the Child Reporting Law

A. Recipient of Report. Mandated reporters shall make reports of suspected child abuse to:

1. Any police department or sheriff's department (not including a school district police or security department),
2. A county probation department, if designated by the county to receive mandated reports, or
3. The county welfare department.

B. Telephonic Report. The mandated reporter shall make an initial report of child abuse by telephone to the applicable agency immediately or as soon as is practically possible. For example, the emergency response child abuse reporting telephone number for Los Angeles County is: (800)540-4000.

C. Written Report. The mandated reporter shall prepare and send, fax, or electronically transmit a written follow-up report (on CDSS Form SS 8572) within 36 hours of receiving the information concerning the incident. The report form, entitled "Suspected Child Abuse Report," can be found at: http://oag.ca.gov/sites/all/files/agweb/pdfs/childabuse/ss_8572.pdf.

D. Contents of Report. Reports of suspected child abuse shall include:

1. The name, business address, and telephone number of the mandated reporter.
2. The capacity that makes the person a mandated reporter.
3. The information that gave rise to the reasonable suspicion of child abuse and the source or sources of that information.

If a report is made, the following information, if known, shall also be included in the report:

4. The child's name.

5. The child's address, present location, and, if applicable, school, grade, and class.
6. The names, addresses, and telephone numbers of the child's parents or guardians.
7. The name, address, telephone number, and other relevant personal information about the person or persons who might have abused or neglected the child.

The mandated reporter shall make a report even if some of this information is not known or is uncertain to him or her.

E. Review the Law in Full to Understand Your Responsibilities. This policy only highlights a portion of the child reporting law. All service providers, long term health care facility providers, and mandated reporters are encouraged to read the child reporting law in full. A copy of the Child Abuse Law and Neglect Reporting Act can be downloaded from the Internet at http://www.leginfo.ca.gov/calaw.html by checking the box next to "Penal Code" and looking for the appropriate section numbers.

F. Additional Resources. The CDSS publishes a booklet entitled, "The California Child Abuse & Neglect Reporting Law: Issues and Answers for Mandated Reporters," which contains additional information. The booklet is on the web at: www.cdss.ca.gov/cdssweb/entres/forms/English/PUB132.pdf.

12. Consequence of Failure to Comply

A. NLACRC's Intention to Enforce. NLACRC expects all service providers and long-term health care facilities to comply with this policy and the reporting laws. To the extent they fail to do so, NLACRC will utilize all remedies available to it in statute and regulations to protect the health and safety of its consumers.

B. Breach of Contract. The failure of a service provider or a long-term health care facility to strictly comply with this policy or either of the reporting laws shall constitute a material breach of its contract with NLACRC, and shall give NLACRC the right and option to terminate such contract.

C. Statutory Penalties For Failure to Report Adult Abuse (WIC section 15630(h)) A mandated reporter's failure to report, or impeding or inhibiting a report of, adult abuse, in violation of the adult reporting law, is a misdemeanor, punishable by not more than six months in the county jail, by a fine of not

more than one thousand dollars ($1,000), or by both that fine and imprisonment. Any mandated reporter who willfully fails to report, or impedes or inhibits a report of, adult abuse, in violation of the adult reporting law (if that abuse results in death or great bodily injury), shall be punished by not more than one year in a county jail, by a fine of not more than five thousand dollars ($5,000), or by both that fine and imprisonment.

D. Statutory Penalties for Failure to Report Child Abuse (Penal Code sections 11166(c) and 11166.01(b). Any mandated reporter who fails to report an incident of known or reasonably suspected child abuse as required by the child reporting law is guilty of a misdemeanor punishable by up to six months confinement in a county jail or by a fine of one thousand dollars ($1,000) or by both that imprisonment and fine. Any mandated reporter who willfully fails to report child abuse in violation of the child reporting law (where that abuse or neglect results in death or great bodily injury to the child) shall be punished by not more than one year in a county jail, by a fine of not more than five thousand dollars ($5,000), or by both that fine and imprisonment.

E. Statutory Penalties for Impeding a Report of Child Abuse (Penal Code section 11166.01. Any supervisor or administrator who impedes or inhibits the reporting duties of a mandated reporter concerning child abuse shall be punished by not more than six months in a county jail, by a fine of not more than one thousand dollars ($1,000), or by both that fine and imprisonment. However, such punishment shall be increased to up to one year in a county jail, or by a fine of not more than five thousand dollars ($5,000), or by both that fine and imprisonment, where that abuse or neglect results in death or great bodily injury to the child.

13. Inconsistencies

If any inconsistency exists between this policy and the reporting laws, the provisions in the reporting laws shall prevail.

[policy.bd.zt] Approved:

Board of Trustees

Anti-Retaliation Policy

The purpose of this Policy is to protect from retaliation any employee of North Los Angeles County Regional Center ("NLACRC"), any member of the Board of Trustees ("Board") of NLACRC, the Executive Director of NLACRC and any consumer, consumer's family member, or any other individual, who wishes to make a good faith complaint or report, or participate in the investigation of a complaint or report, about improper, or perceived improper employee, Trustee, Executive Director, or vendor conduct, including, but not limited to, actual or potential violations of the law, regulations, policies or procedures. This Policy should be read in conjunction with NLACRC's Whistleblower Policy.

No NLACRC employee, Trustee, Executive Director, consumer, family member or other individual who in good faith makes a complaint or report, whether a Welfare and Institutions Code section 4731 Complaint, a Whistleblower Complaint, an Early Start Complaint, a Title 17 Complaint, a Citizen Complaint, an Appeal request under Welfare and Institutions Code section 4700 and following, a Code of Conduct Complaint or any other complaint or report about another employee, Trustee, Executive Director or a vendor, shall suffer harassment, retaliation, or adverse consequence for filing the complaint, report or Appeal request. Likewise, no NLACRC employee, Trustee, executive Director, consumer, family member or other individual who participates or assists in the investigation of any complaint, report, or Appeal, or testifies in connection with any complaint, report, or Appeal, about another employee, Trustee, Executive Director or a vendor, shall suffer harassment, retaliation, or adverse consequence for doing so.

This Policy is intended to encourage and enable an NLACRC employee, Trustee, Executive Director, consumer, family member or other individual to raise good faith problems and concerns, or assist or participate in the investigation or resolution of a problem or concern, with NLACRC without fear of retribution or retaliation. Any NLACRC employee, Trustee, Executive Director or vendor who violates this Policy against retaliation, or who condones any form of retaliation, is subject to disciplinary action, up to and including immediate termination of employment, Board membership or vendorization. Employees, Trustees, Executive Directors and vendors are expected to adhere to the highest standards of business and personal ethics in discharging their duties and responsibilities. All representatives of NLACRC are obligated to comply with all applicable laws and regulations with honesty and integrity.

Employees, Trustees, Executive Directors, consumers, family members or other individuals who believe they have been subjected to any kind of retaliation that violates this Policy should make a report to NLACRC's Compliance Officer. The Compliance Officer is either the Human Resources Director, or, if the complaint involves the Human Resources Director, then the Executive Director. As a separate option, a complaint or report of retaliation may be made to the Board of Trustees or the Board's Executive Committee. All reports of retaliation will be taken seriously, will be investigated promptly and resolved as appropriate. Complaints or reports may be made as follows:

To the Human Resources Director:

Human Resources Director Phone: (818) 756-6125
Fax: (818) 756-6440

Email: whistleblower@nlacrc.org
9200 Oakdale Avenue, Suite 100
Chatsworth, CA 91311

To Executive Director (If Complaint is About Human Resources Director):

Executive Director Phone: (818) 756-6423
Email: director@nlacrc.org
9200 Oakdale Avenue, Suite 100
Chatsworth, CA 91311

To Board of Trustees or Board of Trustees Executive Committee:

Phone: (818) 756-6118
Fax: (818) 756-6140
Email: boardsupport@nlacrc.org
9200 Oakdale Ave, Suite 100
Chatsworth, CA 91311

Board of Trustees

Board/Executive Director Relationship Policy

The purpose of this policy to provide guidance related to the interactions between the Board of Directors and NLACRC's Executive Director.

The North Los Angeles County Regional Center ("NLACRC") Board of Trustees ("Board') recognizes the importance of the working relationship between the Board and NLACRC's Executive Director. The role of the Board is, in part, to establish policies for the operation of NLACRC. These policies are developed and approved by the Board through recommendations made by Board committees and the Executive Director. The Executive Director implements the Board's policies and ensures that NLACRC operates in accordance with its stated mission, vision and values, its contract with the Department of Developmental Services ("DDS"), the Lanterman Developmental Disabilities Services Act ("Lanterman Act") and the Lanterman Act's implementing regulations located in Title 17 of the California Code of Regulations.

All Board authority delegated to staff is delegated through the Executive Director; likewise, staff accountability comes through the Executive Director. The Board/Executive relationship includes, but is not limited to, the following roles:

1. The Executive Director is hired by the Board to operate as NLACRC's Chief Executive Officer and provide professional leadership and administration of NLACRC's programs and services.

2. The Board monitors and reviews the performance of the Executive Director and, if appropriate, removes the Executive Director.

3. The Board reviews and approves the compensation of the Executive Director, including all benefits, to assure that it is just and reasonable. This review and approval process occurs upon the hiring of the Executive Director and whenever the term of his or her employment, if any, is renewed or extended, and whenever the Executive Director's compensation is modified.

4. The Board establishes the policies for NLACRC. The Executive Director implements these Board policies and is authorized to establish all further policies, make all decisions, take all actions and develop all activities which are true to the Board's policies. The Executive Director reports to the Board on an ongoing basis concerning the manner in which the Executive Director has implemented Board policies.

5. The Board reviews and approves NLACRC's budget and reviews it against actual results throughout the year. The Executive Director oversees the NLACRC budget and all fiduciary matters relating to the operation of NLACRC.

6. The Executive Director is responsible for all aspects of the daily operation of NLACRC and

other contracts and programs of NLACRC, including, but not limited to, planning, organizing, staffing, coordinating and budgeting for NLACRC's contracts and programs. The Executive Director, as NLACRC's primary contact person for DDS regarding contract, policy and legal matters related to the operation of NLACRC, accounts to the State for the services provided and expenditures made.

7. The Board annually reviews the performance of NLACRC, including in providing services that are linguistically and culturally appropriate, and may provide recommendations to the Executive Director based on the results of that review.

8. The Executive Director is responsible for the hiring, firing training and activities of all staff in accordance with relevant employment and labor laws and NLACRC policies.

Board of Trustees

Governance Policy

The mission of the North Los Angeles County Regional Center ("NLACRC") is to "create a community (including families) where each individual with a developmental disability has the opportunity to live a healthy, productive and inclusive life." NLACRC's vision is to a make a difference in the world by "empower[ing] people with developmental disabilities to have opportunities to achieve their fullest potential in all aspects of life." The following values guide NLACRC's work and relationships: Dignity and Respect; Inclusion and Belonging; Equity; Empowerment; and Creativity and Innovation.

The NLACRC Board of Trustees ("Board") and management staff is committed to providing effective leadership and stability so that NLACRC's stated mission and vision can be accomplished and its values promoted.

A. Board Member Responsibilities. In order to fulfill their duties and responsibilities to NLACRC's mission, vision and values as members of the NLACRC Board, trustees will be expected to demonstrate their level of commitment to NLACRC in the following ways:

1. Commitment to Mission, Vision and Values by:
    - Keeping the mission, vision and values of NLACRC clearly and consistently in mind
    - Not compromising principles upon which the organization is based
    - Continually thinking of ways to enhance the organization
    - Endeavoring to ensure the rights and entitlements of persons served
    - Proactively assisting the organization to equip and enable persons with disabilities to attain the fullest possible independence, employment, participation in an integrated community, and freedom of choice by supporting the provision of options in daily living
    - Maintaining an awareness of the changing trends in service delivery to individuals with developmental disabilities

2. Commitment to Involvement by:
    - Regularly preparing for, attending and participating in Board meetings
    - Being on time for meetings
    - Attending all special meetings of the Board and Board trainings
    - Carefully considering all decisions on policy issues
    - Identifying prospective new Board members and referring them to the Board Nominating Committee
    - Volunteering skills, experience and contacts in service to NLACRC's mission, goals and needs

- Resigning from the Board if unable to fulfill one's commitment during the term of office

3. Commitment to Fellow Trustees and Staff to Keep Board Meetings Respectful, Supportive and Productive by:
    - Listening to the ideas of others with an open mind
    - Respecting the perspectives and contributions of fellow Board members and staff
    - Setting aside personal interests in Board discussions and votes
    - Acting sensitively to others and avoiding making disparaging or offensive remarks
    - Being an active voice in promoting positive change
    - Not being afraid to ask questions even if a question seems simple
    - Facilitating agreement or consensus on issues
    - Listening to the concerns of the public and referring them to the Executive Director or Board President, as appropriate

B. Officer Responsibilities. Officers of the Board serve the Board. As such, they are bound by Board wishes and by limits on Board authority. No single Board Officer may act on behalf of the Board without prior Board authorization. The Officers may meet as a group with the Executive Director for purposes of preparing agendas or other pre-Board meeting work, but they may not act in place of the Board except as specifically provided in the Bylaws.

Officer responsibilities include, but are not limited to, the following:

1. President. The President shall call all meetings of the Board and preside at all meetings of the Board, the Executive Committee and the Post-Retirement Medical Trust Committee. The President shall exercise such other duties as are provided in the Bylaws or as may be prescribed from time to time by the Board.
2. Vice President. The Vice President shall perform all duties and exercise all powers of the President when the President is absent or is otherwise unable to, or unwilling to, act. The Vice President shall also participate in the quarterly meetings of the Post-Retirement Medical Committee. The Vice President shall also act as Board parliamentarian. In addition, the Vice President shall exercise such other duties as are provided in the Bylaws or as may be prescribed from time to time by the Board.
3. Secretary. The Secretary shall take, and maintain at NLACRC's principal executive office, the minutes of Board and Executive Committee meetings. In addition, the Secretary shall be the custodian of corporate books and records (except for books of account). Furthermore, the Secretary shall give all notices that are required by law or under the Bylaws. The Secretary shall exercise all other duties as are provided in the Bylaws or as may be prescribed from time to time by the Board.
4. Treasurer. The Treasurer shall review and report on NLACRC's contract with DDS and the preliminary allocation. The Treasurer shall also oversee and report to the Board on the fiscal status of NLACRC. The Treasurer shall exercise all other duties as are provided in the Bylaws or as may be prescribed from time to time by the Board.
5. ARCA Representative - Represent the Regional Center at ARCA meetings.

6. Report to the Board regarding actions taken at the ARCA meetings.
7. Assure that the Board votes on any issues requiring such action.
8. Exercise such other powers and perform such duties as may be prescribed by the Board or these Bylaws.
9. Shall provide a report at each Community Relations Committee meeting.

C. Board Committees. Board committees will be appointed and function as needed and as provided in the NLACRC Bylaws. Each committee shall exist for the purpose of providing advice, recommendations and technical assistance to the Board. Except as expressly delegated to any particular committee by the Bylaws or by the Board, no committee shall have the authority to take any action, make any expenditure or incur any liability in the name of or on behalf of the Board. Further, no committee may be delegated authority which would otherwise be exercised by the Board unless all of the members of the committee are also members of the Board or unless all of the actions proposed by such committee are ratified by the Board prior to their execution in accordance with statute.

Board of Trustees

Board Training Guidelines

The North Los Angeles County Regional Center ("NLACRC") values the commitment that the members of the Board of Trustees ("Board') make to NLACRC and wishes to support that commitment through Board training. In addition, in accordance with the Special Contract Language issued to NLACRC by the Department of Developmental Services ("DDS"), for so long as NLACRC is mandated by Special Contract, these trainings will include specific topics, including the following:

1. NLACRC's Contract with DDS, including the Special Contract Language;
2. Board Roles and Responsibilities Under the Lanterman Act and Corporations Code;
3. Board Code of Conduct or Civility Policy;
4. State and Federal Laws Applicable to the Operation of a Non-Profit Corporation;
5. Maintaining Appropriate Boundaries Between the Role of the Board and the Role of NLACRC Staff;
6. Best Practices Related to Board Governance, including, but not limited to:
    a. Executive Director's Roles and Responsibilities;
    b. Board's Role in Oversight of the Executive Director;
    c. Composition and Purpose of Each Board Committee;
    d. Distinctions Between Open and Closed Meetings;
    e. Code of Ethics;
    f. Conflict of Interest Requirements;
    g. Community Relations; and
    h. Fiscal Oversight and Accountability by the Board.
7. NLACRC's Revised Policies, including, but not limited to, the Whistleblower and Anti-Retaliation Policies, and Board Recruitment Policy.

NLACRC may combine some of the above training topics to alleviate scheduling conflicts and foster efficiency.

For so long as NLACRC is mandated by Special Contract:

1. Every Board member is required to attend each training or make-up training session.
2. NLACRC must create and post on its website an attendance record for each training or make-up session and provide a copy to DDS within then (10) days after each session is completed.
3. The above trainings shall be delivered to the Board annually.

This Policy shall remain in effect year-after-year until revised by the Board and agreed upon by DDS.

Diversity, Equity, Inclusion, and Belonging

Societal inequity does exist, and therefore, inequity is reflected historically in systems and institutions, including the regional center system. This policy will address the structural gaps in representation, cultivate an environment where all identities are valued and respected, and to provide resources that educate and explore different points of view. NLACRC is committed to identifying the opportunities for change with an enhanced focus on equity, being solution-focused and future-facing, and bringing awareness to different cultures and identities throughout our entire community.

Vision Statement

NLACRC affirms and celebrates the inclusion, equity, diversity, and belonging for all staff, people served, their families, and communities that we support and represent. NLACRC's vision is to empower people with developmental disabilities to have opportunities to achieve their fullest potential in all aspects of life and to embrace and showcase differences.

Mission Statement

NLACRC will be a regional center in the community that brings together perspectives of all positions and roles within the community and to share thoughts and suggest actions that foster inclusion, advance equity, and promote diversity.

Definitions

A. Inclusion means the active practice of creating spaces where all people feel embraced, affirmed, seen, valued, connected, and respected.

B. Equity means the provision of opportunities and access to services and supports based on need through eliminating barriers that have prevented the full participation of communities and individuals most impacted by systemic oppression.

C. Diversity includes, but is not limited to, race, ethnicity, creed, color, language, religion, sex, including pregnancy, childbirth, breastfeeding and related medical conditions, gender, gender identity, gender expression, national origin or ancestry, age, medical condition, genetic characteristic, physical or mental disability, military or veteran status, marital status, registered domestic partner status, and sexual orientation.

D. Belonging means a focus on ensuring that individuals feel seen, connected, supported,

and proud.

Purpose of Policy

A. *Internal Purpose:* This policy will help provide structure and ongoing organizational commitment to inclusion, equity and diversity for all NLACRC staff. An inclusive, equitable, and diverse workplace refers to a workplace in which all individuals, including staff and individuals served feel seen, valued, respected, and engaged not regardless of – but with consideration and appreciation for differences. NLACRC commits to accountability and transparency through policy and advances the priority for increasing service access and equity for underserved communities.

B. *External Purpose:* This policy guides how NLACRC collaborates with people served, their families, board members, service providers, community-based organizations, legislators, stakeholders, and the community-at-large. This policy provides accountability and transparency through policy and advances the priority for increasing services access and equity for underserved communities with a specific focus on the strengths and resilience of people served by NLACRC. This purpose recognizes a need for specific action to dismantle and protect against any form of institutional or systemic racism or oppression.

Policy Objectives

The overarching objective of this policy is to foster an organizational culture that reflects intentional support of inclusion, equity, and diversity efforts. NLACRC will advance Inclusion, Equity & Diversity and provide support and guidance for implementing changes in the following ways:

A. Facilitate continuous learning and training opportunities for current staff, new staff, board members and service providers
    i. At least one required learning/training opportunity focused on inclusion, equity and diversity will be provided quarterly for all NLACRC staff and offered to service providers that interface with consumers, including members of the Vendor Advisory Committee.
    ii. Topics identified for learning/training opportunities will be diverse, multicultural, and intended to meet pressing current needs, as determined through the NLACRC strategic plan, town halls, public surveys, meetings, and ongoing solicitation of community feedback.

B. Align objectives outlined above with all current and future organizational policy development
    i. Examine congruence between inclusion, equity and diversity activities and efforts with existing and emerging policy across the organization.

Service Access and Equity

NLACRC is committed to increasing service access and equity for underserved communities. Inequities impact people served by regional center, their families, and other stakeholders. Therefore, NLACRC will implement specific and measurable strategies for inclusion to ensure everyone is welcome and represented. Training, Education, and Awareness will be implemented to ensure people served are fully aware of all service options and experience true person-centered planning. NLACRC will ensure all information and communications are equally and meaningfully available. NLACRC values family connections and relationships that can help connect people to services and supports. Outreach, including local grassroots outreach, is a priority for NLACRC to ensure all people served are aware of the regional center services and supports. NLACRC will analyze and review Purchase of Service expenditure data by ethnicity, age, location, and by living situation and employ strategies to address differences. All metrics related to service access and equity, will be specific and measurable, and align with NLACRC's strategic planning strategies.

Equal Opportunity & Appreciation for Differences

NLACRC values and embraces the diversity of our workforce. We are committed to diversity and inclusion at NLACRC because we understand that each of our employees are unique. As an equal opportunity employer, NLACRC is committed to diversity and inclusion in the workplace and does not discriminate against employees or job applicants on the basis of race, ethnicity, creed, color, language, religion, sex, including pregnancy, childbirth, breastfeeding and related medical conditions, gender, gender identity, gender expression, national origin or ancestry, age, medical condition, genetic characteristic, physical or mental disability, military or veteran status, marital status, registered domestic partner status, sexual orientation, or any other consideration made unlawful by federal, state or local laws.

NLACRC Staff Professional Conduct

All NLACRC employees deserve to be treated with dignity and respect at work by their co-workers, supervisors, and managers. NLACRC employees are responsible for their behavior at work. All employees are expected to exhibit professional and respectful conduct towards the co-workers, supervisors, and managers during work, at work functions on or off the work site, and at all other company-sponsored and participative events. All employees are required to abide by NLACRC's policies that prohibit discrimination, harassment and retaliation based on an employee's protected characteristics, and to attend and complete ongoing diversity awareness and anti-harassment training to enhance their knowledge to fulfill this responsibility.

Recruitment, Hiring, Promotion, and Retention

NLACRC is committed to hire, promote, and retain the best qualified individuals. As part of that commitment, NLACRC will strive to hire and promote diverse individuals throughout the organization, including leadership positions that can influence change, and policy. NLACRC is committed to maintaining a workforce that reflects the diversity of the communities and consumers we serve.

Corrective and Remedial Action

Any employee who violates NLACRC's policies against discrimination, harassment, and retaliation and/or engages in inappropriate conduct or behavior, will be subject to disciplinary action, up to and including termination. Employees who believe they have been subjected to any kind of discrimination, harassment or retaliation that violates NLACRC's should seek assistance from a supervisor or an HR representative. NLACRC employees can also contact Human Resources for alternative reporting options.

Other Relevant NLACRC Organizational Policies

NLACRC has additional organizational policies that support our efforts for inclusion, equity, and diversity:

- **Recruitment and Selection Policy:** NLACRC seeks to recruit and hire the best-qualified applicants and comply with all applicable employment laws, Collective Bargaining Agreement (CBA) rules, and agency policies and procedures. NLACRC is committed to building a diverse staff that is reflective of our community and to provide equal employment opportunities to all qualified applicants, employees, consumers, and

stakeholders.

- **Unlawful Harassment and Retaliation Policy:** NLACRC is committed to providing a workplace that is free from unlawful harassment or intimidation. The purpose of this policy is to set expectations of behaviors that are aligned with NLACRC's values and support positive working relationships and a professional work environment.

- **Whistleblower Policy - NLACRC Employees and Board Members:** This Policy provides a guide to assist any NLACRC employee or board member who wishes to report any perceived improper regional center activity and/or improper vendor/contractor activity and be protected from retaliation when doing so.

- **Whistleblower Policy - NLACRC Vendors, Contractors and Others:** This Policy provides a guide to assist any NLACRC vendor, contractor, consumer or their family, or other individual who wishes to report any perceived improper regional center activity and/or improper vendor/contractor activity and be protected from retaliation when doing so.

[policy.bd.IED: Approved by Board of Trustees on June 8, 2022.

	WHISTLEBLOWER – NLACRC EMPLOYEES, BOARD MEMBERS, AND VENDORS		
	POLICY		
Category: ORG-MISC	Effective Date: November	Version No.: 8	Revision Date: October 28, 2026

REGIONAL CENTER WHISTLEBLOWER POLICY FOR NORTH LOS ANGELES COUNTY REGIONAL CENTER ("NLACRC") EMPLOYEES AND BOARD MEMBERS

This policy ("Policy") is adopted to comply with the Department of Developmental Services ("DDS") Regional Center/Employee and Board Member Complaint Process Filing and Contact Information Guidelines. Accordingly, NLACRC has adopted this Policy for complaints by employees and members of the NLACRC Board of Trustees ("Board").

1. **General**

The purpose of this Policy is to provide a guide and structure to assist any NLACRC employee or NLACRC Board member who wishes to report any perceived improper regional center activity and/or improper vendor/contractor activity and be protected from retaliation when doing so. As set forth herein, a whistleblower is an employee of NLACRC or a member of the Board of Trustees of NLACRC (hereinafter referred to as a "trustee"), who in good faith reports any "improper regional center activity" and/or "improper vendor/contractor activity" committed by an employee, a trustee, or a vendor/contractor. Here, the term "good faith" shall have the same meaning as set forth in California Labor Code section 1102.5, which protects employees who disclose reasonable suspicions of illegal activity.

Whistleblower complaints, for purposes of this Policy, are defined as the reporting of an "improper regional center activity" or "improper vendor/contractor activity."

An "improper regional center activity" means an activity by a regional center, or an employee, officer or board member of a regional center, in the conduct of regional center business, that is a violation of state or federal law or regulation; violation of contract provisions; fraud or fiscal malfeasance; misuse of governmental property or constitutes gross misconduct, incompetency, or inefficiency.

An "improper vendor/contractor activity" means an activity by a vendor/contractor, or an employee, officer, or board member of a vendor/contractor, in the provision of DDS-funded services, that is a violation of a state or federal law or regulation; violation of contract provisions; fraud or fiscal malfeasance; misuse of government property; or constitutes gross misconduct, incompetency, or inefficiency.

This Policy protects employees and the trustees from any form of retaliation for the good faith reporting of perceived improper activity committed by NLACRC employees, trustees or officers and/or vendor/contractor employees, trustees or officers. In short, no adverse action will be taken against the person filing a good faith complaint simply because a complaint has been filed. Employees and the trustees are expected to adhere to the highest standards of business and personal ethics in discharging their duties and responsibilities. As employees and representatives of NLACRC, they are obligated to comply with all applicable laws and regulations with honesty and integrity.

2. **Persons Permitted to File Complaints**

This Policy applies to reports of improper activity by all NLACRC trustees and NLACRC employees, including employees in the San Fernando Valley, Antelope Valley, and Santa Clarita Valley offices.

3. **Responsibility and Obligation to Comply with Policy**

It is the responsibility of all employees and all trustees to comply with this Policy and to report perceived improper activity to NLACRC's Compliance Officer or any of the other individuals listed below in Part 4.

4. **Procedure For Filing a Complaint**

4.1 To make a complaint, contact the Compliance Officer. **The Compliance Officer is either the Human Resources Director, or, if the complaint involves the Human Resources Director, then the Executive Director**. Also, as a separate option, a complaint may be made directly to DDS, the Board or the Board's Executive Committee. The Compliance Officer, the Board, or the Board's Executive Committee will acknowledge receipt of the complaint within five (5) business days. All reports will be promptly investigated by the Compliance Officer, and appropriate corrective action will be taken by NLACRC if warranted by the results of the investigation.

a. **North Los Angeles County Regional Center**

An individual who wishes to file a complaint with Human Resources may contact:

- Human Resources Director
  Phone: (818) 756-6125
  Fax: (818) 756-6440
  Email: whistleblower@nlacrc.org

  9200 Oakdale Avenue, Suite 100
  Chatsworth, CA 91311

Alternatively, if the complaint is about the Human Resources Director, an individual who wishes to file a complaint may do so by filing it with NLACRC's Executive Director as

follows:

- Executive Director
  Phone: (818) 756-6423
  Email: director@nlacrc.org

  9200 Oakdale Avenue, Suite 100
  Chatsworth, CA 91311

b. **Board, Executive Committee or Specific Officer of the Board**

To make a complaint to the Board, the Board's Executive Finance Committee, or to a specific officer of the Board (President, Immediate Past President, Vice-President, Treasurer, or Secretary), the contact information is as follows:

- Board of Trustees or Board of Trustees Executive Committee
  (Please specify what officer of the Board of Trustees you wish to send your complaint to, if applicable.)
  Phone: (818) 756-6118
  Fax: (818) 756-6140
  Email: boardsupport@nlacrc.org

  9200 Oakdale Ave, Suite 100
  Chatsworth, CA 91311

c. **Department of Developmental Services (DDS)**

A complaint may be filed with DDS by contacting:

- Office of Community Appeals
  and Resolutions
- Phone: (833) 538-3723
  Fax: (916) 654- 3641
  Email: Appeals@dds.ca.gov

  1215 O Street, MS 8-20
  Sacramento, CA 95814

4.2 NLACRC requires a clear and concise statement of the alleged improper activity and any evidence you have to support the allegation. NLACRC encourages employees and trustees to notify the Compliance Officer or other individual or entity listed in Part 4.1. above, in good faith when they have reason to believe that any "improper regional center activity" and/or "improper vendor/contractor activity," as those terms are defined in Part 1 of this policy, has occurred.

The recipient of the complaint shall obtain sufficient information from the

complainant to refer the complaint to the Compliance Officer for review, investigation, and resolution. If you do not provide a name or other information (witnesses or documents) that clearly identifies the person you are alleging has engaged in improper activity, and the regional center where that person works or is a trustee, we may not have sufficient information to investigate. Copies of documents in support of the complaint, rather than originals, should be submitted with the complaint as they cannot be returned.

If the complaint is verbal, the recipient of the complaint shall document the information provided by the complainant, including the complainant's name (if provided), contact information, the nature of the complaint, who or what the complaint is regarding, the name of possible witnesses, and the date and time the complaint was received.

Although complaints may be filed anonymously, it is extremely difficult and often impossible to investigate if insufficient information is provided and we have no means to contact you to gather basic facts. In such cases, NLACRC may not be able to effectively investigate the allegations.

Under certain limited circumstances, including but not limited to, when a member of the executive staff or the Compliance Officer is alleged to have engaged in improper regional center conduct, NLACRC may seek an appropriate impartial party, such as arbitrator, organizational ombudsman, investigator, or mediator or NLACRC's corporate counsel, to investigate suspected improper activity and to make recommendations to NLACRC. The Compliance Officer will inform the Executive Committee of recommendations by the appropriate impartial party, including appropriate corrective action. The Executive Committee shall then make recommendations to the full Board for Board action, if any.

4.3 The Compliance Officer shall notify the Executive Director and the Board's Executive Committee of any whistleblower complaint he or she receives and the ongoing progress of the investigation of the complaint. All reports shall be promptly investigated and appropriate corrective action will be taken by NLACRC if determined warranted by the investigation. The Compliance Officer shall inform the Executive Committee of the resolution of the complaint. In addition, the Compliance Officer is required to report to the Executive Committee at least annually on compliance activity.

4.4 At the present time, and in accordance with Special Contract Language and for so long as the operative agreement between NLACRC and DDS requires, the Compliance Officer shall issue a report to DDS every 30 days about whistleblower complaints received. Reports shall contain, at a minimum: (1) The date a complaint was received; (2) The complaint type, if known (e.g., regional center staff, service provider, community member etc.); (3) The date an acknowledgment of receipt was sent to the complainant; (4) The nature of complaint; (5) Details of the investigation; (6) The results of investigation; (7) Corrective action taken, if applicable.

4.5 The Compliance Officer will notify the complainant, if known, of its findings and any corrective action taken to the extent that it does not breach any confidentiality rights of an individual served, their family or an employee.

5. Policy When Complaints Are Filed

5.1 **Anti-Retaliation**- No employee or trustee who in good faith reports improper activity shall suffer harassment, retaliation, or adverse consequence, including employment consequence. In short, no adverse action will be taken against a person filing a good faith complaint, simply because a complaint has been filed. This Policy is intended to encourage and enable employees and trustees to raise serious concerns with NLACRC, in order to permit NLACRC to address the concerns prior to a complainant seeking resolution outside the regional center. An NLACRC staff member who retaliates against an employee or trustee who reported a violation in good faith is subject to discipline up to and including immediate termination of employment. Furthermore, if an employee or trustee makes allegations that are found to be malicious, knowingly false, or otherwise in bad faith, NLACRC will view these actions as a serious offense and reserves the right to take action within the boundaries of the law.

5.2 **Confidentiality-** Improper activity violations or suspected violations may be submitted on a confidential basis by the complainant or may be submitted anonymously. In accordance with Part 7 below, reports of violations or suspected violations will be kept confidential to the extent possible, consistent with the need to conduct an adequate investigation, or to comply with other laws and obligations.

6. This Policy is Consistent with the State's Directive Entitled "Department of Developmental Services Whistleblower Complaint Process," dated July 28, 2010

To comply with the DDS Directive dated July 28, 2010, this Policy will:

6.1 Allow for multiple employees within the regional center to be available to accept complaints. More specifically, the Compliance Officer is the Human Resources Director, except that if the complaint involves the Human Resources Director, the Compliance Officer is the Executive Director. Also, complaints may be made directly to the Board, the Board's Executive Committee or DDS.

6.2 As noted in 6.1 above, allow direct access to the Board, including the Board President, for the purpose of filing complaints.

6.3 Protect any person making a complaint from retaliation. More specifically, NLACRC will not retaliate against any complainant.

6.4 Follow NLACRC's procedure, set forth in Part 4 above, to investigate and take

appropriate action on complaints, including complaints of retaliation.

6.5 Ensure complainant confidentiality when possible as provided in Part 7 of this Policy, consistent with the State's Whistleblower Policy, including consumer health and safety.

6.6 Provide for the notification of employees, board members, consumers/families, and vendor community, of the existence of both NLACRC's and the State's Whistleblower Policies within thirty (30) days of the effective date of NLACRC's Policy and annually thereafter.

6.7 In addition, NLACRC will ensure that this Policy will be posted on NLACRC's website within thirty (30) days after being adopted.

7. **Confidentiality**

NLACRC will do everything possible to maintain the confidentiality of a complainant making a whistleblower complaint, if requested. However, in the rare circumstances where NLACRC is unable to maintain confidentiality due to its statutory responsibilities (including ensuring the health and safety of consumers and regional center contract compliance), or due to its need to address the improper activity, NLACRC will attempt to inform the complainant of its need to disclose information prior to releasing identifying information. Additionally, the identity of the complainant may be revealed to appropriate law enforcement agencies conducting a criminal investigation. All mandatory abuse reporting requirements will remain in effect as an exception to confidentiality.

ACKNOWLEDGMENT AND AGREEMENT TO COMPLY

I acknowledge that I have read and understand the rules regarding the Regional Center Whistleblower Policy for NLACRC Employees and Board Members. I understand that compliance with the foregoing Policy and procedure is a condition of employment and Board membership at NLACRC.

North Los Angeles County Regional Center
Director's Report
November 2026

1. NLACRC Spotlight:

A. Staffing Milestone

i. NLACRC surpassed 1,000 employees following the onboarding of 12 new employees on November 2, 2026.
   a. Current employee count: 1,005.

B. Intake Assessment and Eligibility

i. NLACRC continues to be a statewide leader in intake assessment and eligibility determination.
ii. Achieved 100% compliance with the 120-day intake timeline in the last six consecutive end-of-month reports

C. Welcome Jonathan, Human Resources Director

i. Jonathan brings more than 20 years of HR and business leadership experience across public, private, high-growth, and global organizations.
ii. His expertise includes employee and labor relations, recruitment and development, organizational effectiveness, compensation and benefits, HR operations, culture, and leadership development.
iii. His experience includes building and transforming HR functions, navigating mergers and acquisitions, and supporting organizational change.

D. Family Expo Events – Positive Community Feedback

i. Case Management and Community Services teams received positive recognition and appreciation for the successful Family Expo events.
ii. Both events were made possible through the Department of Developmental Services' Home and Community-Based Services (HCBS) funding and the support of staff volunteers.
iii. Event attendance:
   a. Family Expo: 901 attendees
   b. Dance: 265 attendees

E. DDS IPP Survey Results

i. NLACRC successfully met DDS' required IPP survey benchmarks for September 2026.
ii. Achieved an average satisfaction score of 92%, representing a 7-percentage-point increase from August.

F. Employee Recognition – Kai Brennan

i. Congratulations to Kai Brennen, Employment Specialist, for receiving the Star Thrower Award from the Tierra del Sol Foundation.

a. This award recognizes outstanding partnership and collaboration in advancing employment opportunities with Tierra del Sol.

2. <u>Department of Developmental Services (DDS) Updates:</u>

A. FY 2025-2026 POS Reports

i. To comply with federal law, DDS will align race and ethnicity data with federal categories. This will make comparisons with prior years more difficult, although White and Latino categories remain largely unchanged.
ii. Preliminary data show that utilization rates (services authorized compared to dollars spent) remain relatively stable.
iii. Timelines across all regional centers for approval of SDP spending plans seem to be longer due in part by the increase in the program's population and uptick in modification requests.
iv. DDS is conducting a focus group with RCs to better understand and resolve workforce challenges.

3. <u>Center Updates:</u>

A. Recruitment

i. Total # of positions filled: 985
    a. Total # of positions authorized: 1071
ii. October 2026 New Hires
    a. 1st Cycle (10/5/2026): 6 unconfirmed
    b. 2nd Cycle (10/19/2026): 4 unconfirmed
iii. November 2026 New Hires
    a. 1st Cycle (11/12/2026): 1 unconfirmed

B. Client Served Statistics:

i. Total served: 43,583
    a. Early Start: 5,089
    b. Lanterman: 35,728
ii. Breakdown of all three valleys:
    a. AV (Early Start & Lanterman): 10,503
    b. SCV (Early Start & Lanterman): 4,795
    c. SFV (Early Start & Lanterman): 25,519
iii. Intake all three valleys: 1,516 & Early Start Intake: 427
iv. All other categories not captured in Early Start, Lanterman, and Intake, such as Provisional, Enhanced, Specialized, and other which would total: 1,447

C. Compliance Activities

i. Residential Quality Assurance Visits – 143 visits conducted.
    a. 51 unannounced in-person visits.
    b. 52 Home and Community Based Services annual reviews.
    c. 15 Home and Community Based Services non-residential providers.

ii. Corrective Action Plans – 6 developed with residential providers.
iii. Plans of Improvement – 0 for non-licensed residential providers.

4. Outreach & Community Engagement Highlights

A. Mehregan Event – Woodland Hills (October 11, 2026)

i. NLACRC participated in the annual Persian Fall Festival at Warner Center Park.
ii. The Farsi Outreach Language Specialist connected with Persian families, shared service information, assisted with applications, and engaged the Farsi-speaking community.
iii. The featured traditional music, food, and local organizations.

B. 3rd Annual All for Kids Black Infant Health Harvest Resource Fair – Palmdale (October 21, 2026)

i. NLACRC's Antelope Valley outreach team connected with Black and African American families and shared Early Start resources and eligibility information.
ii. Participation supported continued outreach to underserved communities in the Antelope Valley.

5. Social Recreation

i. October referral submissions totaled 764, a 44.90% decrease from September and a 7.05% decrease from October 2025.
    a. 500 new referrals; 159 extensions; 87 add-ons; 18 terminations
ii. October Vendor Onboarding increased 17.72% from September and 6.89% from October 2025.
iii. October Parent Onboarding for reimbursements decreased 32.50%.

6. Upcoming Disability Organization Events/Activities:

A. State Council on Developmental Disabilities next council meeting – November 17, 2026
B. Disability Rights California's next board meeting – November 20, 2026

SLOS ANGELES COUNTY REGIONAL CENTER
Board Member Reporting Out Form

Name: Jennifer Koster/Silvia Haro
Meeting: SDLVAC
Date of Meeting: September 17, 2026

1.	**Number of Attendees**	33
2.	**Public Input:**	• **Lori shared:** NLA SDP Email: selfdetermination@nlacrc.org NLACRC website: www.nlacrc.org NLACRC SDLAC Email: nlacrcsdlac@gmail.com SDP DVU Connect Self-Determination | Disability Voices United NLACRC Support Group- 1st Wednesday of the month. IF Round Table- 2nd Thurs of the month. • Patricia Jackson from State Council talked about the NCI project survey. • Public comment on the obstacles in SDP. • Diana (parent) shared SDP's flexibility allows for positive experience with services. • Tiffany raised concerns about the delays in SDP. She inquired about the next steps. The team provided resources. • Rita stated that she has an issue that needs to be resolved before her daughter transitions into the program. The SDP team will ensure her IPP team follows up. • Silvia announced Family Expo on October 24th in AV Fairgrounds, including a dance event for individuals 18 and over.
3.	**Points of Discussion:**	• Chair and Co-Chair positions need to be filled. Lori went over how she runs the committee but explained they do not need to run it exactly the way she has been doing it.
4.	**Reported out to Committee/Meeting:**	• Lori shared Medicaid Waiver approval for another 5 years. • NLACRC has 2 training courses for CSCs coming up. • 2027 RFP Recipients are as follows: HelpGrow- Coaching AACcolades for Achievement-Coaching Claudia Cares- Coaching for participants and Ifs Self-Determination Institute- Training and Support Group
5.	**Area of Concerns:**	• The LVAC needs a chair and co-chair and there were no interest-statements submitted.
6.	**Action Items:**	• The committee to work with State Council & NLACRC to fill the vacant positions. NLACRC is ready to proceed with interviews for their vacant positions.
7.	**Questions for the Board:**	• Can close session be during the last part of Board Meeting? • Is there a reason why it is in the middle of meeting? • How can the NLACRC Board of Trustees help our committee make Self-Determination Program easier to participate in at NLA?
8.	**Miscellaneous**	

North Los Angeles County Regional Center

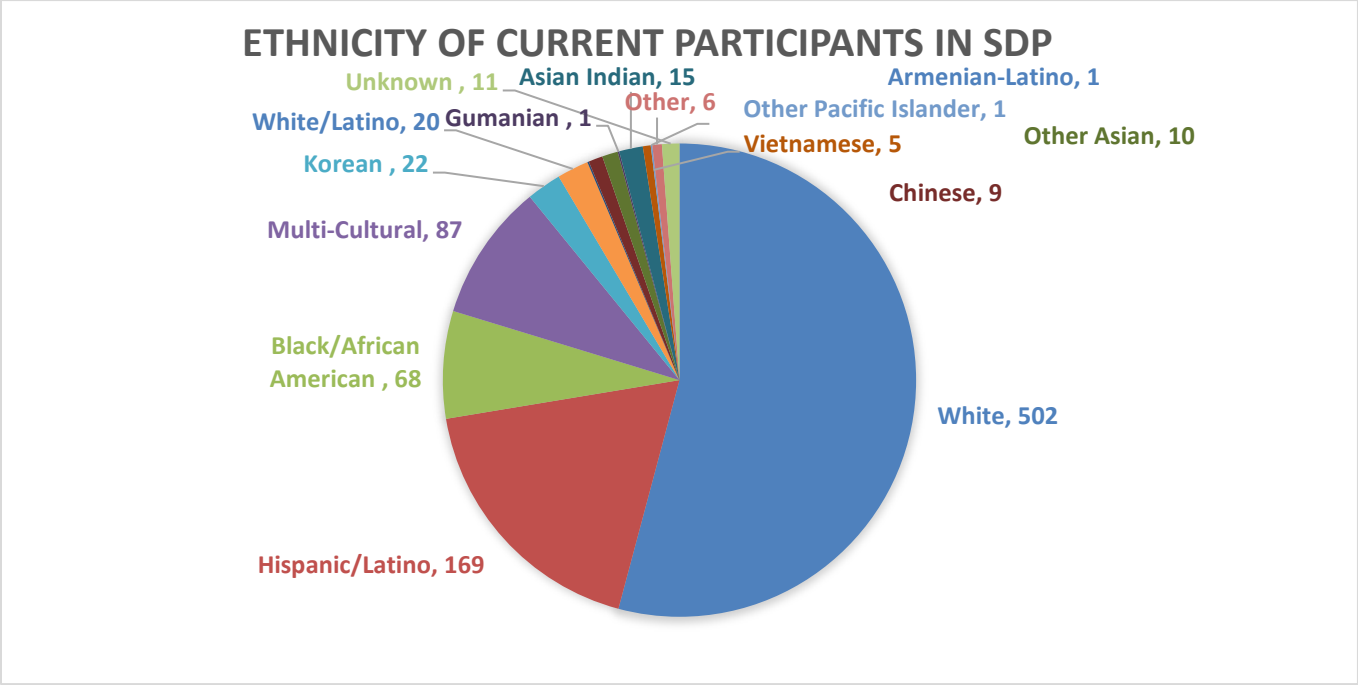
Main 818-778-1900 • Fax 818-756-6140 | 9200 Oakdale Avenue #100, Chatsworth, CA 91311 www.nlacrc.org

Self Determination Program Report - Implementation Updates

October 1, 2026

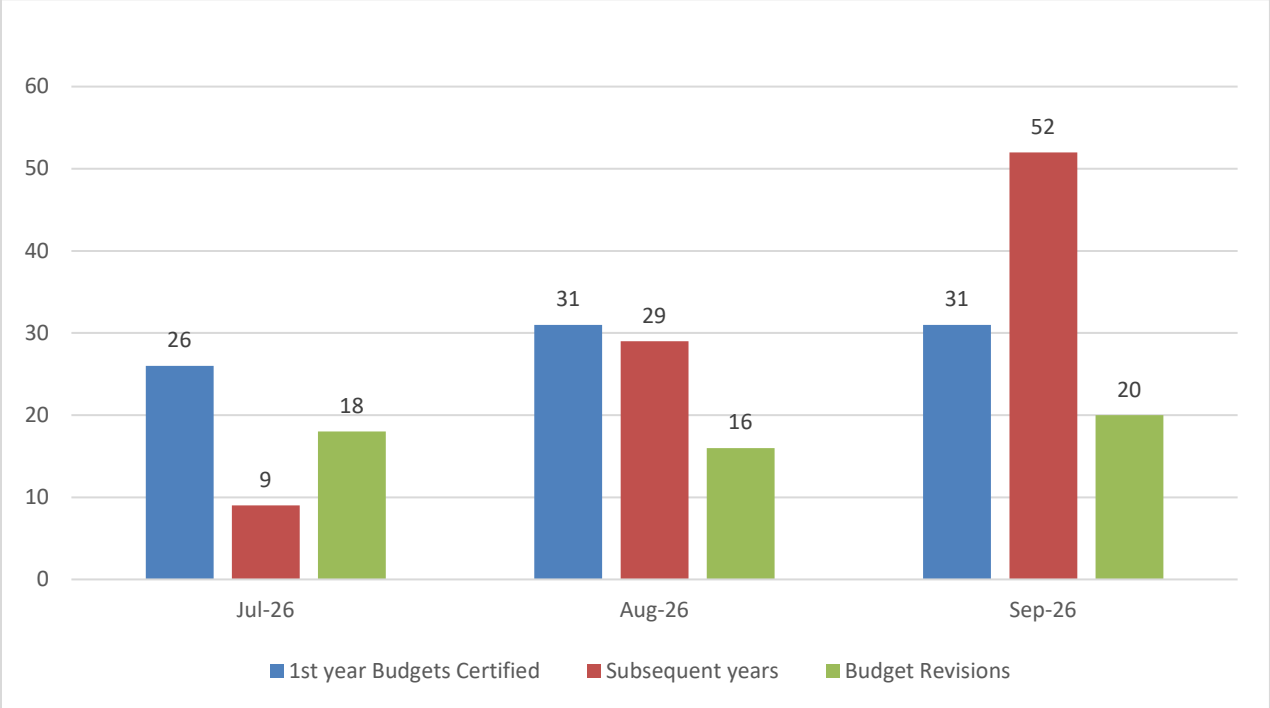
North Los Angeles County Regional Center Statistics:

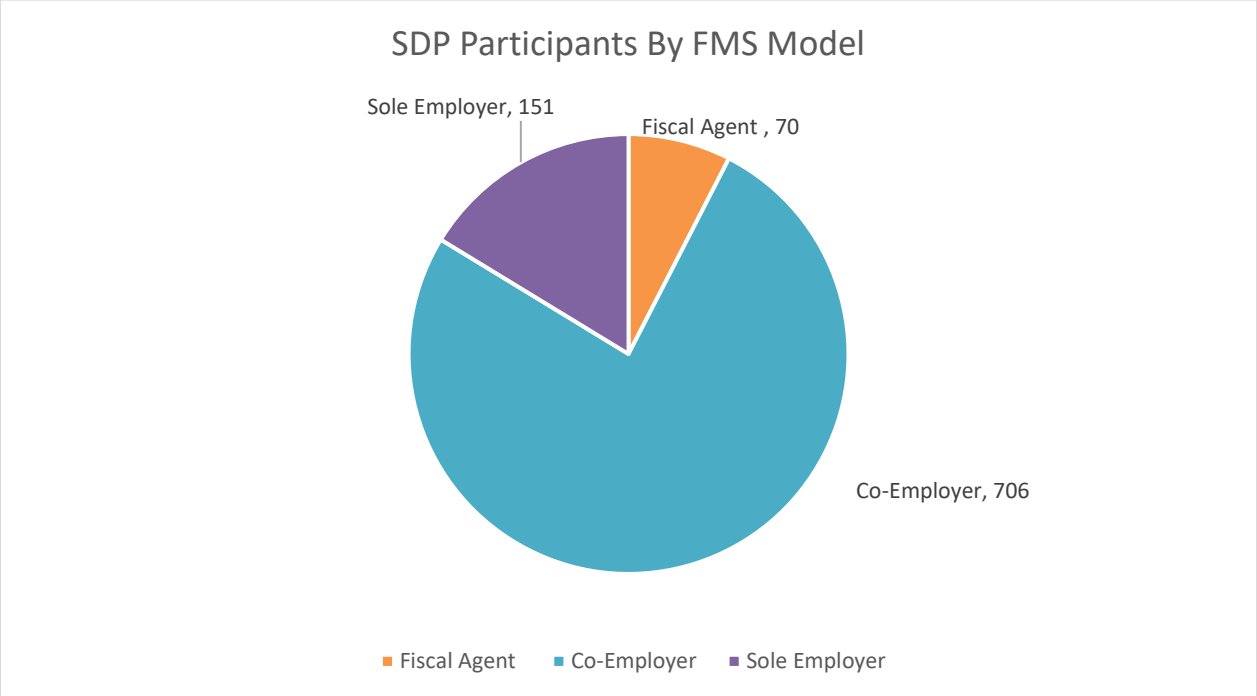
Total number of budgets that are certified: **987** (increased by 29)
Total number of spending plans that are approved: **927**
Total number of spending plans in progress: **25**
Total number of PCP's completed: **795** (increased by 18)
Total number of participants that did not continue after receiving budget: **3**
Total number of participants that have opted out of SDP: **19**
Total number of Inter-Regional Center Transfers (out): **13**
Total number of Inter-Regional Center Transfers (in): **3**
Participants that have fully transitioned into SDP with approved spending plans and active SDP IPPs: **927** (Transitions 27 & 4 late transitions from September)



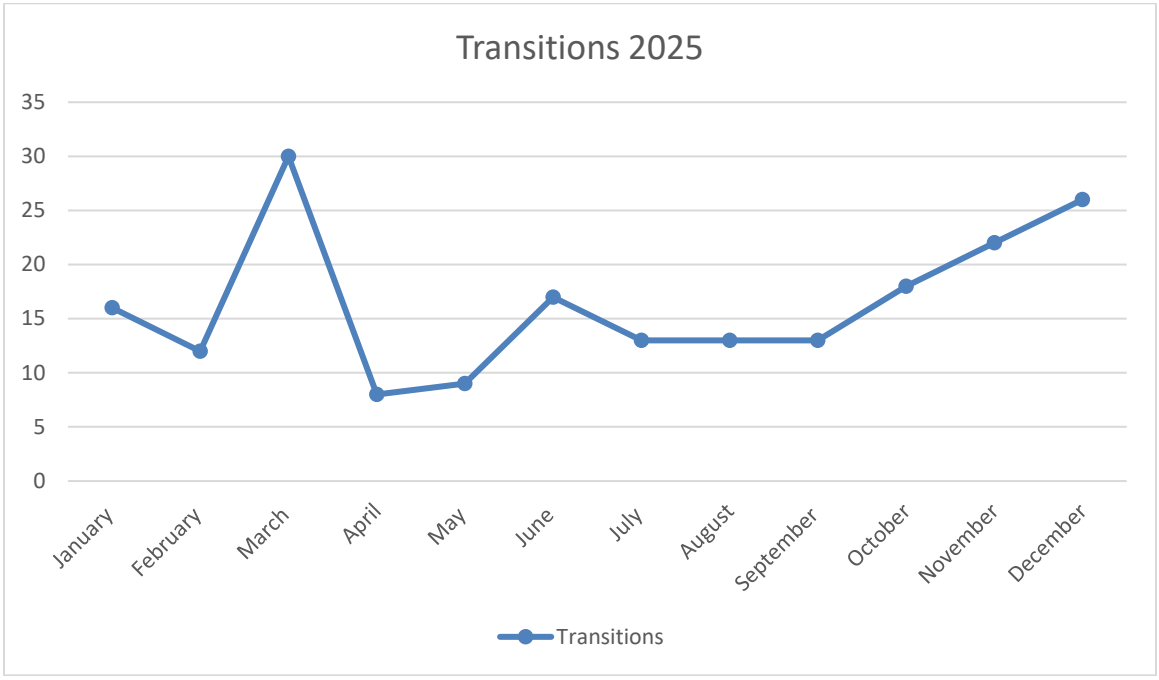
Transitions based on ethnicity:
White: 13
Latino/Hispanic: 8
African American: 2
Filipino: 1
Multicultural: 6
Unknown: 1

Monthly Budgets Certified

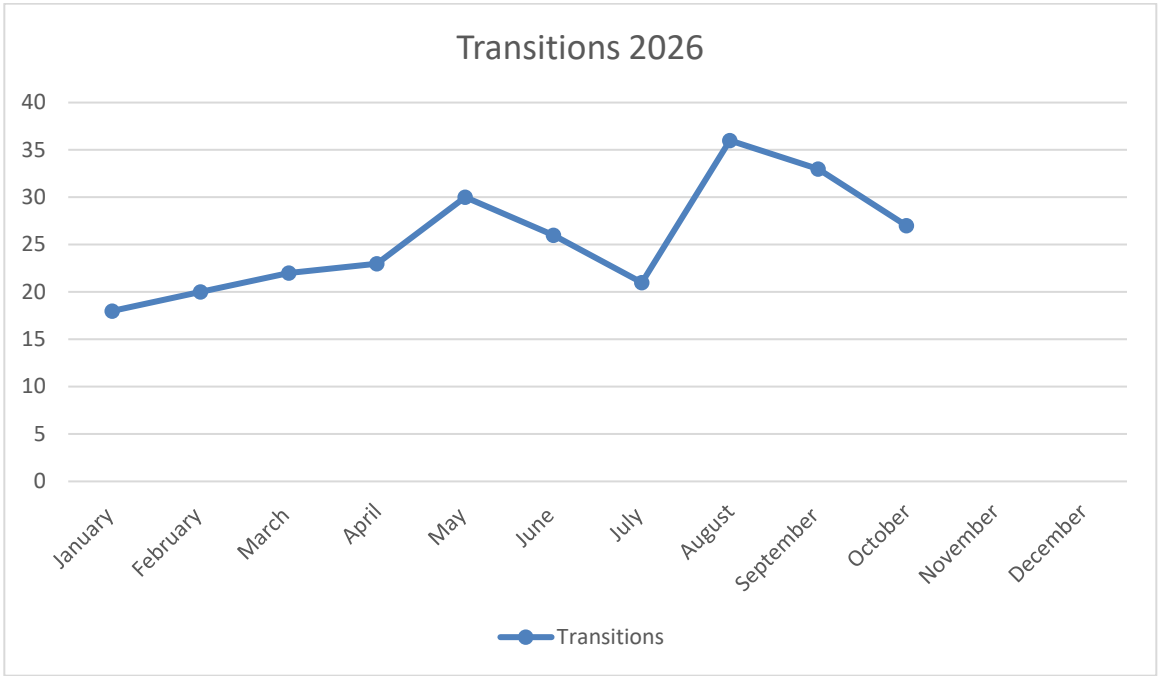




Transitions this month:
Bill Payer: 0
Co-Employer: 30
Sole Employer: 1



Total transitions in 2025: 197



Total 2026 Transitions: 256

NLACRC Implementation Updates/ information:

- SDP Orientation is available:
  Through State Council https://scdd.ca.gov/sdp-orientation/

- Self Determination Support Group – November 4, 2026, at 4:30pm via Zoom.

- SDP Local Volunteer Advisory Committee- Thursday, October 15, 2026 from 6:30PM-8:30PM
  - The meeting will be held virtually. The Zoom link can be found on NLACRC's calendar Everyone is welcomed to attend meetings!

- Support for participants and families: NLACRC has coaches available to support with SDP transition process or if you are in the program and need assistance. Ask your CSC for a referral.

- AACcolades
- Claudia Cares Consulting
- HelpGrow Freedom

- NLACRC & SDP Local Volunteer Advisory Committee Best Practices Subcommittee
  - The Best Practices Subcommittee is reviewing workflows and processes related to NLACRC's implementation of Self Determination. The committee meets monthly.

Resources:

- Disability Voices United – SDP Connect Meetings (Every other Wednesday at 4:30- 6pm)
  Upcoming Events | Disability Voices United

- Self Determination Program Service Definitions:
  https://www.dds.ca.gov/wp-content/uploads/2019/05/SDP_Service_Definitions.pdf

NORTH LOS ANGELES COUNTY REGIONAL CENTER
FINANCIAL REPORT-MONTHLY RECAP
FISCAL YEAR 2026-2027
JULY 2026

BUDGET CATEGORY	Annual C-2 Allocation	Month Exp	Y-T-D Expenditures	Projected Annual Expenditures	Projected Annual Surplus/(Deficit)	Percent Under(Over) Budget
Operations						
Salaries & Benefits	$101,738,007	$8,680,783	$8,698,043	$101,738,007	$0	0.00%
Operating Expenses	$21,476,866	$763,796	$2,292,187	$21,476,866	$0	0.00%
Subtotal OPS General	$123,214,873	$9,444,579	$10,990,230	$123,214,873	$0	0.00%
Salaries & Benefits - CPP Regular	$575,350	$102,608	$102,730	$575,350	$0	0.00%
Operating Expenses - CPP Regular	$0	$0	$0	$0	$0	0.00%
Subtotal OPS CPP Regular	$575,350	$102,608	$102,730	$575,350	$0	0.00%
Salaries & Benefits - DC Closure/Ongoing Workload	$422,280	$45,685	$45,749	$422,280	$0	0.00%
Operating Expenses - DC Closure/Ongoing Workload	$0	$0	$0	$0	$0	0.00%
Subtotal OPS DC Closure/Ongoing Workload	$422,280	$45,685	$45,749	$422,280	$0	0.00%
Family Resource Center (FRC)	$227,357	$0	$0	$227,357	$0	0.00%
Self Determination Program (SDP) Participant Supports	$0	$0	$0	$0	$0	0.00%
Social Recreation Projects	$0	$0	$0	$0	$0	0.00%
Services Access & Equity (Disparities)	$0	$0	$0	$0	$0	0.00%
Language Access & Cultural Competency	$1,080,819	$0	$0	$1,080,819	$0	0.00%
Subtotal OPS Projects	$1,308,176	$0	$0	$1,308,176	$0	0.00%
Total Operations:	$125,520,679	$9,592,872	$11,138,709	$125,520,679	$0	0.00%
Purchase of Services						
Purchase of Services ("POS") (General, HCBS & ICF/SPA)	$1,397,790,941	$92,303,739	$93,043,718	$1,397,790,941	$0	0.00%
CPP Regular and DC Closure/Ongoing Workload	$290,295	$0	$0	$290,295	$0	0.00%
Total Purchase of Services:	$1,398,081,236	$92,303,739	$93,043,718	$1,398,081,236	$0	0.00%
Total NLACRC Budget:	**$1,523,601,915**	**$101,896,611**	**$104,182,427**	**$1,523,601,915**	**$0**	**0.00%**

NORTH LOS ANGELES COUNTY REGIONAL CENTER
FISCAL YEAR 2026-2027
JULY 2026

TOTAL BUDGET SOURCES FISCAL YEAR 2026-2027	
C-1 (Preliminary) from DDS for OPS	$105,535,520
C-2 from DDS for OPS, Projects, and CRDP/CPP	$19,255,159
C-3 from DDS for OPS, Projects, and CRDP/CPP	
C-4 from DDS for OPS, Projects, and CRDP/CPP	
C-5 from DDS for OPS, Projects, and CRDP/CPP	
C-6 from DDS for OPS, Projects, and CRDP/CPP	
C-7 from DDS for OPS, Projects, and CRDP/CPP	
C-1 (Preliminary) from DDS for POS	$1,172,252,756
C-2 from DDS for POS-CRDP/CPP/HCBSW	$208,828,480
C-3 from DDS for POS-CRDP/CPP/HCBSW	
C-4 from DDS for POS-CRDP/CPP/HCBSW	
C-5 from DDS for POS-CRDP/CPP/HCBSW	
C-6 from DDS for POS-CRDP/CPP/HCBSW	
C-7 from DDS for POS-CRDP/CPP/HCBSW	
Subtotal - Total Budget received from DDS	**$1,505,871,915**
Projected Revenue	730,000
Subtotal - Projected Revenue Operations	**$730,000**
Projected ICF/SPA Transportation/Day Program Revenue	$17,000,000
Subtotal - Projected Revenue Purchase of Services	**$17,000,000**
Total Budget	**$1,523,601,915**

OPERATIONS BUDGET SOURCES FISCAL YEAR 2026-2027	
GENERAL OPERATIONS (Excludes Projects, CPP Regular, CRDP/CPP)	
C-1 (Preliminary), General Operations (OPS)	$104,454,701
Reduce Caseload Ratio for Children through Age 5 (1:40)	
Reduce Other Caseload Ratios	
C-2, OPS Allocation	$18,030,172
C-3, OPS Allocation	$0
C-4, OPS Allocation	$0
C-5, OPS Allocation	$0
C-6, OPS Allocation	
Total General OPS	**122,484,873**
Projected Interest Income	$500,000
Projected Other Income	$50,000
Projected ICF/SPA Admin Fee	$180,000
Total Other Revenue	$730,000
TOTAL GENERAL OPS	**$123,214,873**
C-1 (Preliminary) Community Resource Development Plan ("CRDP") /Community Placement Plan ("CPP")	
C-2, OPS CRDP/CPP	$575,350
C-3, OPS CRDP/CPP	
Total CRDP/CPP Regular	**$575,350**
C-1 (Preliminary) Developmental Center ("DC") Closure/Ongoing Workload	
C-2, OPS DC Closure/Ongoing Workload	$422,280
C-3, OPS DC Closure/Ongoing Workload	
Total CPP DC Closure/Ongoing Workload	**$422,280**
Family Resource Center ("FRC")	$227,357
SDP Participant Supports	
Services Access & Equity (Disparities)	
Language Access & Cultural	$1,080,819
Total OPS PROJECTS	**$1,308,176**
Total Operations Budget	**$125,520,679**

PURCHASE OF SERVICES (POS) BUDGET SOURCES FISCAL YEAR 2026-2027	
POS (CPP-POS Regular, CRDP/CPP)	
C-1 (Preliminary) POS	$1,172,252,756
C-2, POS Allocation	$208,828,480
C-3, POS Allocation	
C-4, POS Allocation	
C-5, POS Allocation	
Total General POS Allocation	**$1,381,081,236**
ADD:	
Projected ICF SPA Revenue	$17,000,000
Total Budget, General POS	**$1,398,081,236**

NORTH LOS ANGELES COUNTY REGIONAL CENTER
CONSOLIDATED LINE ITEM REPORT
FISCAL YEAR 2026-2027
JULY 2026

	0 Annual C-2 Allocation	Net Month	Expended Y-T-D	Projected Remaining Expenses	Proj Annual Expenses	Projected Surplus/ (Deficit)
PURCHASE OF SERVICE						
POS (General)						
3.2 Out of Home	232,871,971	16,610,246	16,610,246	216,261,725	232,871,971	0
4.3 Day Programs	141,176,885	6,666,852	6,666,852	134,510,033	141,176,885	0
4.3 Habilitation Programs	7,548,071	706,602	706,602	6,841,469	7,548,071	0
5.4 Transportation	49,901,137	3,808,811	3,820,210	46,080,927	49,901,137	0
6.5 Other Services	966,292,878	64,511,228	65,239,809	901,053,069	966,292,878	0
Total POS (General):	**1,397,790,941**	**92,303,739**	**93,043,718**	1,304,747,223	1,397,790,941	0
CRDP & CPP						
CRDP & CPP Placements	280,295	0	0	280,295	280,295	0
CRDP & CPP Assessments	10,000	0	0	10,000	10,000	0
CRDP & CPP Start Up	0	0	0	0	0	0
Deflection CRDP & CPP	0	0	0	0	0	0
Total CRDP & CPP:	290,295	0	0	290,295	290,295	0
HCBS Compliance Funding	0	0	0	0	0	0
Total HCBS:	0	0	0	0	0	0
Total Purchase of Service:	**1,398,081,236**	**92,303,739**	**93,043,718**	**1,305,037,518**	**1,398,081,236**	**0**
OPERATIONS						
25010 Salaries/Benefits	102,135,637	8,767,775	8,784,732	93,350,905	102,135,637	0
25010 Tuition Reimbursement Program	0	0	0	0	0	0
25020 Temporary Staffing Agencies	600,000	61,301	61,790	538,210	600,000	0
25020 PRMT & CalPERS UAL Deposits	0	0	0	0	0	0
Total Salaries/Benefits:	**102,735,637**	**8,829,076**	**8,846,522**	**93,889,115**	**102,735,637**	**0**
OPERATING EXPENSE						
30010 Equipment Rental	209,125	16,513	16,513	192,612	209,125	0
30020 Equipment Maint	100,000	17,920	17,920	82,080	100,000	0
30030 Facility Rent	7,978,041	529,676	1,059,676	6,918,365	7,978,041	0
30040 Facility.Maint. AV	48,857	1,970	3,344	45,513	48,857	0
30041 Facility Maint. SFV	328,563	13,196	16,071	312,491	328,563	0
30042 Facility Maint. SCV	41,065	1,206	1,256	39,809	41,065	0
30050 Communication	537,704	29,001	32,987	504,716	537,704	0
30060 General Office Exp	997,452	8,312	8,312	989,141	997,452	0
30070 Printing	68,500	0	0	68,500	68,500	0
30080 Insurance	990,110	0	941,010	49,100	990,110	0
30090 Utilities	203,074	0	226	202,847	203,074	0
30100 Data Processing	350,000	0	942	349,058	350,000	0
30110 Data Proc. Maint	134,656	46,362	46,362	88,294	134,656	0
30120 Interest Expense	78,839	0	1,153	77,686	78,839	0
30130 Bank Fees	289,805	0	0	289,805	289,805	0
30140 Legal Fees	950,000	0	0	950,000	950,000	0
30150 Board of Trustees Exp	101,500	186	335	101,165	101,500	0
30151 ARCA Dues	192,740	0	0	192,740	192,740	0
30160 Accounting Fees	125,408	0	0	125,408	125,408	0
30170 Equipment Purchases	4,018,693	16,039	61,735	3,956,959	4,018,693	0
30180 Contr/Consult-Adm	1,387,323	11,520	11,520	1,375,803	1,387,323	0
30220 Mileage/Travel	692,082	56,898	56,898	635,183	692,082	0
30240 General Expenses	1,653,330	14,997	15,928	1,637,402	1,653,330	0
30240 ABX2-1	0	0	0	0	0	0
Total Operating Expenses:	21,476,866	763,796	2,292,187	19,184,679	21,476,866	0
Total Operations:	124,212,503	9,592,872	11,138,709	113,073,794	124,212,503	0
Total Gross Budget :	1,522,293,739	101,896,611	104,182,427	1,418,111,312	1,522,293,739	0
OPS Projects:	1,308,176	0	0	1,308,176	1,308,176	0
Total Gross Budget with Projects:	**1,523,601,915**	**101,896,611**	**104,182,427**	**1,419,419,488**	**1,523,601,915**	**0**

NORTH LOS ANGELES COUNTY REGIONAL CENTER
GENERAL OPERATIONS (OPS) and PURCHASE OF SERVICES (POS) LINE ITEM REPORT
FISCAL YEAR 2026-2027
JULY 2026

	- Annual C-2 Allocation	Net Month	Expended Y-T-D	Projected Remaining Expenses	Projected Annual Expenses	Projected Surplus / (Deficit)
PURCHASE OF SERVICE						
POS (General)						
3.2 Out of Home	232,871,971	16,610,246	16,610,246	216,261,725	232,871,971	-
4.3 Day Programs	141,176,885	6,666,852	6,666,852	134,510,033	141,176,885	-
4.3 Habilitation Programs	7,548,071	706,602	706,602	6,841,469	7,548,071	-
5.4 Transportation	49,901,137	3,808,811	3,820,210	46,080,927	49,901,137	-
6.5 Other Services	966,292,878	64,511,228	65,239,809	901,053,069	966,292,878	-
Total POS (General):	**1,397,790,941**	**92,303,739**	**93,043,718**	**1,304,747,223**	**1,397,790,941**	**-**
OPERATIONS						
25010 Salaries/Benefits	101,138,007	8,619,482	8,636,253	92,501,755	101,138,007	-
25010 Tuition Reimbursement Program	-	-	-	-	-	-
25020 Temporary Staffing Agencies	600,000	61,301	61,790	538,210	600,000	-
25020 PRMT & CalPERS UAL Deposits	-	-	-	-	-	-
Total Salaries:	**101,738,007**	**8,680,783**	**8,698,043**	93,039,964	101,738,007	-
OPERATING EXPENSE						
30010 Equipment Rental	209,125	16,513	16,513	192,612	209,125	-
30020 Equipment Maint	100,000	17,920	17,920	82,080	100,000	-
30030 Facility Rental	7,978,041	529,676	1,059,676	6,918,365	7,978,041	-
30040 Facility Maint. AV	48,857	1,970	3,344	45,513	48,857	-
30041 Facility Maint. SFV	328,563	13,196	16,071	312,491	328,563	-
30042 Facility Maint. SCV	41,065	1,206	1,256	39,809	41,065	-
30050 Communication	537,704	29,001	32,987	504,716	537,704	-
30060 General Office Exp	997,452	8,312	8,312	989,141	997,452	-
30070 Printing	68,500	-	-	68,500	68,500	-
30080 Insurance	990,110	-	941,010	49,100	990,110	-
30090 Utilities	203,074	-	226	202,847	203,074	-
30100 Data Processing	350,000	-	942	349,058	350,000	-
30110 Data Proc. Maint	134,656	46,362	46,362	88,294	134,656	-
30120 Interest Expense	78,839	-	1,153	77,686	78,839	-
30130 Bank Fees	289,805	-	-	289,805	289,805	-
30140 Legal Fees	950,000	-	-	950,000	950,000	-
30150 Board of Trustees Exp	101,500	186	335	101,165	101,500	-
30151 ARCA Dues	192,740	-	-	192,740	192,740	-
30160 Accounting Fees	125,408	-	-	125,408	125,408	-
30170 Equipment Purchases & Software	4,018,693	16,039	61,735	3,956,959	4,018,693	-
30180 Contr/Consult	1,387,323	11,520	11,520	1,375,803	1,387,323	-
30220 Mileage/Travel	692,082	56,898	56,898	635,183	692,082	-
30240 General Expenses	1,653,330	14,997	15,928	1,637,402	1,653,330	-
30240 ABX2-1 Admin	-	-	-	-	-	-
Total Operating Expenses:	**21,476,866**	**763,796**	**2,292,187**	**19,184,679**	**21,476,866**	-
Total Operations:	**123,214,873**	**9,444,579**	**10,990,230**	**112,224,643**	**123,214,873**	-
Gross Budget:	1,521,005,814	101,748,318	104,033,948	1,416,971,866	1,521,005,814	-
% of Budget:	100%	6.69%	6.84%	93.16%	100.00%	0.00%

NORTH LOS ANGELES COUNTY REGIONAL CENTER
Community Resource Development Plan ("CRDP") & Community Placement Plan ("CPP") Line Item Report
Regular CPP
FISCAL YEAR 2026-2027
JULY 2026

	0 Annual C-2 Allocation	Net Month	Expended Y-T-D	Projected Remaining Expenses	Projected Annual Expenses	Projected Surplus/(Deficit)
PURCHASE OF SERVICE						
CPP Regular						
CPP Placements	280,295	0	0	280,295	280,295	0
CPP Assessments	10,000	0	0	10,000	10,000	0
CPP Start Up		0	0	0	0	0
Deflection CPP		0	0	0	0	0
Total CPP Regular:	290,295	0	0	290,295	290,295	0
OPERATIONS						
25010 Salaries/Benefits	575,350	102,608	102,730	472,620	575,350	0
Total Salaries:	575,350	102,608	102,730	472,620	575,350	0
OPERATING EXPENSE						
30010 Equipment Rental	0	0	0	0	0	0
30020 Equipment Maint	0	0	0	0	0	0
30030 Facility Rental	0	0	0	0	0	0
30040 Facility Maint. AV	0	0	0	0	0	0
30041 Facility Maint. SFV	0	0	0	0	0	0
30042 Facility Maint. SCV	0	0	0	0	0	0
30050 Communication	0	0	0	0	0	0
30060 General Office Exp	0	0	0	0	0	0
30070 Printing	0	0	0	0	0	0
30080 Insurance	0	0	0	0	0	0
30090 Utilities	0	0	0	0	0	0
30100 Data Processing	0	0	0	0	0	0
30110 Data Proc. Maint	0	0	0	0	0	0
30120 Interest Expense	0	0	0	0	0	0
30130 Bank Fees	0	0	0	0	0	0
30140 Legal Fees	0	0	0	0	0	0
30150 Board of Trustees Exp	0	0	0	0	0	0
30151 ARCA Dues	0	0	0	0	0	0
30160 Accounting Fees	0	0	0	0	0	0
30170 Equipment Purchases	0	0	0	0	0	0
30180 Contr/Consult CPP	0	0	0	0	0	0
30220 Mileage/Travel	0	0	0	0	0	0
30240 General Expenses	0	0	0	0	0	0
Total Operating Expenses:	0	0	0	0	0	0
Total Operations:	575,350	102,608	102,730	472,620	575,350	0
Gross Budget:	865,645	102,608	102,730	762,915	865,645	0
% of Budget:	100.00%	11.85%	11.87%	88.13%	100.00%	0%

NORTH LOS ANGELES COUNTY REGIONAL CENTER
Community Resource Development Plan ("CRDP") & Community Placement Plan ("CPP") Line Item Report
Developmental Center ("DC") Closure/Ongoing Workload
FISCAL YEAR 2026-2027
JULY 2026

	0 Annual C-2 Allocation	Net Month	Expended Y-T-D	Projected Remaining Expenses	Projected Annual Expenses	Projected Surplus/(Deficit)
PURCHASE OF SERVICE						
CRDP/CPP						
CRDP & CPP Placements	0	0	0	0	0	0
CRDP & CPP Assessments	0	0	0	0	0	0
CRDP & CPP Start Up	0	0	0	0	0	0
Deflection CRDP & CPP	0	0	0	0	0	0
Total CRDP/CPP:	0	0	0	0	0	0
OPERATIONS						
25010 Salaries/Benefits	422,280	45,685	45,749	376,531	422,280	0
Total Salaries:	422,280	45,685	45,749	376,531	422,280	0
OPERATING EXPENSE						
30010 Equipment Rental	0	0	0	0	0	0
30020 Equipment Maint	0	0	0	0	0	0
30030 Facility Rental	0	0	0	0	0	0
30040 Facility Maint. AV	0	0	0	0	0	0
30041 Facility Maint. SFV	0	0	0	0	0	0
30042 Facility Maint. SCV	0	0	0	0	0	0
30050 Communication	0	0	0	0	0	0
30060 General Office Exp	0	0	0	0	0	0
30070 Printing	0	0	0	0	0	0
30080 Insurance	0	0	0	0	0	0
30090 Utilities	0	0	0	0	0	0
30100 Data Processing	0	0	0	0	0	0
30110 Data Proc. Maint	0	0	0	0	0	0
30120 Interest Expense	0	0	0	0	0	0
30130 Bank Fees	0	0	0	0	0	0
30140 Legal Fees	0	0	0	0	0	0
30150 Board of Trustees Exp	0	0	0	0	0	0
30151 ARCA Dues	0	0	0	0	0	0
30160 Accounting Fees	0	0	0	0	0	0
30170 Equipment Purchases	0	0	0	0	0	0
30180 Contr/Consult CPP	0	0	0	0	0	0
30220 Mileage/Travel	0	0	0	0	0	0
30240 General Expenses	0	0	0	0	0	0
Total Operating Expenses:	0	0	0	0	0	0
Total Operations:	422,280	45,685	45,749	376,531	422,280	0
Gross Budget:	422,280	45,685	45,749	376,531	422,280	0
% of Budget:	100.00%	10.82%	10.83%	89.17%	100.00%	0.00%

NORTH LOS ANGELES COUNTY REGIONAL CENTER

Operations ("OPS") Project Line Item Report

FISCAL YEAR 2026-2027

JULY 2026

	0 Annual C-2 Allocation	EXPENDED MONTH	EXPENDED Y-T-D	BALANCE REMAINING	PROJECTED EXPENDITURES	SURPLUS/ (DEFICIT)
Family Resource Center ("**FRC**")	$227,357	$0	$0	$227,357	$227,357	$0
Self Determination Program ("**SDP**") Participant Support	$0	$0	$0	$0	$0	$0
Language Access & Cultural Competency	$1,080,819	$0	$0	$1,080,819	$1,080,819	$0
TOTAL:	**$1,308,176**	**$0**	**$0**	**$1,308,176**	**$1,308,176**	**$0**

Family Resource Center: Family Resource Center provides services and support for families and infants and toddlers, under the age of three years, that have a developmental delay, disability, or condition that places them at risk of a disability. Services include, as specified in Government Code 95024(d)(2), parent-to-parent support, information dissemination, public awareness, and family-professional collaboration activities; and per Government Code 95001(a)94), family-to-family support to strengthen families' ability to participate in service planning.

Self Determination Program Participant Support: The SDP allows for regional center consumers and their families more freedom, control, and responsibility in choosing services, supports, and providers to help meet the objectives in their individual program plans. The SDP Participant Support is for regional centers, in collaboration with the local volunteer advisory committees, to assist selected participants in their transition to SDP.

NORTH LOS ANGELES COUNTY REGIONAL CENTER

Purchase of Services ("POS") Project Line Item Report

FISCAL YEAR 2026-2027

JULY 2026

	0 Annual C-2 Allocation	EXPENDED MONTH	EXPENDED Y-T-D	BALANCE REMAINING	PROJECTED EXPENDITURES	SURPLUS/ (DEFICIT)
HCBS Provider Funding for Compliance Activities	$0	$0	$0	$0	$0	$0
TOTAL:	**$0**	**$0**	**$0**	**$0**	**$0**	**$0**

Home and Community-Based Services ("HCBS") Compliance Funding: The HCBS Rules require that programs funded through Medicaid (called Medi-Cal in California) provide individuals with disabilities full access to the benefits of community living and offer services and supports in settings that are integrated in the community. This could include opportunities to seek employment in competitive and integrated settings, control personal resources, and engage in the community to the same degree as individuals who do not receive regional center services. The HCBS rules focus on the nature and quality of the individuals' experience and not just the setting where the services are delivered.

North Los Angeles County Regional Center
Administrative vs. Direct Allocation Report - Consolidated
Fiscal Year 2026-2027 (Service Month of July 2026 as of August 21, 2026 State Claim)

	Current Month			YTD		
Description	Administrative Operating Expenses	Direct Operating Expenses	Total Operating Expenses	Administrative Operating Expenses	Direct Operating Expenses	Total Operating Expenses
Salaries & Wages	818,962.76	6,679,551.38	7,498,514.14	819,452.36	6,679,551.38	7,499,003.74
Benefits **	109,062.04	1,221,499.92	1,330,561.96	112,646.30	1,234,872.0	1,347,518.29
Subtotal Salaries & Benefits	**928,024.80**	**7,901,051.30**	**8,829,076.10**	**932,098.66**	**7,914,423.37**	**8,846,522.03**
Salaries & Benefits Allocation	**10.5%**	**89.5%**	**100.0%**	**10.5%**	**89.5%**	**100.0%**
Equipment Rental	1,401.95	15,110.96	16,512.91	1,401.95	15,110.96	16,512.91
Equipment Maintenance	17,920.00	Not Allowable	17,920.00	17,920.00	Not Allowable	17,920.00
Facility Rent	28,230.48	501,445.53	529,676.01	243,451.27	816,224.86	1,059,676.13
Facility Maintenance-AV	1,969.65	Not Allowable	1,969.65	3,343.65	Not Allowable	3,343.65
Facility Maintenance-Van Nuys	13,196.07	Not Allowable	13,196.07	16,071.24	Not Allowable	16,071.24
Facility Maintenance-SCV	1,206.00	Not Allowable	1,206.00	1,256.00	Not Allowable	1,256.00
Communication	2,407.88	26,593.46	29,001.34	2,698.81	30,288.38	32,987.19
General Office Expenses	621.69	7,689.84	8,311.53	621.69	7,689.84	8,311.53
Printing	0.00	0.00	0.00	0.00	0.00	0.00
Insurance	0.00	0.00	0.00	213,653.73	727,356.27	941,010.00
Insurance-Deductible	0.00	0.00	0.00	0.00	0.00	0.00
Utilities-AV	0.00	0.00	0.00	0.00	226.16	226.16
Data Processing-Payroll Fees	0.00	Not Allowable	0.00	941.80	Not Allowable	941.80
Data Processing-Outside Svcs	0.00	Not Allowable	0.00	0.00	Not Allowable	0.00
Data Processing-Misc	0.00	Not Allowable	0.00	0.00	Not Allowable	0.00
Data Processing Maint.	46,362.05	Not Allowable	46,362.05	46,362.05	Not Allowable	46,362.05
Interest Expense	0.00	0.00	0.00	1,153.18	0.00	1,153.18
Bank Fees	0.00	0.00	0.00	0.00	0.00	0.00
Bank Fees-PRMT	0.00	0.00	0.00	0.00	0.00	0.00
Legal Fees	0.00	0.00	0.00	0.00	0.00	0.00
Legal Fees-Insurance Deductible	0.00	0.00	0.00	0.00	0.00	0.00
Brd. of Director Exp.	185.55	0.00	185.55	334.68	0.00	334.68
ARCA Dues	0.00	0.00	0.00	0.00	0.00	0.00
Accounting Fees	0.00	0.00	0.00	0.00	0.00	0.00
Equipment Purchases	1,044.10	11,253.89	12,297.99	1,044.10	11,253.89	12,297.99
Software and Licenses	317.65	3,423.85	3,741.50	2,733.84	29,466.86	32,200.70
Equipment - AV Loan Principle Payments	0.00	0.00	0.00	0.00	17,235.95	17,235.95
Contractor/Consultant	978.05	10,541.95	11,520.00	978.05	10,541.95	11,520.00
Contr./Consult.: FFRC Library	0.00	0.00	0.00	0.00	0.00	0.00
Contr./Consult.: CPP	0.00	0.00	0.00	0.00	0.00	0.00
Mileage	1,326.42	50,994.88	52,321.30	1,326.42	50,994.88	52,321.30
Travel	345.94	4,230.82	4,576.76	345.94	4,230.82	4,576.76
General Expenses	1,117.24	13,880.07	14,997.31	1,139.90	14,788.08	15,927.98
General Expenses-Remodel AV	0.00	0.00	0.00	0.00	0.00	0.00
General Expenses-Remodel SCV	0.00	0.00	0.00	0.00	0.00	0.00
General Expenses-Remodel SFV	0.00	0.00	0.00	0.00	0.00	0.00
ABX2-1 Admin Expenses	0.00	0.00	0.00	0.00	0.00	0.00
ARPA Social Recreation Project	0.00	0.00	0.00	0.00	0.00	0.00
Equity/Disparity Projects	0.00	0.00	0.00	0.00	0.00	0.00
CalFRESH Project	0.00	0.00	0.00	0.00	0.00	0.00
Restricted: Language Access & Cultural Comp	0.00	0.00	0.00	0.00	0.00	0.00
Restricted: SDP-Participants Support	0.00	0.00	0.00	0.00	0.00	0.00
Subtotal Operating Expenses	**118,630.72**	**645,165.25**	**763,795.97**	**556,778.30**	**1,735,408.90**	**2,292,187.20**
Operating Expenses Allocation	**15.5%**	**84.5%**	**100.0%**	**24.3%**	**75.7%**	**100.0%**
Total Salaries & Operating Expenses	**1,046,655.52**	**8,546,216.55**	**9,592,872.07**	**1,488,876.96**	**9,649,832.27**	**11,138,709.23**
Salaries & Operating Exp. Allocation	**10.9%**	**89.1%**	**100.0%**	**13.4%**	**86.6%**	**100.0%**
Project Funds: Family Resource Center	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**
Income Not from DDS (i.e. Interest)	**(130,162.25)**	**0.00**	**(130,162.25)**	**(130,188.35)**	**0.00**	**(130,188.35)**
Total Expenses Less Other Income	**916,493.27**	**8,546,216.55**	**9,462,709.82**	**1,358,688.61**	**9,649,832.27**	**11,008,520.88**
Total Expenses Admin vs Direct Allocation	**9.69%**	**90.31%**	**100.00%**	**12.3%**	**87.7%**	**100.0%**

Rolling 12-Month Attendance	Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Jan-27	Feb-27	Mar-27	Apr-27	May-27	Jun-27	Total	Total
	Dark		Board	Dark	Board	Dark	Board	Board	Board	Board	Board	Board	Absences	Hours
Nicholas Abrahms		P	P										**0**	6.50
George Alvarado		P	P										**0**	6.50
Cathy Blin		P	P										**0**	6.50
Sharmila Brunjes		P	P										**0**	6.50
Sonia Campos		Ab	Ab										**2**	0.00
Jacquie Colton		P	Ab										**1**	3.00
Kulwant Dosanjh		P	P										**0**	6.50
Leticia Garcia		P	P										**0**	6.50
Juan Hernandez		P	P										**0**	6.50
Anna Hurst		P	P										**0**	6.50
Jennifer Koster		P	P										**0**	6.50
Laura Monge		P	P										**0**	6.50
Tal Segalovitch *(VAC Rep)*		P	Ab										**0**	3.00
Jeremy Sunderland		P	P										**0**	6.50
Jason Taketa		Ab	P										**1**	3.50
Puja Trivedi		P	P										**0**	6.50
Curtis Wang		P	Ab										**1**	3.00
Meeting Time		3	3.5											6.50

P = Present Ab = Absent

Attendance Policy: In the event a Trustee shall be absent from three (3) consecutive regularly-scheduled Board meetings or from three (3) consecutive meetings of any one or more committees on which

North Los Angeles County Regional Center

Consumer Advisory Committee

FY 26-27 Meeting Attendance

Consumer Attendee **Committee Members*	**July** 2026 **DARK**	**August** 2026	**Sep** 2026	**Oct** 2026 **DARK**	**Nov** 2026	**Dec** 2026 **DARK**	**Jan** 2027	**Feb** 2027	**Mar** 2027	**Apr** 2027	**May** 2027	**Jun** 2027	**TOTALS** **Absences**	**TOTALS** **Attended** (*Non-CM*)
Meeting Length														
***Juan Hernandez, Chair**		P	Ab										**1**	
***Bill Abramson**		Ab	P										**1**	
***Pam Aiona**		P	P										**0**	
***Jennifer Koster**		P	P										**0**	
***Destry Walker**		P	P										**0**	
***George Alvarado**		Ab	Ab										**2**	
***Elena Tiffany**		P	P										**0**	
		1	1.5											

Membership: Consumers who attend 5 meetings in a 12-month period can become a CAC Member.

FY 2026-2027	Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Jan-27	Feb-27	Mar-27	4/1/127	5/1/127	Jun-27	Total	Total
Community Relations Committee	Dark		Dark	Dark		Dark		Dark		Dark		Dark	Absences	Hours
Nicholas Abrahms		P											**0**	1.50
George Alvarado		Ab											**0**	1.50
Cathy Blin		P											**0**	1.50
Sharmila Brunjes													**0**	
Jacquie Colton		P											**0**	1.50
Lety Garcia		Ab											**1**	0.00
Juan Hernandez		P											**0**	1.50
Jennifer Koster		P											**0**	1.50
Laura Monge		P											**0**	1.50
Jeremy Sunderland		P											**0**	1.50
Jason Taketa		Ab											**1**	0.00
Curtis Wang		P											**0**	1.50
Sharon Weinberg (VAC Rep)		P											**0**	1.50
Meeting Time		1.50												1.5

P = Present Ab = Absent

Attendance Policy: In the event a Trustee shall be absent from three (3) consecutive regularly-scheduled Board meetings or from three (3) consecutive meetings of any one or more committees on which he or she may be serving, or shall be absent from five (5) regularly-scheduled Board meetings or from five (5) meetings of any one or more Committees on which he or she may be serving during any twelve (12) month period, then the Trustee shall, without any notice or further action required of the Board, be automatically deemed to have resigned from the Board effective immediately. The secretary of the Board shall mail notice of each Trustee's absences during the preceding twelve (12) month period to each Board member following each regularly-scheduled Board meeting. (policy adopted 2-10-99)

FY 2026-27	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Jan-27	Feb-27	Mar-27	Apr-27	May-27	Jun-27	Total Absences	Total Hours
Executive Finance Committee			**Dark**		**Dark**						**Dark**		
Sharmila Brunjes	P	P										**0**	4.00
Juan Hernandez	P	P										**0**	4.00
Anna Hurst	P	Ab										**1**	2.25
Curtis Wang	P	Ab										**1**	2.25
Jeremy Sunderland	P	P										**0**	4.00
Jacquie Colton	P	Ab										**1**	2.25
Jason Taketa	P	Ab										**1**	2.25
Laura Monge	Ab	P										**1**	1.75
Tal Segalovitch	P	P										**0**	4.00
Meeting Time	2.25	1.75											4.00

P = Present Ab = Absent

Attendance Policy: In the event a Trustee shall be absent from three (3) consecutive regularly-scheduled Board meetings or from three (3) consecutive meetings of any one or more committees on which he or she may be serving, or shall be absent from five (5) regularly-scheduled Board meetings or from five (5) meetings of any one or more Committees on which he or she may be serving during any twelve (12) month period, then the Trustee shall, without any notice or further action required of the Board, be automatically deemed to have resigned from the Board effective immediately. The secretary of the Board shall mail notice of each Trustee's absences during the preceding twelve (12) month period to each Board member following each regularly-scheduled Board meeting. (policy adopted 2-10-99)

FY 2026-2027 Nominating Committee	Jul-26 Dark	Aug-26	Sep-26	Oct-26 Dark	Nov-26 Dark	Dec-26 Dark	Jan-27	Feb-27	Mar-27	Apr-27	May-27 Dark	Jun-27 Dark	Total Absences	Total Hours
Curtis Wang, Chair		P	P											2.00
Sharmila Brunjes		P	P											1.25
Lety Garcia		Ab	P											0.75
Juan Hernandez		P	Ab											1.25
Jaklen Keshishyan VAC Rep			P											0.75
Meeting Time		1.25	0.75											2.00

P = Present Ab = Absent

Attendance Policy: In the event a Trustee shall be absent from three (3) consecutive regularly-scheduled Board meetings or from three (3) consecutive meetings of any one or more committees on which he or she may be serving, or shall be absent from five (5) regularly-scheduled Board meetings or from five (5) meetings of any one or more Committees on which he or she may be serving during any twelve (12) month period, then the Trustee shall, without any notice or further action required of the Board, be automatically deemed to have resigned from the Board effective immediately. The secretary of the Board shall mail notice of each Trustee's absences during the preceding twelve (12) month period to each Board member following each regularly-scheduled Board meeting. (policy adopted 2-10-99)

FY 2026-2027	Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Jan-17	Feb-27	Mar-27	Apr-27	May-27	Jun-27	Total	Total
Post-Retirement Medical Trust	Dark		Dark	Dark		Dark	Dark		Dark	Dark		Dark	Absences	Hours
Sharmila Brunjes		P											**0**	0.75
Juan Hernandez		P											**0**	0.75
Anna Hurst		P											**0**	0.75
Angela Pao-Johnson - Staff		Ab											**1**	
Vini Montague - Staff		P											**0**	0.75
Meeting Time		0.75												

P = Present Ab = Absent * = Joined Committee

Attendance Policy: In the event a Trustee shall be absent from three (3) consecutive regularly-scheduled Board meetings or from three (3) consecutive meetings of any one or more committees on which he or she may be serving, or shall be absent from five (5) regularly-scheduled Board meetings or from five (5) meetings of any one or more Committees on which he or she may be serving during any twelve (12) month period, then the Trustee shall, without any notice or further action required of the Board, be automatically deemed to have resigned from the Board effective immediately. The secretary of the Board shall mail notice of each Trustee's absences during the preceding twelve (12) month period to each Board member following each regularly-scheduled Board meeting. (policy adopted 2-10-99)

FY 2026-2027 Vendor Advisory Committee	Jul-26 Dark	Aug-26 Special meeting	Aug-26	Sep-26	Oct-26 Dark	Nov-26	Dec-26 Dark	Jan-27	Feb-27	Mar-27	Apr-27	May-27	Jun-27 Dark	Total Absences
Tal Segalovtich, Chair		P	P	P										**0**
Jaklen Keshishyan, Alt. Chair		P	P	P										**0**
Jodie Agnew Navarro		P	P	P										**0**
Masood Babaeian		Ab	P	P										**0**
Paul Borda		Ab	Ab	Ab										**1**
Andrea Devers		P	P	P										**0**
Jason Gillis		P	P	P										**0**
Ricki Macken Chilvers		P	P	P										**0**
Vahe Mkrtchian		P	P	Ab										**0**
Desiree Misrachi		P	P	P										**0**
Lea Munoz		P	P	P										**0**
Jen Pippard		P	P	P										**0**
Octavia Watkins		Ab	P	P										**0**
Sharon Weinberg		P	P	P										**0**
Alona Yorkshire		P	P	P										**0**
Meeting Time		0.25	1.75											

P = Present Ab = Absent

Attendance Policy: In the event a Trustee shall be absent from three (3) consecutive regularly-scheduled Board meetings or from three (3) consecutive meetings of any one or more committees on which he or she may be serving, or shall be absent from five (5) regularly-scheduled Board meetings or from five (5) meetings of any one or more Committees on which he or she may be serving during any twelve (12) month period, then the Trustee shall, without any notice or further action required of the Board, be automatically deemed to have resigned from the Board effective immediately. The secretary of the Board shall mail notice of each Trustee's absences during the preceding twelve (12) month period to each Board member following each regularly-scheduled Board meeting. (policy adopted 2-10-99)

North Los Angeles County Regional Center

ALPHABET SOUP

AAIDD	- American Association on Intellectual and Developmental Disabilities
AAP	- Adoption Assistance Program
AB	- Assembly Bill (State)
ABLE Act	- The "Achieving a Better Life Experience" (ABLE) Act of 2014
ACRC	- Alta California Regional Center
ADA	- Americans with Disabilities Act
ADC	- Adult Development Center
AFPF	- Annual Family Program Fee
AIS	- ARCA Information Systems
ARCA	- Association of Regional Center Agencies
ARFPSHN	- Adult Residential Facility for Persons with Specialized Healthcare Needs
BCBA	- Board-Certified Behavior Analyst
CAC	- Consumer Advisory Committee
CAL-ARF	- California Association of Rehabilitation Facilities
CAL-TASH	- The Association for Persons with Severe Handicaps
CARF	- Commission on Accreditation of Rehabilitation Facilities
CASA	- Community Advocacy Services Association
CASHPCR	- California Association of State Hospitals-Parent Councils for the Retarded
CCF	- Community Care Facility
CCL	- Community Care Licensing
CCR	- California Code of Regulations
CCS	- California Children's Services (State and County)
CDCAN	- California Disability Community Action Network
CDE	- Comprehensive Diagnostic Evaluation
CDER	- Client Development Evaluation Report
CIE	- Competitive Integrated Employment
CMS	- Centers for Medicare and Medicaid Services (formerly HCFA)
CMIS	- Client Management Information System
COEC	- Community Outreach and Education Committee (ARCA)
COLA	- Cost of Living Adjustment
CP	- Cerebral Palsy
CPES	- Community Provider of Enrichment Services
CPP	- Community Placement Plan
CRDP	- Community Resource Development Plan
CSC	- Consumer Service Coordinator

CSLA - Community Supported Living Arrangement
CVRC - Central Valley Regional Center

DAC - Day Activity Center
DCFS - Department of Children and Family Services (County)
DD - Developmental Disabilities
DD Council - State Council on Developmental Disabilities
DDS - Department of Developmental Services (State)
DHCS - Department of Health Care Services
DHS - Department of Health Services (State)
DOE - Department of Education (State and Federal)
DOF - Department of Finance
DOH - Department of Health
DOR/DR - Department of Rehabilitation
DPSS - Department of Public Social Services (County)
DRC - Disability Rights California (formerly Protection & Advocacy, Inc.)
DSM - Diagnostic and Statistical Manual of Mental Disorders
DSP - Direct Support Professional
DSS - Department of Social Services (State)
DOR - Department of Rehabilitation (State)
DRC - Disability Rights California (formerly Protection & Advocacy)
DTT - Discrete Trial Training
DVU - Disability Voices United

EBSH - Enhanced Behavioral Support Home
ECF - Exceptional Children's Foundation
EDD - Employment Development Department (State)
EDMS - Electronic Document Management System
ELARC - Eastern Los Angeles Regional Center
EPSDT - Early and Periodic Screening, Diagnosis, and Treatment

FACT - Foundation for Advocacy, Conservatorship, and Trust of CA
FCPP - Family Cost Participation Program
FDC - Fairview Developmental Center
FEMA - Federal Emergency Management Assistance
FETA - Family Empowerment Team in Action
FHA - Family Home Agency
FMS - Financial Management Service
FNRC - Far Northern Regional Center
FSA - Flexible Spending Account

GGRC - Golden Gate Regional Center

HCBS - Home and Community Based Services (Waiver)
HCFA - Health Care Financing Administration (now called CMMS)
HIPAA - Health Insurance Portability and Accountability Act
HOPE - Home Ownership for Personal Empowerment
HRC - Harbor Regional Center
HUD - Housing and Urban Development (Federal)

ICB Model - Individualized Choice Budget Model
ICC - Inter-agency Coordinating Council
ICC - Integrated Community Collaborative/Intregadoras
ICF - Intermediate Care Facility
ICF/DD - Intermediate Care Facility/Developmentally Disabled
ICF/DD-H - Intermediate Care Facility/Developmentally Disabled-Habilitative
ICF/DD-N - Intermediate Care Facility/Developmentally Disabled-Nursing
ICF/SPA - Intermediate Care Facility/State Plan Amendment
IDEA - Individuals with Disabilities Education Act
IDEIA - Individuals with Disabilities Education Improvement Act
IDP - Individual Development Plan
IDT - Inter-disciplinary Team
IEP - Individual Educational Plan
IFSP - Individual Family Service Plan
IHP - Individual Habilitation Plan
IHSS - In-Home Supportive Services
ILC - Independent Living Center
ILS - Independent Living Services
IMD - Institutes of Mental Disease
IPP - Individual Program Plan
IRC - Inland Regional Center
ISP - Individual Service Plan

KRC - Kern Regional Center

LACHD - Los Angeles County Health Department
LACDMH - Los Angeles County Department of Mental Health
LACTC - Los Angeles County Transportation Commission
LADOT - Los Angeles Department of Transportation (City)
LAUSD - Los Angeles Unified School District

LCSW	- Licensed Clinical Social Worker
LDC	- Lanterman Developmental Center
LEA	- Local Education Agency
LICA	- Local Interagency Coordination Area
LRC	- Lanterman Regional Center
MCH	- Maternal and Child Health
MFCC	- Marriage, Family and Child Counselor
MHRC	- Mental Health Rehabilitation Center
MMIS	- Medicaid Management Information System
MSW	- Masters in Social Work
NADD	- National Association for the Dually Diagnosed
NASDDDS	- National Association of State Directors of Developmental Disabilities Services
NBRC	- North Bay Regional Center
NLACRC	- North Los Angeles County Regional Center
OAH	- Office of Administrative Hearings
OCRA	- Office of Client Rights Advocacy
OPS	- Operations funds (for Regional Centers)
OSEP	- Office of Special Education Programs
OSERS	- Office of Special Education and Rehabilitative Services
OSHA	- Occupational Safety and Health Administration
OT	- Occupational Therapy
PAI	- Protection and Advocacy, Inc. (now called Disability Rights CA)
PDD	- Pervasive Developmental Disorder
PDC	- Porterville Developmental Center
PDF	- Program Development Fund
PEP	- Purchase of Service Expenditure Projection (formerly SOAR)
PEPRA	- Public Employees' Pension Reform Act
PERS	- Public Employees' Retirement System
PET	- Psychiatric Emergency Team
PIP	- Paid Internship Program
PL 94-142	- Public Law 94-142 (Right to Education Bill)
PMRT	- Psychiatric Mobile Response Team
POLST	- Physician Orders for Life-Sustaining Treatment
POS	- Purchase of Services funds (for Regional Centers)
PRMT	- Post-Retirement Medical Trust

PRRS - Prevention Resources and Referral Services
PRUCOL - Permanently Residing in the U.S. Under Color of the Law
PT - Physical Therapy

QMRP - Qualified Mental Retardation Professional

RC - Regional Center
RCEB - Regional Center of the East Bay
RCFE - Residential Care Facility for the Elderly
RCOC - Regional Center of Orange County
RCRC - Redwood Coast Regional Center
RDP - Resource Development Plan
RFP - Request for Proposals
RRDP - Regional Resource Development Project
RSST - Residential Service Specialist Training

SARC - San Andreas Regional Center
SB - Senate Bill (State)
SCDD - State Council on Developmental Disabilities
SCIHLP - Southern CA Integrated Health and Living Project
SCLARC - South Central Los Angeles Regional Center
SDRC - San Diego Regional Center
SDC - Sonoma Developmental Center
SDP - Self-Determination Program
SDS - Self-Directed Services
SEIU - Service Employees' International Union
SELPA - Special Education Local Plan Area
SG/PRC - San Gabriel/Pomona Regional Center
SLS - Supported Living Services
SMA - Schedule of Maximum Allowances (Medi-Cal)
SNF - Skilled Nursing Facility
SOAR - Sufficiency of Allocation Report (see PEP)
SOCCO - Society of Community Care Home Operators
SPA - State Plan Amendment
SRF - Specialized Residential Facility
SSA - Social Security Administration
SSDI - Social Security Disability Insurance
SSI - Supplemental Security Income
SSP - State Supplementary Program

TASH	- The Association for the Severely Handicapped
TCRC	- Tri-Counties Regional Center
UAP	- University Affiliated Program
UCI	- Unique Client Identifier
UCP	- United Cerebral Palsy
UFS	- Uniform Fiscal System
VAC	- Vendor Advisory Committee
VIA	- Valley Industry Association (Santa Clarita Valley)
VICA	- Valley Industry & Commerce Association (San Fernando Valley)
VMRC	- Valley Mountain Regional Center
WAP	- Work Activity Program
WIOA	- Workforce Innovation and Opportunity Act

[alphabetsoup] January 7, 2021

2026-2027 Board of Trustees / Committee Meeting Schedule
August through July

August 2026

	TBD		BOARD ORIENTATION (In-Person Chatsworth)
W	08/05/26	5:30pm	NOMINATING
Th	08/06/26	5:00pm	CONSUMER ADVISORY
M	08/10/26	5:00pm	BOARD PACKET REVIEW AND TRAINING
W	08/12/26	4:00pm	BOARD PRE-MEETING DINNER (OPTIONAL)
W	08/12/26	5:00pm	DDS MEETING IN-PERSON
W	08/12/26	6:00pm	BOARD MEETING (Hybrid - Chatsworth)
Th	08/13/26	9:30am	VENDOR ADVISORY (Hybrid - Chatsworth)
W	08/19/26	5:00pm	COMMUNITY RELATIONS (Zoom)
Th	08/20/26	5:00pm	POST-RETIREMENT MEDICAL TRUST
Th	08/27/26	5:00pm	EXECUTIVE FINANCE

September 2026

W	09/02/26	5:30pm	NOMINATING
Th	09/03/26	5:00pm	CONSUMER ADVISORY
T	09/08/26	5:00pm	BOARD PACKET REVIEW AND TRAINING
W	09/09/26	6:00pm	BOARD MEETING
Th	09/10/26	9:30am	VENDOR ADVISORY (Hybrid - Santa Clarita)
Th	09/24/26	5:00pm	EXECUTIVE FINANCE

October 2026

November 2026

Th	11/05/26	5:00pm	CONSUMER ADVISORY
M	11/02/26	5:00pm	BOARD PACKET REVIEW AND TRAINING
W	11/04/26	4:00pm	BOARD PRE-MEETING DINNER (OPTIONAL)
W	11/04/26	5:00pm	DDS MEETING IN-PERSON
W	11/04/26	6:00PM	BOARD MEETING (Hybrid - Santa Clarita)
Th	11/12/26	9:30am	VENDOR ADVISORY (Hybrid - Antelope Valley)
W	11/18/26	5:00pm	COMMUNITY RELATIONS
Th	11/19/26	5:00pm	POST-RETIREMENT MEDICAL TRUST
TBD	TBD	TBD	EXECUTIVE FINANCE

December 2026

January 2027

W	01/06/27	5:30pm	NOMINATING
Th	01/07/27	5:00pm	CONSUMER ADVISORY
M	01/11/27	5:00pm	BOARD PACKET REVIEW AND TRAINING
W	01/13/27	5:00pm	BOARD MEETING
Th	01/14/27	9:30am	VENDOR ADVISORY (Hybrid - Chatsworth)
W	01/20/27	5:00pm	COMMUNITY RELATIONS
Th	01/28/27	5:00pm	EXECUTIVE FINANCE

February 2027

W	02/03/27	5:30pm	NOMINATING
Th	02/04/27	5:00pm	CONSUMER ADVISORY
M	02/08/27	5:00pm	BOARD PACKET REVIEW AND TRAINING
W	02/10/27	4:00pm	BOARD PRE-MEETING DINNER (OPTONAL)
W	02/10/27	5:00pm	DDS MEETING IN-PERSON
W	02/10/27	6:00pm	BOARD MEETING (Hybrid - Antelope Valley)
Th	02/11/27	9:30am	VENDOR ADVISORY (Hybrid - Santa Clarita)
Th	02/18/27	5:00pm	POST-RETIREMENT MEDICAL
Th	02/25/27	5:00pm	EXECUTIVE FINANCE

March 2027

W	03/03/27	5:30pm	NOMINATING
Th	03/04/27	5:00pm	CONSUMER ADVISORY
M	03/08/27	5:00pm	BOARD PACKET REVIEW AND TRAINING
W	03/10/27	6:00pm	BOARD MEETING
Th	03/11/27	9:30am	VENDOR ADVISORY (Hybrid - Antelope Valley)
W	03/17/27	5:00pm	COMMUNITY RELATIONS
Th	03/25/27	5:00pm	EXECUTIVE FINANCE

April 2027

Th	04/01/27	5:00pm	CONSUMER ADVISORY
W	04/07/27	5:30pm	NOMINATING
Th	04/08/27	9:30am	VENDOR ADVISORY (Hybrid - Chatsworth)
M	04/12/27	5:00pm	BOARD PACKET REVIEW AND TRAINING
W	04/14/27	6:00pm	BOARD MEETING
Th	04/29/27	5:00pm	EXECUTIVE FINANCE

May 2027

Th	05/06/27	5:00pm	CONSUMER ADVISORY
M	05/10/27	5:00pm	BOARD PACKET REVIEW AND TRAINING
W	05/12/27	4:00pm	BOARD PRE-MEETING DINNER (OPTIONAL)
W	05/12/27	5:00pm	DDS MEETING IN-PERSON
W	05/12/27	6:00pm	BOARD MEETING (Hybrid - Chatsworth)
Th	05/13/27	9:30am	VENDOR ADVISORY (Hybrid - Santa Clarita)
W	05/19/27	5:00pm	COMMUNITY RELATIONS
Th	05/20/27	5:00pm	POST-RETIREMENT MEDICAL TRUST
Th	05/27/27	5:00pm	EXECUTIVE FINANCE

June 2027

Th	06/03/27	5:00pm	CONSUMER ADVISORY
M	06/07/27	5:00pm	BOARD PACKET REVIEW AND TRAINING
W	06/09/27	6:00pm	BOARD MEETING
Th	06/10/27	9:30am	VENDOR ADVISORY (Hybrid - Antelope Valley)

July 2027

Dark Month* - July, October, and December

BOARD ADVISORY COMMITTEE LIST

FY 2026-2027

Vendor Advisory
Angela Pao-Johnson, Staff
Lindsay Granger, Admin
Tal Segalovitch, Chair
Jaklen Keshishyan, Alt. Chair
Jodie Agnew-Navarro
Octavia Watkins
Masood Babaeian
Paul Borda
Andrea Devers
Jason Gillis
Ricki Macken Chilvers
Desiree Misrachi
Vahe Mkrtchian
Lea Munoz
Jen Pippard
Sharon Weinberg
Alona Yorkshire

Consumer Advisory
Santos Rodriguez
Lindsay Granger, Admin.
Juan Hernandez, Co-Chair
Elena Tiffany, Co-Chair
Bill Abramson
Pam Aiona
George Alvarado
Jennifer Koster
Destry Walker

Self Determination
Silvia Renteria-Haro, Staff
Robin Monroe, Staff
Lori Walker, Chair
Jennifer Koster – Board Liaison
Miriam Erberich, Co-Chair
Victoria Berrey
Michael Carey
Socorro Curameng
Richard Dier
Jordan Feinstock
Jon Francis
Ricardo Martinez
Erica Rodriguez

BOARD & BOARD COMMITTEE LIST

FY 2026-2027

Board of Trustees
Sharmila Brunjes – Board President
Juan Hernandez – Vice President, CAC Chair
Curtis Wang – Secretary
Anna Hurst - Treasurer
Jeremy Sunderland – ARCA Rep
Tal Segalovitch – VAC Chair
Nicholas Abrahms
George Alvarado
Cathy Blin
Sonia Campos
Jacquie Colton
Kulwant Dosanjh
Lety Garcia
Jennifer Koster
Laura Monge
Jason Taketa
Puja Trivedi

Executive Finance
Angela Pao-Johnson, Staff
Vini Montague, Staff
Lindsay Granger, Admin
Sharmila Brunjes, Chair
Anna Hurst, Alt. Chair
Juan Hernandez
Curtis Wang
Jeremy Sunderland
Jacquie Colton
Laura Monge
Jason Taketa
VAC Representative
Tal Segalovitch

Community Relations
Evelyn McOmie, Staff
Chris Whitlock, Staff
Lindsay Granger, Admin
Jeremy Sunderland, Co-Chair
Cathy Blin, Co-Chair
Nicholas Abrahms
George Alvarado
Jacquie Colton
Lety Garcia
Juan Hernandez
Jennifer Koster
Laura Monge
Jason Taketa
Curtis Wang
VAC Representative
Sharon Weinberg

Nominating
Evelyn McOmie, Staff
Lindsay Granger, Admin
Curtis Wang, Chair
Lety Garcia
Sharmila Brunjes
Juan Hernandez
VAC Representative
Jaklen Keshishyan

Post-Retirement Medical Trust
Vini Montague, Staff
Lindsay Granger, Admin
Sharmila Brunjes, Chair
Juan Hernandez
Angela Pao-Johnson
Vini Montague
Anna Hurst