

MEMORANDUM

TO: BOARD OF DIRECTORS
FROM: MELINDA SULLIVAN
RE: APRIL BOARD MEETING
DATE: AGUST 24, 2022

As of the writing of this memo Larry DeBoer and I are attending the ARCA board meeting; our summary notes will be forwarded to you early next week. Welcome to Michael Cooney, Weller Killebrew, Tina Daley and Lili Romero to their first official board meeting.

BOARD EDUCATION

This month Kaye Quintero will be present an overview on how to read the Center's financial statements. Her annual report for 2021 is included for your information and she will be available to answer questions from the board.

EXECUTIVE DIRECTOR'S REPORT – ACTION ITEM

The board is required to review the Conflict of Interest forms of the board members before we submit to the Department of Developmental Services. They are included in your board packet for review.

PROGRAMS AND COMMITTEE

Carmine Manicone will provide an update on our planned Fall Community Meetings and the draft 2023 Performance Plan.



BOARD OF DIRECTORS MEETING

Wednesday, August 24, 2022
6:00 PM – Board Business Promptly

Register in advance for this webinar:

https://us02web.zoom.us/webinar/register/WN_VMMyhozGdSOSobYDHhInMnQ

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

ACTION ITEM	ORDER	GENERAL SESSION AGENDA	
	1	CALL TO ORDER	Gloria Leiva
	2	PUBLIC INPUT/ANNOUNCEMENTS	Gloria Leiva
ACTION	3	APPROVAL OF MINUTES • June 22, 2022	Gloria Leiva
	4	BOARD EDUCATION • 2020 Administrative Report – Administrative Services (How to Read Financials)	Melinda Sullivan Kaye Quintero
ACTION	5	EXECUTIVE DIRECTOR'S REPORT • July Board Training Debrief • Annual Conflict of Interest Review	Melinda Sullivan
	6	ARCA REPORT	Larry DeBoer Melinda Sullivan
	7	ADMINISTRATIVE AFFAIRS COMMITTEE • Review of Financial Statements	Larry DeBoer Kaye Quintero
	8	PROGRAMS AND SERVICES COMMITTEE • Fall Community Meetings & 2023 Performance Plan	Carmine Manicone
CLOSED SESSION	9 ACTION	EXECUTIVE SESSION • Approval of Minutes • Litigation • Personnel	Gloria Leiva Melinda Sullivan
	10	ADJOURNMENT	Gloria Leiva

APPROVAL OF MINUTES

LOS ANGELES COUNTY DEVELOPMENTAL SERVICES FOUNDATION

Board of Directors

June 22, 2022

MINUTES

PRESENT

Louis Mitchell, Chair
Elizabeth Beltran
Anthony Brouwer
Larry DeBoer
Danielle Dejean
Dr. Anila Guruji
Mark Higgins
Kim Isaac
Gloria Leiva
Dr. Alex Li
Yudy Mazariegos
Jae Rhee
Brigitte Sroujeh
Ana Villasenor

NOT PRESENT

Dina Richman

ADVISOR TO THE BOARD - PRESENT

Al Marsella

STAFF

Pablo Ibanez
Juan Maldonado
Carmine Manicone
Srbui Ovsepyan
Kaye Quintero
Melinda Sullivan

GUESTS

Adriana Aguirre-Robertson
Amy S
Anita Pafford
Armine Toomanian
Barbara Tello
Brenda Vivar
Bridgette Morton

Diana Maruri
Diana Sandoval
Elizabeth Fuster
Evie Jung
Freddy Gonzaga
Gena Bellino
Gilda Giron
Gloria Perez
Jacky Diaz
Julissa Pineda
Karina Castillo
Kimberly Bermudez
Kristianna Moralls
Leo Noriega
Linda Mnatsakanyan
Lourdes Gomez
Magdalena Chavez
Margarita Villaseñor
Maria Banda
Maria Olivares
Marie
Mayra Dwyer
Melissa Gonzalez
Myoung Lim
Nerida Murillo
Nichola Ashford-More
Rita Loussikian
Sami Simmons
Sean Goudeau
Shannon Rains
Tamar Meguerian
Tina Daley
Yessenia Villacorta
Yolie Marquez

CALL TO ORDER

Mr. Mitchell called the meeting to order at 6:00 PM. The meeting was conducted via Zoom.

PUBLIC INPUT

Elizabeth Fuster - Expressed the difficulty of doing her job. She and other employees feel under appreciated. Working under extraordinary circumstances has made it difficult to meet the needs of clients and families. She has been told that she is not doing her job well from home and disagrees with it. She wanted to bring to the Board's attention that 9 staff have left within 6 months.

Adriana Aguirre-Robertson –Expressed support for the continuation of working from home due to the rising COVID cases, increased crime around the neighborhood near the regional center, and the rise of gasoline prices. It is more cost effective to work from home and it is better for mental health overall. Service Coordination can be done without coming into the office and it should be a personal choice. All regional center positions should be able to work from home and all should receive bilingual pay. Service Coordination staff offers solutions on training and are not being listened to. She wants to be respected, supported, and heard.

Magdalena Chavez – Expressed her frustration with the training she received while working from home during the pandemic. Today was her first day conducting a face to face visit and the IT systems remotely were not working properly for her. It would have been more efficient if the face to face was done virtually. She had to do double the work. IT systems should be fixed before sending SC's out into the field to conduct face to face visits.

Linda Mnatsakanyan – Expressed concerns on the lack of training for new staff. Lanterman should review their training policy.

APPROVAL OF MINUTES

The minutes of May 25, 2022 were approved by consensus.

NOMINATING COMMITTEE

Mr. Marsella brought forward the proposed Slate of Officers and Directors for election as follows:

Slate of Directors:

Directors for Re-election

- Larry DeBoer

New Director:

- Michael Cooney
- Tina Daley
- Weller Killebrew
- Lili Romero-Riddell

Ms. Dejean moved to approve the Slate of Directors for election and re-election as presented, Ms. Villasenor seconded the motion, and it passed unanimously

Slate of Officers:

- President - Gloria Leiva
- 1st Vice President- Louis Mitchell
- 2nd Vice President - Elizabeth Beltran
- Treasurer - Larry DeBoer
- Secretary - Brigitte Sroujeh
- Immediate Past President - Dina Richman

Ms. Beltran moved to approve the Slate of Officers for election as presented, Dr. Li seconded the motion, and it passed unanimously

BOARD EDUCATION

2021 Administrative Report – Community Services

As part of Board Education and Training, Mr. Ibanez, Director of Community Services, gave an overview on Resource Development. Board members were given the opportunity to ask questions and discuss the content.

National Core Indicators

As part of Board Education and Training, Mr. Maldonado, Special Projects Coordinator, gave an overview on the 2020-2021 National Core Indicators/In-Person Survey. Board members were given the opportunity to ask questions and discuss the content.

EXECUTIVE DIRECTOR’S REPORT

July Board Training

Ms. Sullivan reminded the Board that the July Board training will be an in-person meeting on July 27, 2022. The site will be at the Marriott Courtyard in Pasadena.

Language Access Plan

Ms. Sullivan advised the Board that they could find in their packet the Language Access Plan that was submitted to DDS. The plan is to improve and promote Language Access and Cultural Competency to better support the language needs of individuals with developmental disabilities, their caregivers, and their family members. The primary purpose of these funds received is to improve consumer and family experience and to facilitate more consistent access to information and services for multi-lingual, monolingual, and diverse cultural groups.

Ms. Sullivan will keep the board informed on the outcome of the submission.

Construction Update

Mr. Lara advised the Board that construction on office expansion space at the Center has begun. As part of lease negotiations 5 years ago, the Center received additional space in May 2022 on the 1st floor. As part of this expansion, the reception/lobby/operations unit will move to that space. In addition, the Center will be redesigning existing space on the 3rd and 7th floor for the addition of new service coordination teams. It is anticipated that construction is estimated to finish at the end of August – early September 2022.

Project Search

Ms. Sullivan advised the Board that she attended the 2022 Project Search Graduation on June 9, 2022 in which 4 Lanterman clients graduated. Project SEARCH provides training to young adults with developmental disabilities through an innovative workforce and career development model that benefits the individual, workplace, and community. Project SEARCH is a collaboration between Kaiser Permanente Los Angeles Medical Center, Los Angeles Unified School District, Lanterman Regional Center, and PathPoint. Ms. Sullivan reported that it was very moving and uplifting day.

Interview with Korean TV show - "MBC Straight"

Ms. Sullivan shared with the Board an interview with Ms. Evi Jung, KYRC Family Support Specialist, on a Korean TV program that aired recently in Korea. Ms. Jung shared with the Board that she was very proud that the Center is doing what it is doing for the Korean community and that she felt well prepared and ready for this interview request on such short notice. Ms. Jung was able to share information from the Korean service videos that have been produced by Lanterman, and she was able to answer all of their questions based on what is taught in the Service Coordination Advocacy Training (SCAT) at the Center.

The interview clip was shared with the Board.

ARCA REPORT

Mr. DeBoer advised the Board that he and Ms. Sullivan attended the ARCA meeting on June 16-17. This report focused on the State Budget Update and the highlights from the meeting were in the packet for review. Discussion followed.

EXECUTIVE COMMITTEE

Contact Over \$250,000.

Mr. Ibanez reviewed with the Board the following contract in accordance with the Board approved policy for approval of contracts:

Provider/Organization: **HOPE (Home Ownership for Personal Empowerment)**

Year: **CPP FY21/22**

Amount of contract: \$800,000 (up to \$350,000 for acquisition and up to \$450,000 for renovations)

Lanterman Regional Center received CPP funds in the amount of \$800,000, (up to \$350,000 for acquisition and up to \$450,000 for renovations) from FY21/22 to acquire and renovate a 4-Bed Enhanced Behavioral Supports Home (EBSH) in the Frank D. Lanterman Regional Center (FDLRC) catchment area. The home will fulfill the regional center's Community Placement Plan (CPP) and Community Resource Redevelopment Plan (CRDP). The target population for the home consists of adults with developmental disabilities transitioning from more restrictive living settings who require intensive services and supports due to challenging behaviors, which are beyond what is typically available in other community living arrangements. These adults may currently be in more restrictive living arrangements such as State-Operated Developmental Centers and/or other locked facilities. These adults exhibit aggression toward others, elopement, property destruction, and self-harming behaviors. These adults require intensive care, supervision, interventions and assistance to live the highest quality of life possible despite incompatible behaviors displayed throughout their daily routines.

Ms. Villasenor moved to approve the contract with HOPE as presented, Ms. Beltran seconded the motion, and it passed unanimously.

ADMINISTRATIVE AFFAIRS COMMITTEE

California Community Foundation-Investment Management

Ms. Quintero advised the Board that the Committee met with Mr. Steve Cobb from California Community Foundation who presented an investment overview on the Center's holdings and focused on the various options for investment. The Committee found it beneficial and will continue discussion at its July meeting.

FY 2022-23 C-3 Contract Allocation

Ms. Quintero reported that DDS has issued an additional allocation for the current year. Operation's allocation includes funding for several policy items, and the POS allocation includes funding for HCBS waiver compliance and Community Placement Plan (CPP)/Community Resource Development Plan (CRDP) projects and placements. It is projected that the allocation will be sufficient to cover any additional late billings from service providers.

Review of Financial Statements

- Cash Flow

Mr. DeBoer reported that the Center is projected to have \$35,508,528 available at the end of August 31, 2022.

Mr. DeBoer reviewed the financial statements through April 30, 2022.

- Fiscal Year to date 2021-2022 (C-2)

In Operations (main contract) we have spent \$21,824,651 (73.9% of budget). In Purchase of services (main contract) we have spent \$214,016,415 before we add late bills. Including projected late bills, we will have spent \$219,205,290 (74.1% of budget).

- Fiscal Year 2020-2021 (B-5)

This month we recorded \$165,312 in OPS and \$142,330 in POS. To date, we have spent 98.1% of our OPS and 98.6% of POS allocations.

- Fiscal Year 2019 - 2020 (A-9)

This month we recorded \$56,044 in POS. To date, we have spent 96.7% of our OPS and 98.6% of our POS allocations.

PROGRAMS AND SERVICES COMMITTEE

Independent Living Services Service Standard

Mr. Manicone advised the Board that they could find in their packet a copy of the draft service standard for Independent Living Services. Mr. Manicone reported that the Programs and Services Committee reviewed the service standard and is recommending that the Board approve the document as presented. Discussion and questions followed.

Mr. DeBoer moved to approve the Independent Living Services Service Standard as presented, Ms. Beltran seconded the motion, and it passed unanimously.

Supported Living Services Service Standard

Mr. Manicone advised the Board that they could find in their packet a copy of the draft service standard for Supported Living Services. Mr. Manicone reported that the Programs and Services Committee reviewed the service standard and is recommending that the Board approve the document as presented. Discussion and questions followed.

Dr. Li moved to approve the Supported Living Services Service Standard as presented, Mr. Higgins seconded the motion, and it passed unanimously.

RECOGNITION OF OUTGOING MEMBERS

Ms. Sullivan thanked and recognized outgoing Board member Anila Guruji, Mark Higgins, and Yudy Mazariegos for their commitment and service to the Board.

ADJOURNMENT FOR EXECUTIVE SESSION

Ms. Dejean moved to suspend the General Session meeting at 7:58 PM for Executive Session to conduct business on Approval of Minutes, Litigation, Collective Bargaining Agreement, and Executive Director' Performance Evaluation for 2021-22, Ms. Villasenor seconded the motion, and it passed.

RECONVENE FOR GENERAL SESSION

The Board discussed in Executive Session the Approval of Minutes, Litigation, Collective Bargaining Agreement, and Executive Director' Performance Evaluation for 2021-22.

ADJOURNMENT

The meeting was adjourn the meeting at 8:39 p.m. by consensus.

Mark Higgins, Secretary

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BOARD OF DIRECTORS

ACTION LOG

June 22, 2022

	DESCRIPTION	ACTION	STATUS
	Approval of Minutes – May 25, 2022	<ul style="list-style-type: none">• Approved	
	Contract Over \$250,000. - Home Ownership for Personal Empowerment	<ul style="list-style-type: none">• Approved	
	Slate of Offices and Directors	<ul style="list-style-type: none">• Approved	
	<u>Service Standards</u> <ul style="list-style-type: none">• Independent Living Services• Supported Living Services	<ul style="list-style-type: none">• Approved• Approved	

BOARD EDUCATION

ADMINISTRATIVE SERVICES DIVISION

ANNUAL ADMINISTRATIVE REPORT

2021

The Administrative Services Division of the Center consists of five distinct units - Accounting, Client Revenue Coordination, Information Systems, Contracts and Audits, and Operations Management. Each of these units has a manager. There were a total of 26 staff positions in the Division during 2021, an increase of 2 positions over the prior year, which included an Emergency Services Manager and a Purchase of Service Coordinator.

This year continued to present challenges related to the COVID-19 State of Emergency. The IT unit continued to put in extra effort to maintain an effective remote work environment, Operations staff continued to be more present in the office to coordinate mail delivery, support staff working in office, and support on-site appointments, and Accounting and Revenue saw an increase in workload due to clients continuing to need additional supports during this time.

What follows are the highlights of the specific accomplishments in each of the areas of the division, by unit.

ACCOUNTING

This unit consists of a manager (the Controller), an Accountant, one Accounting Associate II, one Accounting Associate Specialist, four Accounting Associates, and the newly added position of Purchase of Service (POS) Coordinator. The unit began the year absent a manager, with the position being vacant until April. Staffing otherwise remained stable and the new POS Coordinator position was developed late in the year.

BUDGETING AND TRACKING EXPENDITURES

In the first quarter of each fiscal year, Purchase of Services (POS) expenditures are projected and an Operations budget is developed based upon the allocation received from DDS. These were developed and submitted to the Administrative Affairs Committee and the Board.

POS expenditure projections continued to reflect increased needs of clients and families during the pandemic, DDS directives expanding Participant Directed Services, new alternative service delivery, and the suspension of cost participation programs. Our projections were submitted to the Board and DDS beginning in the late fall, reflecting an increase from the prior year of approximately 9%. We also continued to account for expenditures related to the Community Placement Plan (CPP)/Community Resource Development Plan (CRDP) and Early Start funding through the Family Resource Center (FRC) portion of our main contract.

Financial statements were prepared and distributed on a monthly basis, including detail for CPP/CRDP expenditures as differentiated from the main contract. Financial activity relative to the Koch-Young FRC is also included on the monthly financial statements. Actual expenditures tracked well within 10% of projections for fiscal year 2020-21 and for fiscal year 2021-22 to date.

As part of the Operations budget, salary and benefit projections were prepared and updated during the fiscal year. In 2021, these projections included the estimated cost of scheduled salary increases outlined in the collective bargaining agreement and the addition of twenty positions. Investments in additional technology and other supports needed for staff to working remotely were also taken into consideration. These projections reflected an increase of 9% from the prior fiscal year.

The Center continued to monitor its POS funding process in line with current law and regulation through its Funding Committee. Internal audits of POS authorizations and payments continue to be conducted periodically by Accounting staff and no systemic problems have been noted.

All of the Center's insurance coverages were reviewed and renewed on schedule. This year, improvements in IT systems security needed to be implemented in order to secure adequate cyber insurance coverage. There were slight increases in coverage costs this year, which were in line with the current market. Claims remained minimal, and our workers' compensation experience modification rate was lowered for the third year in a row as a result of a lower number of claims.

ACCOUNTING PROCESSES

The five Accounting Associates maintain all POS service authorizations and process all payments to service providers. In 2021, the position of POS Coordinator was added, carrying the responsibility of coordinating the daily authorization, invoice, payment, and rate table maintenance processes previously shared by both the IT unit and the Controller. The accounting staff processed an average of 2,000 payments each month and completed maintenance for approximately 4,500 service authorizations monthly. Service coordination continues to submit service requests electronically through the SANDIS case management program, which minimizes the amount of data entry needed from the accounting staff. Service providers also continue to bill for services electronically.

Electronic Fund Transfer (EFT) is the method of payment used for the vast majority of POS service providers, for some Operations vendors, and almost all employee payroll and travel and other expense payments. The Accounting unit continues to promote the EFT payment option to providers and works to minimize the need for off-cycle (manual) checks.

Payroll continued to be processed on a bi-weekly basis utilizing Paylocity. This product allows employees to manage their personal and benefits information on their own online or via the Paylocity device application. Employees also use the Paylocity system for timekeeping and to access pay statements.

All expenditures related to POS and Operations are claimed monthly to DDS, and contract advance requests are submitted timely where warranted.

The Self Determination Program (SDP) continued to expand this year. Accounting staff continued to efficiently process authorizations for SDP services and accurately process billings from the Financial Management Service (FMS) providers. Accounting worked closely with the SDP Coordinator to field inquiries from clients, families and providers. The unit made plans to add an additional Accounting Associate position in order to centralize Accounting's support of the program. (That position was filled in 2022).

Authorization maintenance workload continued to increase with the continuation of services needed during the pandemic and overall caseload growth. Authorizations for alternative service delivery also attributed to the increase in workload.

CASH MANAGEMENT

The Controller prepared regular projections of the Center's cash flow and reported to management and the Administrative Affairs committee monthly. The Center secured a line of credit with City National Bank again this year, reduced from \$35 million to \$28 million. This reduction was proposed by City National Bank and accepted by the Center given the limited use of the line. The Center took a draw on the line in the amount of \$5.8 million in the beginning of July for a period of three days while awaiting the new fiscal year advance funds from DDS, which was up from the \$3.4 million borrowed in 2020. Interest expense on the draw amounted to \$1,015. Interest earnings amounted to \$21,300, a decrease from \$118,700 earned in the fiscal year prior.

Cash flow continues to be impacted by the ICF SPA process, wherein the Center is reimbursed by ICF providers for POS day program and transportation services expenditures vs. by DDS through the regular state claiming process. Reimbursement for these service expenditures usually takes about three to four months, whereas the regular state reimbursement process takes approximately one month. Reimbursements through the ICF SPA process totaled just over \$624,000 for fiscal year 2020-21, which is down from the prior year of just over \$1 million. This decrease was due to reduced services received by the clients residing in ICFs during the pandemic.

AUDITS

The Center's independent auditors, Windes, Inc., issued an unmodified opinion for the 2020-21 fiscal year, with no specific audit findings or items of concern noted. The auditors conducted their work on the 2020-21 report in the fall, which was delivered to the Administrative Affairs Committee in January 2022 with similar results. This marked the completion of the first audit report issued by Windes, Inc. since the Center was required to switch firms (DDS requires the Center not employ a firm more than five years in any ten-year period). Windes, Inc. is scheduled to conduct the audit for the fiscal year 2021-22 as well.

DDS completed their biennial audit of the Center in the fall of 2020, with the final audit report being issued in June 2021. The report reflected minor findings related to POS payments and Family Cost Participation Program payments that were immediately addressed by the Center. DDS is scheduled to complete the next biennial audit in the fall of 2022.

BANKING AND OTHER ACTIVITIES

The Center's banking relationship with City National Bank continues in a positive vein and bank services such as online banking services, automated fraud detection services, and account reconciliation services continue to serve us well. City National Bank introduced a new fraud detection feature on its online banking platform, allowing the Center to better monitor account activity. In addition, a data connection was established with the bank to allow us to download account activity on the Center's client funds account, allowing transactions to be posted to the Accounting system sooner.

The Accounting unit also monitors the results of endowment fund investment activity with the California Community Foundation. Separate accounts continue to be used at the Foundation for donor restricted and unrestricted contributions. The Administrative Affairs Committee continues to review the performance and management of the fund, and this year reviewed historical data related to the performance of the fund. The fund endured a loss at the beginning of the pandemic, but has since recovered and performed well in 2021.

AUDITS AND CONTRACTS

This unit coordinates the development of all Operations and Purchase of Services contracts, completes all service provider fiscal reviews, provides service provider trainings, supports budget development for clients in the Self-Determination Program (SDP), and administers all Family Cost Participation Programs (FCPP). This unit consists of one manager and one Fiscal Monitor Associate. The Manager of this unit retired this year in November, after providing service to the Center for 43 years. The Fiscal Monitor Associate provided additional support for critical tasks until officially assuming the manager position in 2022.

The unit coordinated the development and tracked the status of 118 contracts in 2021. Some of the types of contracts include those for clinical services supports, Purchase of Service Supported Living Services agreements, and commitments for projects funded in the Center's contract (such as Community Placement Planning (CPP), projects to reduce disparities in service delivery, Home and Community-Based Services (HCBS) waiver compliance, and the development of Crisis Support Services (CSS) programs). Payment activity on these contracts are monitored by the manager.

DDS required the Center to complete ten service provider fiscal reviews in fiscal year 2020-21. In 2021, efforts to complete fiscal reviews were slowed in order to allow service providers to focus on meeting the increased and changing needs of our clients and families during the pandemic. As a result, the Center officially completed only six out of the ten audits required, which is 18 less than what was done in 2020. No appeals were filed relative to any of the audits. The Center has resumed its full efforts to complete these reviews and is on track to complete the required 10 fiscal reviews for the 2021-22 fiscal year.

The Center continued transitioning clients into the Self Determination Program (SDP) in 2021. The Audit and Contracts unit is responsible for providing expenditure reports, calculating budgets used to develop client SDP spending plans, and amending budgets as necessary. The Fiscal Monitor Associate is a member of the Center's SDP planning team, which includes the Director of Client and Family Services, Director of Administrative Services, and the SDP Specialist. The Fiscal Monitor Associate participates in weekly meetings with the SDP planning team and Service Coordination staff. During this period, the unit supported the completion of 52 client budgets that ultimately were transitioned into the SDP. At the end of 2021, we had a total of 75 clients enrolled in the program.

The unit continued to defer coordination of the Family Cost Participation Program (FCPP) and Annual Family Program Fee (AFPF) program based on the DDS directive to waive all requirements related to these programs effective March 25, 2020 in response to COVID-19. This DDS directive is still currently in effect.

CLIENT REVENUE COORDINATION

This unit manages \$10 million in trust for a little less than 800 individuals, and coordinates benefit applications and benefit eligibility redeterminations for clients. Management of client benefits includes receiving monthly Supplemental Security Income (SSI) and other benefit payments, making regular disbursements to pay for rent and other living expenses, and keeping the status of their eligibility current. This unit consists of a manager and two Revenue Coordinators.

There were 18 SSI and Social Security benefit applications submitted this year, which is up from 2020 (11 in the prior year). Benefit redeterminations were down to 418 from 619 in 2020. The Social Security Administration (SSA) continues giving specific focus on validating the benefit status of SSI recipients. The number of accounts managed by the unit was 765 at the end of the reporting period, down 29 from the prior year. Seven applications (down from 17 in the prior year) and 247 redeterminations (down from 296 in the prior year) were processed for Medi-Cal benefits. In addition, the unit completed an additional 901 (down from 943) forms in response to requests for written information from the Social Security Administration and other entities.

Activity	2020	2021	% Change
Active Accounts	795	765	-3.6%
SSI/SS Benefit Applications	11	18	63.6%
SSI/SS Benefit Redeterminations	619	418	-32.4%
Medi-Cal Benefit Applications	17	7	-58.8%
Medi-Cal Benefit Redeterminations	296	247	-16.5%

The portion of the cost of placement in a licensed residential home paid out of an individual's benefits is sometimes paid by the Center as a loan during the benefit application process. These loans are to be paid back when the benefits are awarded. In 2021, loans totaling approximately \$120,000 were authorized and later reimbursed from client benefits. The total loan balance at the end of 2021 was \$105,515, a 29% increase over 2020. This is due to increased delays in the awarding of benefits from Social Security.

In addition to managing benefits received for our representative payee clients, the Revenue unit is responsible for coordinating the disbursement of some Purchase of Services funds for clients deemed ineligible for SSI benefits and those receiving SSI that live independently. As of 12/31/21, the Center funded the full cost of out-of-home placement for 67 clients ineligible for SSI benefits. Purchase of Services funds were also used to supplement SSI benefits for 247 clients living independently in 2021.

Many of our benefit recipients were eligible to receive the federal Economic Impact Payments in 2020. Over 280 clients received the second round of payments of \$600 in January of 2021 and almost 700 received the third round of payments of \$1,400 in April 2021. In addition, over 300 clients received the Golden State Stimulus funds in July 2021, approved by the State of California to qualifying individuals. SSI recipients are usually expected to keep their total available resources under \$2,000, but clients receiving this additional income were allowed to exclude these amounts

from their resource limit. Revenue staff work closely with service coordination staff to develop plans to spend these funds on client's needs and monitor available resources.

INFORMATION TECHNOLOGY

These five individuals continue to manage and support all of the Center's computer-related activities. This unit's responsibilities include all facets of the midrange computer system, including client and financial data collection processes and various other system processes, as well as the Center's network and personal computers that the Center uses in the conduct of its business.

After another year of working through the pandemic and the changes to how staff function while continuing to work remotely, the IT environment also required a change in focus. Support provided to staff through the IT Help Desk now focus primarily on connectivity. This requires not only dealing with the Centers' connectivity issues for outside access, but also requires we assist staff with their own connectivity issues with their internet providers. Improved connectivity has been critical to support individuals working from home as well as students attending school remotely, and the spike in need has been felt not only at our Center but with internet providers who have had to make changes as well.

The Center also increased the speed on their data lines and installed additional virtual private network (VPN) devices to handle the new demand for access to the Center from the outside. The security access point into the Center was also improved by installing an upgraded firewall. This assisted in managing the traffic flow demand for staff access, Zoom meetings, and internet-based applications.

Increased access from the outside world also required IT to give increased attention to network security, specifically with ensuring secured access and better security monitoring. This year, the Center rolled out 2-factor authentication for secured remote network access. Staff use an authentication application on their cell phones to provide a numeric code that is entered upon login. Second, email security increased by implementing additional email inspection and placing possible problem emails on hold which only IT staff can release. Security continues to evolve in this time of regular cyber security threats, and the Center expects more changes will be implemented in the future.

The influx of new staff and new positions has required the IT unit to secure additional computer equipment in a time when supply is still uncertain. IT has also increased the time spent on setting up and deploying this equipment, which includes determining user access rights, logins, and email. IT also provides basic training in how to access and use all of the Center's various systems. IT Help Desk calls also increased to assist these new remote users. The Center has over 250 users that are supported by the Help Desk staff.

Document imaging efforts continued at the Center, with IT staff providing technical assistance and training of staff. The Center worked aggressively to convert all of the client records into the document imaging system (Laserfiche) to allow staff to access all records remotely. This was an intense effort involving more than 9,000 client charts (over 110,000 records) that is expected to wrap up in mid-2022. In addition to client records, numerous executive and accounting records

were transferred into the Laserfiche system as well. With this effort, the Center has been able to discontinue sending records to be archived at an offsite storage facility.

OPERATIONS MANAGEMENT

This unit has five full time staff including the manager that support the Center in meeting all facility, supply, and non-computer equipment needs. This unit is also responsible for managing the Center's reception and mailroom duties and the administration of the security card system and telephone system. This unit's staffing had a 40% turnover this year. The Receptionist position was successfully filled early this year in the month of February and one of the Operations Assistant positions was filled in the month of August. The Operations unit continued to shift priorities in response to the changing needs of staff continuing to work remotely. This effort included ensuring adherence to social distancing guidelines, securing sanitization supplies, and taking extra steps to ensure timely receipt and distribution of mail in the remote work environment.

FACILITY MANAGEMENT

The third expansion space was confirmed by building management to be available on May 1, 2022 as expected. This ground floor space across from the Center's resource center will become the reception area, expanded meeting and testing room area, and the offices for the Operations staff. The space planning process was started, including securing floor plans, meeting with the Center's real estate broker, and selecting an architectural firm. The project will continue into 2022, requiring continued collaboration with the real estate broker, architectural firm and contracted vendors.

The facility cleaning was performed twice this year in order to maintain the facility for the staff working in the office. Cleaning services continued to be less frequent than prior years due to the decreased staff presence in the office. Furniture in the conference rooms and kitchens were reduced in order to ensure social distancing as staff slowly returned to the offices on a limited basis. The Operations unit also continued to work with building management to maintain common area maintenance.

The Operations unit played a key role in assisting with the Center's efforts to support clients and families during the pandemic. This assistance included supporting delivery and distribution of PPE supplies, receipt and distribution of food donations, and arranging space to allow intake assessments to resume on-site.

RECEPTION AND TELEPHONE SYSTEM

The Center continued to be closed to all visitors with the exception of clinical assessment appointments needed as part of the client intake process. When staff began working remotely at the beginning of the pandemic, incoming calls were routed directly to employee extensions or to a voice mailbox system frequently monitored during business hours. This year, the Center returned to a live receptionist, as calls to the Center's main line increased dramatically. This was attributable to an overall increase in calls as well as a redirecting of incoming calls to from other lines at the Center. Phone system features such as enhanced conference calling and remote system accessibility continued to be utilized in order to stay connected to the Center and the community.

The Center monitored the phone system performance and activity regularly during the year in response to an increase in support requests from staff and concerns regarding connectivity. Reports of poor sound quality and connectivity were received, and Operations staff worked closely with the vendor to resolve. Call history data reports were also generated on a monthly basis and shared with management in order to address concerns regarding the community's inability to contact staff. The Center continues close monitoring of the system and will also be exploring alternative systems in the coming year.

OFFICE SUPPLIES AND EQUIPMENT

Delays in the receiving of supplies from vendors improved from the prior year, allowing the Center to stay adequately supplied with office supplies as well as cleaning and sanitization supplies required to reduce the risks of COVID infection. Supply purchases also increased as staff returned to the office on a limited basis. Changes in equipment included reducing fax machines in response to a significant decrease in usage and replacing of copy machines that reached their end of life. Cell phone equipment and iPads for management were upgraded as needed, including a change to the cell network the equipment uses that will ensure connectivity during an emergency.

MAILROOM

The Center has increased use of phone and email to communicate with clients and families during the pandemic, but much of the corresponding with clients, families and service providers continues via regular mail. The Center continued to prioritize efforts to convert paper forms to an electronic format and has implemented an electronic signature software package that allows documents to be sent and signed electronically. The Operations staff provided hands-on assistance with incoming mail distribution for teams with limited in-office support. Archived records continue to be maintained in offsite storage. The need to access those records has decreased as the Center continued its transition to its electronic records management system.

OFFICE ERGONOMICS

Ensuring the adequacy of staff's workspace has become a challenge in the remote work environment. The Operations unit coordinated the completion of ergonomic assessments when concerns were reported. Office chairs and other equipment were issued as recommended in these assessments. Standing desks, dual monitor systems, and headsets have also been deployed as appropriate to accommodate the ergonomic needs of staff. We continue to prioritize these efforts in order to ensure the comfort and safety of staff.

EXECUTIVE COMMITTEE

EXECUTIVE COMMITTEE

July 13, 2022

MINUTES

PRESENT

Gloria Leiva, Chair
Elizabeth Beltran
Larry DeBoer
Louis Mitchell
Dina Richman

NOT PRESENT

Brigitte Sroujeh

STAFF

Melinda Sullivan

CALL TO ORDER

Ms. Leiva called the meeting to order at 12:05 p.m. The meeting was held via Zoom.

APPROVAL OF MINUTES

Mr. DeBoer moved to approve the minutes of June 8, 2022, Ms. Beltran seconded the motion, and it passed unanimously.

STATE BUDGET UPDATE

Ms. Sullivan advised the Committee that the Center has received its primary allocation for FY 2022-23, which includes 85% of Operations and 80% of Purchase of Services. The Performance Incentive Funding has not been received, but it is anticipated that it will be received within a few weeks.

Ms. Sullivan reported that the Center did not have to tap into its line of credit in July.

BOARD TRAINING

Ms. Sullivan reminded the Committee that the July Board Training will take place on July 27, 2022. The training will mainly focus on Roles & Responsibilities, Conflict of Interest, and Whistleblower training.

LANGUAGE ACCESS PLAN

Ms. Sullivan advised the Committee that the Center's has received approval from DDS on

its Language Access Plan. The Center will receive \$625,000. in its first year to implement the plan and subsequent funding thereafter.

ADJOURNMENT FOR EXECUTIVE SESSION

Ms. Beltran moved to suspend the General Session meeting at 12:10 p.m. for Executive Session to conduct business on Approval of Minutes and Litigation, Ms. Richman seconded the motion, and it passed unanimously.

RECONVENE FOR GENERAL SESSION

The Committee conducted business in executive session on Approval of Minutes and Litigation.

ADJOURNMENT

Ms. Beltran moved to adjourn the meeting at 12:18 pm, Mr. Mitchell seconded the motion, and it passed.

/fl

EXECUTIVE COMMITTEE

August 10, 2022

MINUTES

PRESENT

Gloria Leiva, Chair
Elizabeth Beltran
Larry DeBoer
Louis Mitchell
Dina Richman
Brigitte Sroujeh

STAFF

Melinda Sullivan

CALL TO ORDER

Ms. Leiva called the meeting to order at 12:05 p.m. The meeting was held via Zoom.

APPROVAL OF MINUTES

Mr. Mitchell moved to approve the minutes of July 13, 2022, Ms. Beltran seconded the motion, and it passed unanimously.

BOARD TRAINING DEBRIEF

The Committee had an open discussion on the outcome of the Board training session held on July 27, 2022. The overall comments were positive and all agreed that it went well. Ms. Sullivan advised the Committee that only 2 members have completed the online portion of Cultural Competency Training through ARCA Learn. Cultural Competency Training is required in the Center's contract with DDS. Ms. Sullivan advised the Committee that she would be sending a follow-up email reminder to those who have not completed it and that the deadline is August 31, 2022.

FALL COMMUNITY MEETINGS

Ms. Sullivan advised the Committee that the Center will host its Fall Community Meetings in September.

This year's agenda will cover the following topics:

- Budget overview for fiscal year 2022-23
- Legislative changes in the Budget Trailer Bill
- Achievements from the 2022 performance plan

- Proposed performance plan for 2023

This year's dates are as follows:

- September 7, 2022 at 10 a.m. - Targeted Audience: Service Providers
- September 12, 2022 at 4:30 p.m. - Targeted Audience: Self-Advocates (Clients)
- September 13, 2022 at 6:00 p.m. - Targeted Audience: Spanish Speaking Clients and Families
- September 21, 2022 at 4:00 p.m. - Targeted Audience: English Speaking Clients and Families

ADJOURNMENT FOR EXECUTIVE SESSION

Ms. Beltran moved to suspend the General Session meeting at 12:23 p.m. for Executive Session to conduct business on Approval of Minutes, Litigation, Personnel, and Update on Executive Director's Goals, Mr. Mitchell seconded the motion, and it passed unanimously.

RECONVENE FOR GENERAL SESSION

The Committee conducted business in executive session on Approval of Minutes, Litigation, Personnel, and Update on Executive Director's Goals.

ADJOURNMENT

Ms. Sroujeh moved to adjourn the meeting at 12:39 pm, Ms. Beltran seconded the motion, and it passed.

/fl