

BOARD OF DIRECTORS MEETING

Wednesday, September 22, 2021 - 6:00 PM

Register in advance for this meeting/webinar:

https://us02web.zoom.us/webinar/register/WN eYf -IGYTW6Wflkuus-GPg

After registering, you will receive a confirmation email containing information about joining the meeting/webinar.

ACTION		GENERAL SESSION	
ITEM	ORDER	AGENDA	
	1	CALL TO ORDER	Gloria Leiva
			2000
	2	PUBLIC INPUT/ANNOUNCEMENTS	Gloria Leiva
	3	NOMINATING COMMITTEE	Al Marsella
ACTION	3	Election of New Director	Melinda Sullivan
ACTION			Wichilda Sumvan
ACTION		 Service Provider Advisory Committee (SPAC) Nominations 	
	4	APPROVAL OF MINUTES	Gloria Leiva
ACTION	7	• August 25, 2021	Gioria Leiva
ACTION	5	EXECUTIVE DIRECTOR'S REPORT	Melinda Sullivan
ACTION	3	• Contract Over \$250,000.	Pablo Ibanez
ACTION		Caseload Ratio Plan of Correction	1 dolo lodinez
		Family Satisfaction Survey	
		COVID Update	
	6	ARCA REPORT	Larry DeBoer
	U	ARCA Academy	Yudy Mazariegos
	7	EXECUTIVE COMMITTEE	Gloria Leiva
	/	Board Training Plan Survey	Melinda Sullivan
	8	ADMINISTRATIVE AFFAIRS COMMITTEE	Larry DeBoer
	8	Review of Financial Statements	Kaye Quintero
		State of Emergency Overview	Raye Quintero
	9	EXECUTIVE SESSION	Gloria Leiva
CLOSED	ACTION	Approval of Minutes	Melinda Sullivan
SESSION	ACTION	Litigation	Iviemida Sumvan
BESSION		Personnel	
		• Executive Director's Goals for FY 2021-22	
	10	ADJOURNMENT	Gloria Leiva
	10	ADJOURNIENT	Gioria Leiva

NOMINATING COMMITTEE

SLATE OF DIRECTOR FOR ELECTION SEPTEMBER 2021

DIRECTOR

Anthony Brouwer

PROSPECTIVE BOARD MEMBER REFERRAL FORM

(Following is a form on which you can list prospective board members.)

CONFIDENTIAL

Please complete this form so that we can follow up with you about the individual you recommend for consideration as a prospective board member. Please provide us with as much relevant information as you have about each candidate. Please return this sheet and the accompanying form, at the end of this meeting or within a week, to the nominating committee c/o:

Lanterman Regional Center
Nominating Committee
3303 Wilshire Blvd., Suite 700
Los Angeles, California 90010
Attn.: Frank Lara

A member of the nominating committee may contact you to ask for suggestions about the best approach in cultivating and recruiting the individual(s) you have listed. Thank you.

Date: <u>August 11, 2021</u>	
Your name: Anthony Brouwer	
Геlephone: Day (<u>818</u>) <u>679-2282</u>	Evening ()
Fax: () <u>N/A</u>	E-mail: anthonybrouwer@gmail.com
The best time to telephone me is a	fter <u>6:00</u> p.m.
Please return this sheet with the fe	ollowing three-page referral form, one copy for each candidate.
*	Date <u>08/11/2021</u>

PROSPECTIVE BOARD MEMBER REFERRAL FORM

(Please photocopy this page if you wish to present additional names of board candidates.)

CONFIDENTIAL

Name of prospective board member	de strike de see bee		
Title: Client			
Organization: Frank D. Lanterman l	Regional Center		
Address: 2403 Seneca St. #8			Company of the control of the contro
Pasadena, CA 91107	T-2000000010 (1000000000000000000000000000		
	(City)	(State)	(Zip)
Telephone: Day (818) 679-2282	Evening () Same as day time p	hone #
Fax: () <u>N/A</u>	E-mail: anthonybrouwer@gmail.com		
Please give information about this is appropriate, including:	ndividual and his	or her organizational affil	liation, if
Professional skills: I received the ce College. I worked for Fedex as a pa post office about 3 years. I have go	ckage handler. I a	m currently working as a	post carrier at the
Type of business: N/A	1.		
Interest in Lanterman Regional Cenresources for clients	The state of the s	vices at School, ILS servi	ces, available
	ng familian with t	ne prospect: I received PA	S while I was
I amtownous Dogramal Conton attiliate			

Special interests: I am very active playing sports. I was a high school basketball player, like to do batting practice after work, and go hiking on the weekend. I am a big fan of Dodgers and LA Chargers. I love to visit museum.
Education: Graduated from Hoover High School with a high school diploma in 2007
Graduated from GCC in 2017
Other affiliations with individuals, corporations, foundations and organizations:
Post Office in Pasadena 800-275-8777
GCC counselor Elizabeth Barrett, ebarrett@gcc.edu
Jessica Orellana 818-966-0308
Other board/volunteer experience: volunteer work at Church for setting up Halloween luncheon.
Personal characteristics and skills: <u>Friendly, kind, caring, patient, humble, and good communication skills</u>
Other: good heart for others
Please include the reasons why you think this person would be a good board member of Lanterman Regional Center. Please use other side of paper, if necessary.
I am always working hard to achieve my goals; I graduated from college, I am currently working as a post carrier at the post office, and living independently with no support from the Regional Center. I never gave up for my dream. I would be a good role model for other clients. I am
humble and kind, and have a good heart for others.
humble and kind, and have a good heart for others.
humble and kind, and have a good heart for others.
humble and kind, and have a good heart for others.
humble and kind, and have a good heart for others.
People whom you suggest might meet and recruit this prospective board member and their relationship to the candidate:

NATIONAL CENTER FOR NONPROFIT BOARDS	
Elizabeth Barrett, Glendale Community College Counselor	
	Stat?
From what you know about this individual, can you recommend dates and recruitment meeting?	places for a
Any dates after work hours via phone or zoom will be the best for a recruit	ment meeting.
Additional comments:	
I am having a crazy work schedule these days, but I will be cooperative wischedule. I will try my best to work for the Regional Center and other clienter member.	th a board meeting nts if I become a board
100	
#2 #2 #2 #2 #2 #2 #2 #2 #2 #2 #2 #2 #2 #	
Your name: Anthony Brouwer	
Date	8/11/2021

Revised 5/98

Revised from 8/99

Nominating/PBM referral form

MEMORANDUM

DATE:

September 10, 2021

TO:

Nominating Committee

Melinda Sullivan

FROM:

Pablo Ibañez

RE:

Service Provider Advisory Committee (SPAC)

Terms for the four following SPAC members are expiring October 31, 2021: Dee Prescott, Nicole Hajjar, Greg Sanchez and Kelly White. They have all expressed wanting to continue as committee members and their interest statements are attached. Each of these members attends SPAC meetings and has helped coordinate and/or participate in one or more SPAC sponsored events during their term. Kim Isaac, SPAC Chair, has reviewed the interest statements of these members.

Following is the agency each applicant represents and the type of service(s) provided.

Name	Agency	Type of service(s)
Dee Prescott	Easter Seals	Adult Day Programs
Nicole Hajjar	Smile + Wonder	Early Intervention and Specialist
Gregorio Sanchez	Home Instead	Homemaker
Kélly White	Villa Esperanza	Adult Day Programs, Residential, Work & Children's Programs

Additionally, we have the need to fill three SPAC vacancies created by the departure of the following SPAC Committee members:

Name	Agency	Type of service(s)
Traci Jones Martinez	Adventist Health Glendale	Pediatric PT, OT & ST
Jim Storck	Autumn Cottage	Adult Day Programs & Residential
Yvonne Nakamoto	Total Education Solutions	Early Start OT, PT & ST

The current SPAC chair and I have received and reviewed applications and interviewed prospective new SPAC Committee members. We are nominating the following applicants to fill the above vacancies based on demonstrated experience, commitment and contribution to our community. We have considered provider type and geographic area to help with this determination.

Name	Agency	Type of service(s)
Michaelann Gabriele	Center for Developing Kids	Early Intervention
Nancy Niebrugge	The Campbell Center	Adult Day Programs, Residential
Andrew Day	PCS Lanterman	Adult Day Program, Supported Living

We are recommending appointment of all four renewing applicants and the three new applicants for a two-year term on the committee.

Thank you for your consideration of these nominations.

I Dee Prescott, am		
X interested		
not interested	E	
in being considered by the Board of Provider Advisory Committee.	of Directors for another term on the Se	rvice
Dee Prescott		
Signature		
September 7, 2021		
Date		

I Nicole Hajjar, am			
X interested			
not interested	*		
in being considered by the Board o Provider Advisory Committee.	f Directors for an	other term on	the Service
5			
Signature			
September 8 th , 2021			
Date			

I Gregorio Sanchez, am			
v			
X interested			
not interested			
	 ₩		
in being considered by the Board of D Provider Advisory Committee.	irectors for anoth	er term on th	e Service
Trovider Advisory Committee.			9)
Signature	\$1 **		
		<u></u>	

1	Kelly White, am	
	interested	

not interested

in being considered by the Board of Directors for another term on the Service Provider Advisory Committee.

Signature

Date

Michaelann Gabriele

Service Provider Advisory Committee Application for Membership

Name: Michaelann Gabriele, OTD, OTR/L

Address: 2555 E Colorado Blvd. Ste 100, Pasadena CA 91107

Telephone: (626) 564-2700

Fax Number: (626) 564-2770

Email Address: michaelann@centerfordevelopingkids.com

Category of provider you would represent:

Specialist Provider: Occupational, Physical and Speech Therapy

Agency you represent: Center for Developing Kids, Inc.

What position do you hold in the agency? Owner/Director/Occupational Therapist

Please describe your interest in serving as a member of this committee: I have participated as a guest at the LRC SPAC meetings during the four years I have worked at Center for Developing Kids, Inc. I have found them very helpful in staying current with RC issues and keeping our organization engaged with the RC team. These meetings have helped us to better meet the needs of our RC clients, and I'd like to increase my participation and contributions by joining the committee.

What background and/or skills do you have that you feel would benefit the group? I have been practicing as a doctor of occupational therapy with southern California regional center clients for nearly 10 years. I have had to opportunity to work on multidisciplinary teams with physicians, mental health providers, physical therapists, speech therapists, and many others to develop research, training, and client centered practices. And, as a current director of Center for Developing Kids, Inc., I am able to see the mutual impacts of policies and practices on clients and providers alike. I look forward to sharing my expertise as I learn from the other members of SPAC and the RC team.

Do you feel that there are any conflicts of interest which would prevent you from serving as a member of the Board? No

Los Angeles County Developmental Service Foundation Frank D Lanterman Regional Center

List of Financial Interests

Pursuant to

California Government Code SS87103

For a Member of Board of Directors

Who is Designated By

Service Provider Committee

- 1. Your Name: Michaelann Gabriele
- 2. Name and address of service provider whom you represent:
 - a. Name: Center for Developing Kids, Inc.
 - b. Address: 2555 E Colorado Bivd #100, Pasadena CA 91107
- 3. Name and address of any business entity in which you have a direct or indirect investment worth one thousand dollars or more: Center for Developing Kids, Inc.
- 4. Addresses of any real property in which you have a direct or indirect interest worth one thousand dollars or more: Personal home in Pasadena
- 5. Any source of income (other than gifts and other than loans made by a commercial lending institution in the regular course of business on terms available to the public without regard to your status as a Service Provider representative or as a Regional Center Director) aggregating two hundred fifty dollars or more in value, provided to, received by or promised to you within the last 12 months: N/A
- 6. Names and addresses of all business entities in which you are a director, officer, partner, trustee, employee, or hold any position of management: Center for Developing Kids, Inc.
- 7. Name of each person or entity and name of any intermediary person or other agent for such donor who has made a donation to you of a gift or gifts aggregating two hundred fifty dollars or more in value, provided to, received by, or promised to you in the last 12 months: N/A

Nancy Niebrugge

SERVICE PROVIDER ADVISORY COMMITTEE APPLICATION FOR MEMBERSHIP

Name:	Nancy Niebrugge
Address:	4455 Las Felia Blud, # 1208 Los Angeles, CA 90027
	661-478-7320
Fax Number	er:
E-Mail Add	iress: Nancy. N@ The Campbell. org
Category o	f provider you would represent:
×	Residential (Adult)
	Residential (Children)
· ·	Residential (Special Program)
×	Day Program (Adult) + supported Employment
	Day Program (Infants or Children)
	Other Non-medical Program
	Medical/Health Care Agency
	Specialist Provider
Agency you	represent, if any: The Campbell Center
What positi	ion do you hold in the agency? Deputy Executive Sirector
Please desc	ribe your interest in serving as a member of this committee
the e	forts of FDLRC that benefit providers of one
clien	
	ground and/or skills do you have that you feel would benefit the group? Ting, event planning, strategic planning, m development, long-time non-profit manage- skills.
Do you feel	that there are any conflicts of interest which would prevent you from serving as
a member o	f the Board? A/O

LOS ANGELES COUNTY DEVELOPMENTAL SERVICE FOUNDATION FRANK D. LANTERMAN REGIONAL CENTER

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LIST OF FINANCIAL INTERESTS

PURSUANT TO

CALIFORNIA GOVERNMENT CODE §87103

FOR A MEMBER OF BOARD OF DIRECTORS

WHO IS DESIGNATED BY

SERVICE PROVIDER COMMITTEE

1. Your Name: Nancy Nichrugge
2. Name and address of service provider whom you represent:
Name: The Campbell Center
Address: 6512 San Fernando Rd, Glendale, CA 9/20/
3. Name and address of any business entity in which you have a direct or indirect investment* worth one thousand dollars (\$1,000.00) or more:
- Index funds held through Crown Capital Securities (broker 2081 Business Center Drive #140
2081 Business Center Drive #140
Irvine, c4 92612
- Vanguard Index Funds
- Individual stocks - Ameriprise. Ross Stories Inc.
4. Addresses of any real property in which you have a direct or indirect interest* worth one thousand dollars (\$1,000.00) or more:
4455 Los Feliz Blyd, #1208, Los Angeles, CA 90027
1201/1203 E. California Ave, Glendale, CA 91206
509 A N. Third St., Alhambra, CA 91801

5.	Any source of income (other than gifts and other than loans made by a commercial lending institution in the regular course of business on terms available to the public without regard to your status as a Service Provider or without regard to your status as a Service Provider representative or as a Regional Center Director) aggregating two hundred fifty dollars (\$250.00) or more in value, provided to, received by or promised to you within the last 12 months:
	- Rental income from 2 properties
	- Rental income from 2 properties - Tec salary
-	
6.	
	partner, trustee, employee, or hold any position of management:
-	The Campbell Center (management) 6512 San Fernando Ró, Glendale, CA 9/20/
	6512 San Fernando Ro, Gendale, CA 9/201
-	
7.	Name of each person or entity and name of any intermediary person or other agent for such donor who has made a donation to you of a gift or gifts aggregating two hundred fifty dollars (\$250.00) or more in value, provided to, received by, or promised to you in the last 12 months:
-	
*	Indirect investment or interest means any investment or interest owned by your spouse or dependent child, by an agent on your behalf, or by a business entity or trust in which you, your agents, your spouse or dependent children own directly, indirectly or beneficially a ten percent (10%) interest or greater.
Rev	rised 9/07

Service Provider Advisory Committee Application for Membership

Name: Michaelann Gabriele, OTD, OTR/L

Address: 2555 E Colorado Blvd. Ste 100, Pasadena CA 91107

Telephone: (626) 564-2700

Fax Number: (626) 564-2770

Email Address: michaelann@centerfordevelopingkids.com

Category of provider you would represent:

Specialist Provider: Occupational, Physical and Speech Therapy

Agency you represent: Center for Developing Kids, Inc.

What position do you hold in the agency? Owner/Director/Occupational Therapist

Please describe your Interest in serving as a member of this committee: I have participated as a guest at the LRC SPAC meetings during the four years I have worked at Center for Developing Kids, Inc. I have found them very helpful in staying current with RC issues and keeping our organization engaged with the RC team. These meetings have helped us to better meet the needs of our RC clients, and I'd like to increase my participation and contributions by joining the committee.

What background and/or skills do you have that you feel would benefit the group? I have been practicing as a doctor of occupational therapy with southern California regional center clients for nearly 10 years. I have had to opportunity to work on multidisciplinary teams with physicians, mental health providers, physical therapists, speech therapists, and many others to develop research, training, and client centered practices. And, as a current director of Center for Developing Kids, Inc., I am able to see the mutual impacts of policies and practices on clients and providers alike. I look forward to sharing my expertise as I learn from the other members of SPAC and the RC team.

Do you feel that there are any conflicts of interest which would prevent you from serving as a member of the Board? No

Los Angeles County Developmental Service Foundation Frank D Lanterman Regional Center

List of Financial Interests

Pursuant to

California Government Code SS87103

For a Member of Board of Directors

Who is Designated By

Service Provider Committee

- 1. Your Name: Michaelann Gabriele
- 2. Name and address of service provider whom you represent:
 - a. Name: Center for Developing Kids, Inc.
 - b. Address: 2555 E Colorado Blvd #100, Pasadena CA 91107
- 3. Name and address of any business entity in which you have a direct or indirect investment worth one thousand dollars or more: Center for Developing Kids, Inc.
- 4. Addresses of any real property in which you have a direct or indirect interest worth one thousand dollars or more: Personal home in Pasadena
- 5. Any source of income (other than gifts and other than loans made by a commercial lending institution in the regular course of business on terms available to the public without regard to your status as a Service Provider representative or as a Regional Center Director) aggregating two hundred fifty dollars or more in value, provided to, received by or promised to you within the last 12 months: N/A
- 6. Names and addresses of all business entities in which you are a director, officer, partner, trustee, employee, or hold any position of management: Center for Developing Kids, Inc.
- 7. Name of each person or entity and name of any intermediary person or other agent for such donor who has made a donation to you of a gift or gifts aggregating two hundred fifty dollars or more in value, provided to, received by, or promised to you in the last 12 months: N/A

Andrew Day

SERVICE PROVIDER ADVISORY COMMITTEE APPLICATION FOR MEMBERSHIP

Name: Andrew Day
Address: 121 W. Lexington Dr. Suite 820, Glendale, CA 91203
Telephone: 805-375-9222 ext 103
Fax Number: 805-375-9228
E-Mail Address: andrew@pcs-services.org
Category of provider you would represent:
X Residential (Adult)
Residential (Children)
X Residential (Special Program)
X Day Program (Adult)
Day Program (Infants or Children)
X Other Non-medical Program
Medical/Health Care Agency
Specialist Provider
Agency you represent, if any: PCS - Lanterman, Inc.
What position do you hold in the agency? Executive Director
Please describe your interest in serving as a member of this committee I serve as a member
for Tri Counties Regional Center and have found it very helpful to collaborate with fellow providers
and Regional Center partners.
What background and/or skills do you have that you feel would benefit the group?
I have been working in IDD services for over 20 years. PCS provides an array of services in CA. We
provide SLS, ILS, Day Programs both site and community based(515, 110, 055), ARFs (113 homes),
Respite, Personal Care, Transportation, and others. I am also a certified instructor in Person Centere
Thinking and Planning through the Learning Community for Person Centered Practices.
Do you feel that there are any conflicts of interest which would prevent you from serving as
a member of the Board? No

LOS ANGELES COUNTY DEVELOPMENTAL SERVICE FOUNDATION FRANK D. LANTERMAN REGIONAL CENTER

LIST OF FINANCIAL INTERESTS

PURSUANT TO

CALIFORNIA GOVERNMENT CODE §87103

FOR A MEMBER OF BOARD OF DIRECTORS

WHO IS DESIGNATED BY

SERVICE PROVIDER COMMITTEE

1. Your Name: Andrew Day	
20 Min	•
2. Name and address of service provider whom you represent: Name: PCS - Lanterman, Inc.	
Address: 121 W. Lexington Dr. Suite 820, Glendale CA 91203	
3. Name and address of any business entity in which you have a direct or i investment* worth one thousand dollars (\$1,000.00) or more:	ndirect
NA	
4. Addresses of any real property in which you have a direct or indirect interest* vone thousand dollars (\$1,000.00) or more:	vorth
NA .	

	Any source of income (other than gifts and other than loans made by a commercial lending institution in the regular course of business on terms available to the public without regard to your status as a Service Provider or without regard to your status as a Service Provider representative or as a Regional Center Director) aggregating two hundred fifty dollars (\$250.00) or more in value, provided to, received by or promised to you within the last 12 months:
N	A
-	
-	
6.	Names and addresses of all business entities in which you are a director, officer, partner, trustee, employee, or hold any position of management:
Pe	eople Creating Success, Inc. (PCS)
25	585 Teller Rd, Newbury Park CA 91320
*	Name of each person or entity and name of any intermediary person or other agent for such donor who has made a donation to you of a gift or gifts aggregating two hundred fifty dollars (\$250.00) or more in value, provided to, received by, or promised to you in the last 12 months:
1	NA
*	Indirect investment or interest means any investment or interest owned by your spouse or dependent child, by an agent on your behalf, or by a business entity or trust in which you, your agents, your spouse or dependent children own directly, indirectly or beneficially a ten percent (10%) interest or greater.

Revised 9/07

Term Expiration Dates

Service Provider Advisory Committee Term Expiration Dates

Kimberly Isaac was elected Chair 11/16. (Two Year Term)

Committee Member	Initial Seating	Current Term Started	Term Expires	Geography	Service Type
Kimberly Isaac/CalWes Homes	2012	10/2020	10/2022	11	2
Keri Castaneda/AbilityFirst	2014	10/2020	10/2022	1,2	1, 2, 6, 7
Dee Prescott/Easterseals	2015	10/2019	10/2021	1, 2, 3	1
Nicole Hajjar/Smile + Wonder	2015	10/2019	10/2021	3	4,5
Gregorio Sanchez/Home Instead	2018	10/2019	10/2021	1, 2, 3	5
Kyra Griffith/TLC Speech Therapy	2018	10/2020	10/2022	3	4
Kelly White/Villa Esperanza	2019	10/2019	10/2021		1, 2, 3, 4, 7
First Vacancy					
Second Vacancy	ie ^a				
Third Vacancy		() () () () () () () () () ()			

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Geography	1 = Foothill/Pasadena	2 = Glendale/Eaglerock/Burbank	3 = Hollywood/Wilshire

1 = Adult Day Programs 2 = Residential (CCF/ICF) Service Type 3 = Other Living Options 5 = Specialist 6 = Children's Programs 4 = Early Intervention