



Board of Directors Meeting Agenda April 26, 2022

General Business		
1. Call to Order and Introductions	Action	Dr. Jasmeet Bains
2. Approval/Additions to Agenda	Action	Dr. Jasmeet Bains
3. Review and approve minutes of meeting held March 22, 2022 (Attachment 1)	Action	Dr. Jasmeet Bains
4. Presentation – HCBS	Info	Leslie Reynaga
5. Public Input	Info.	
New Business		
6. Facilitator Training Bylaw Change (Attachment 2)	Action	Matthew Bahr
7. Socialization, Leisure & Recreation Skills Policy Revision (Attachment 3)	Action	Celia Pinal
Reports		
8. Board President Report	Info.	Dr. Jasmeet Bains
9. Executive Director Report	Info.	Dr. Michi Gates
10. Financial Report a. POS Report for February 2022 (Attachment 4) b. Operations Report for February 2022 (Attachment 5)	Info	Tom Wolfgram
11. VAC Report	Info.	Shawn White

Please click the link below to join the webinar:

<https://us02web.zoom.us/j/87506790417?pwd=RHZlanBIOWITM1cvK2g3ZHhUaXFzUT09>

Webinar ID: 875 0679 0417 Passcode: 755958

Dial-In Number: 1-669-219-2599

Next Board Meeting:
May 24, 2022, 6:00 – 7:30 PM

3200 N. Sillect Avenue Bakersfield, California 93308
(661) 327-8531 Fax (661) 324-5060 TDD (661) 327-1251
www.Kernrc.org

**Kern Regional Center
Board of Directors Meeting
April 26, 2022
6:00 – 7:30 p.m.
Zoom Webinar**

3200 N. Sillect Avenue ∞ Bakersfield, CA 93308 ∞ 661-327-8531

MINUTES

KRC BOARD MEMBERS PRESENT:

Oscar Axume, Treasurer
Milan Dinsmore, Board Member
Kevin Gosselin, Vice President
Carlos Isidoro, Board Member
Ryan Jones, Board Member
Tracey Mensch, Board Member
Donald Tobias, Board Member
Mark Tolentino, Board Member
Simon Verdugo, Board Member
Ruth Watterson, Board Member
Shawn White, VAC Representative

KRC BOARD MEMBERS ABSENT:

Jasmeet Bains, President
Martin Vasquez, Secretary

STAFF PRESENT:

Michi Gates, PhD, Executive Director
Kristine Khuu, Assistant Director of Client Services
Leslie Reynaga, HCBS Program Evaluator
Enrique Roman, Director of Community Services
Celia Pinal, Director of Client Services
Tom Wolfgram, CFO

GUESTS PRESENT:

Sofia Benitez, 24-Hour Home Care
Susan Graham
John Noriega, Advocate for Simon Verdugo
Edwin Pineda, DDS

INTERPRETER: Nidya Madrigal Navia

CALL TO ORDER

Vice President, Kevin Gosselin, called the meeting to order at 6:03 PM. A quorum was present. Mr. Gosselin began with introductions of the Board Members and Kern Regional Center staff.

APPROVAL OF AGENDA

All board members had received the agenda ahead of the meeting for review.

M/S/C (Watterson, Mensch)
Ayes = 11; Nays = 0; Abstained = 0
Motion Carried

REVIEW OF MINUTES

The Board of Directors all received the minutes of the board meeting held on March 22, 2022 for review. Vice President Gosselin asked for a motion to approve the March 22, 2022 minutes.

M/S/C (White, Mensch)
Ayes = 11; Nays = 0; Abstained = 0
Motion Carried

PRESENTATION OF HCBS

Leslie Reynaga, HCBS Program Evaluator

Dr. Gates introduced Leslie Reynaga as the Home and Community Based Services Program Evaluator at Kern Regional Center, reporting to Enrique Roman. Leslie began by thanking everyone for the opportunity to present to the Board of Directors. The goal of her presentation is to help define what HCBS means, what is involved in providing service to our clients, and clarify that the Board of Directors is the driving force behind what HCBS accomplishes. A complete copy of the PowerPoint is filed with these minutes.

PUBLIC INPUT

Vice President Gosselin asked if there were any members of the public who had input or questions for the Board of Directors. No hands were raised in the Zoom conference and no questions appeared on the Chat screen. No public input was presented at this meeting.

FACILITATOR TRAINING BYLAW AMENDMENT

Matthew Bahr

Mr. Bahr presented a proposed change to the KRC Board Bylaws to the Board of Directors that addresses facilitator training. DDS is requiring all regional centers to provide facilitators and training for board members who request this. DDS contracts with regional centers now have a requirement for this to be added to the bylaws of regional centers. For Kern Regional Center, the proposed addition of *5.10 Facilitators*, was presented for review and approval to the Board of Directors. Mr. Bahr explained the requirements for making an amendment to Board Bylaws, including a 14-day notice for review.

Two Board Members are not present at this meeting, so Dr. Gates will contact the two absent board members, provide the Bylaw Amendment information to obtain unanimous approval. Mr. Bahr explained that by unanimous vote of the Board of Directors present at this meeting, we can proceed, with the understanding that those voting tonight will have 7 days in which to change their vote, ask for further clarification, or present any other questions.

Mr. Gosselin opened the floor for any Board Member who might have a comment.

Question by Mr. Tolentino: Mr. Tolentino inquired if the language was verbatim from DDS or would they need to review it later to confirm that the language is sufficient?

Answer by Mr. Bahr: It is almost completely verbatim. Language included covers DDS requirements; e.g., “. . . ensure maximum participation and understanding for providing meaningful support. . .” This ensures that we are compliant with the DDS contract requirements.

No other questions were submitted. Vice President Gosselin requested a motion to amend the bylaws, adding Section 5.10 for facilitators with the language that’s been presented in Attachment 2 stating:

5.10. Facilitators

The Corporation will provide a facilitator to those Directors who require additional support to ensure maximum understanding and participation in carrying out their duties per W&I Code, Section 4622(g)(1) and (2). Further the Corporation will provide training and monitoring of these facilitators to ensure they provide meaningful support within the boundaries of their role.

M/S/C (Mensch, Axume)

Ayes = 11; Nays = 0; Abstained = 0

Motion Carried; Unanimously voted by all Board Members present; none opposed.

Mr. Bahr reiterated that Board Members have 7 days to change their vote for any reason. If you feel there is a need to change how you voted tonight, please contact Michi or Mr. Gosselin.

SOCIALIZATION, LEISURE and RECREATION SKILLS POLICY REVISION (Attachment 3)

Celia Pinal, Director of Client Services

Ms. Pinal came before the Board of Directors explaining that she had received communication and feedback from DDS about the Socialization, Leisure and Recreation Skills Policy that the Board had previously approved and sent to DDS. Following DDS guidelines, revisions were made and she now brings the policy back to the Board of Directors for review and approval. The revisions made are noted and highlighted on Attachment 3 that are filed with these minutes as a matter of record.

There was some discussion around the term interdisciplinary team and the Board felt that the team should include, at a minimum, the client, the service coordinator, and the program manager or other appropriate staff member at KRC. With this clarification, Mr. Gosselin asked for a motion to accept the revisions made to the Socialization, Leisure and Recreation Skills Policy.

M/S/C (Tolentino, Mensch)

Ayes = 11; Nays = 0; Abstained = 0

Motion Carried

BOARD PRESIDENT REPORT

Dr. Jasmeet Bains

Vice President Gosselin chaired the meeting in Dr. Bains's absence. Mr. Gosselin had nothing to report, but expressed his thanks to everyone for their continued efforts and full participation as evidenced in the discussion tonight.

EXECUTIVE DIRECTOR'S REPORT

Dr. Michi Gates

Dr. Gates updated the Board on current initiatives:

Provider Rate: Enrique Roman and the Community Services staff have been working hard to implement the provider increases per the Burns and Associates rate study. ARCA and the Lanterman Coalition are continuing to advocate for the need to approve an acceleration in the rate increases. They are currently scheduled to be implemented incrementally over the next 3 years, but we are advocating that those rate increases be given faster. We see our providers struggling to provide rates that attract and retain good quality staff. Our clients deserve to have quality staff who can make a living wage and stay with these jobs.

Participant Choice Positions: We are continuing to receive applications for a third Participant Choice Specialist. There were 3 of these positions allocated to the regional centers to help individuals who want to transition to the Self Determination Program as well as to provide and support individuals who might benefit from the Participant Choice program. We are trying to find the right person to fill this position.

Provisional Eligibility: We are working on assessing our intake individuals that are between 3-4 years of age to determine if they might qualify for provisional eligibility. They need to be assessed to rule out Lanterman Services and then, if they don't meet Lanterman qualifications, we consider them for provisional eligibility. The goal is to capture those 3- and 4-year-olds who could be overlooked because they might be too young to assess accurately. At 5 years old, or just before they turn 5, we can do a more accurate assessment to see if they qualify for Lanterman Services. It has been challenging to increase our numbers due to struggles with having adequate clinical resources to do the assessments, but we are

seeing progress. Thank you to Kristine Khuu for her hard work in recruiting clinicians to do assessments so that we can keep these 3–4-year-olds in the system.

California Tribal Families Coalition: Along with Far Northern Regional Center and San Diego Regional Center, Kern Regional Center has completed a contract with our California Tribal Families Coalition to improve outreach and engagement with our Native American communities. Kern has 8 tribes in our three county catchment area. The first effort focuses on Early Start, but this is just the beginning. This will continue to be funded each year and, as time goes on, we will expand to other age groups. The California Tribal Families Coalition will be adding a third day to their annual ICWA (Indian Child Welfare Act) Conference that will focus on their individuals with disabilities. We will be represented at this conference by Enrique Roman and some of his staff.

Person-Centered Thinking Training: Person-Centered Thinking is very important to Kern Regional Center. We have 2 certified trainers. John Noriega, is also a certified trainer and a participant in tonight's meeting and partners with a KRC certified trainer to provide training to our staff and provider staff. These trainings are scheduled continuously throughout the year with the goal of training all existing staff and new staff as they enter the workforce.

New Position: Regional Centers will soon get their C-3 Allocation in which we will receive funding for a position that will specialize in the Individuals with Disabilities Education Act (IDEA). This position will assist our staff and work with the schools to provide a smoother transition for our children who are first entering the school system and promote inclusion in schools for our children. This position is federally funded through the American Rescue Act for 12 months; however, DDS's current budget proposal for 2022-23 asks for continued funding for this position, so we are going to go ahead and permanently plan for this position.

Hispanic Community Collaboration: KRC has scheduled a meeting with a local community group, *Padres Unidos*, which is made up of Latino families in our catchment area. A representative from this group attended our Board Meeting last month and one of our public meetings addressing caseload ratio and the Performance Contract. This representative provided valuable input. We are hoping to get to know this group better and work together with them on how we can have a productive healthy relationship to understand the needs of our Hispanic Latino community and serve them better.

Staff Recruitment: We continue to hire additional Service Coordinators to fill vacancies as well as hire for anticipated growth. Additional funding will be received July 1 as an effort to meet caseload ratios. Part of those funds (10%) will be contingent upon the new Regional Center's Performance Measures effort. This means that we will be receiving funds to help meet caseload ratios; however, 10% of those funds will be granted only if the regional center meets certain performance objectives above and beyond compliance.

Dr. Gates participates on the DDS Performance Measures Workgroup. They are meeting frequently and getting very close to having some measures to propose for regional centers. One of the things to keep in mind is that this will be an ongoing effort; e.g., the first year, a lot of the measures being considered will establish a baseline and possibly certain upgrades to infrastructure. It will be a graduated process and can be adjusted as we see what works and what does not. The goal is for our system to become more focused on not solely meeting compliance measures, but more toward achieving a person-centered approach and quality services to our clients.

Question by Vice-President Gosselin: Do you feel that KRC is on a good path to earn that 10%?

Answer by Dr. Gates:

I believe we are on a good path. This is an opportunity for regional centers to really make a difference and see quality of lives improve in the community. These performance measures will support regional centers in doing the things we've always wanted to do. We

just need to have adequate base funding. Without that, we are having a hard time being able to meet the compliance measures not to mention being able to perform above and beyond. If given adequate base funding, we can take it from there.

Core Staffing Formula: ARCA and SEIU are continuing to advocate together for an update to the Core Staffing Formula. This formula is used to determine what the RC operations allocation will be each year. It is a very outdated formula, created in the late 1970s and early 1980s. Its original goal was to keep adjusting the salaries compared to like positions in the State. This did not happen for some reason, so it has been quite some time since our salaries were updated. This has resulted in severe underfunding of regional center operations causing high caseloads and inadequate staffing. Until the Core Staffing Formula is updated, and a plan for regular updates implemented, we will continue to see short-staffing and high caseloads at regional centers. Our hope is that the Legislature and the Administration will support this Core Staffing Formula update and implement it for 2022-23.

Vice President Gosselin thanked Dr. Gates and the Executive Team for the hard work going into these efforts.

FINANCIAL REPORT

Tom Wolfgram, CFO

Purchase of Services Report as of February 28, 2022

Total spent for February: \$14,430,733

YTD: \$130,973,376

There are approximately \$2.5 Million unbilled services bringing the cost of our services for our clients around \$5 Million greater than this time last year

Operations Report as of February 28, 2022

Total expenses for February: \$1,881,218

YTD: \$15,684,415

A copy of this Financial Report is filed with these minutes as a matter of record.

VENDOR ACTION COMMITTEE (VAC) REPORT

The VAC Committee did not meet during the month of April. Our next meeting will be on May 24, 2022 at 10:00 AM.

ADJOURNMENT

With nothing further to discuss, Vice President Gosselin adjourned the meeting at 7:30 p.m.

The next meeting will take place on Tuesday, May 24, 2022, at 6:00 p.m.

Respectfully Submitted,

Darlene Pankey
Executive Assistant

Attendee Report**Board of Directors Meeting of April 26, 2022**

Webinar ID

Actual Duration (minutes)

875 0679 0417

146

Host Details

Attended	User Name (Original Name)	Join Time	Leave Time
Yes	KRC Licensing Zoom	4/26/2022 17:10	4/26/2022 19:36

Panelist Details

Attended	User Name (Original Name)	Join Time	Leave Time
Yes	Mark Tolentino	4/26/2022 17:53	4/26/2022 18:01
Yes	Mark Tolentino	4/26/2022 17:59	4/26/2022 19:30
Yes	Carlos Isidoro	4/26/2022 17:11	4/26/2022 19:08
Yes	Carlos Isidoro	4/26/2022 19:11	4/26/2022 19:30
Yes	Donnie Tobias	4/26/2022 18:23	4/26/2022 19:30
Yes	Nidya Madrigal Navia	4/26/2022 17:37	4/26/2022 19:30
Yes	Michi Gates	4/26/2022 17:59	4/26/2022 19:30
Yes	Michi Gates	4/26/2022 18:12	4/26/2022 18:41
Yes	Michi Gates	4/26/2022 19:30	4/26/2022 19:34
Yes	Oscar Axume	4/26/2022 18:07	4/26/2022 19:30
Yes	Tom Wolfgram	4/26/2022 17:28	4/26/2022 19:30
Yes	Shawn White	4/26/2022 17:56	4/26/2022 18:01
Yes	Shawn White	4/26/2022 18:01	4/26/2022 18:05
Yes	Shawn White	4/26/2022 18:05	4/26/2022 18:06
Yes	Shawn White	4/26/2022 18:06	4/26/2022 19:30
Yes	Milan Dinsmore	4/26/2022 18:02	4/26/2022 19:30
Yes	Kristine Khuu	4/26/2022 18:00	4/26/2022 19:08
Yes	Kristine Khuu	4/26/2022 19:15	4/26/2022 19:30
Yes	Enrique Roman	4/26/2022 17:50	4/26/2022 17:58
Yes	Enrique Roman	4/26/2022 17:59	4/26/2022 19:30
Yes	Ruth Watterson	4/26/2022 18:00	4/26/2022 19:14
Yes	Celia Pinal	4/26/2022 18:01	4/26/2022 19:30
Yes	Simon Verdugo	4/26/2022 17:48	4/26/2022 19:31
Yes	Kevin Gosselin	4/26/2022 18:01	4/26/2022 19:30
Yes	Tracey Mensch	4/26/2022 17:51	4/26/2022 19:34
Yes	Leslie Reynaga	4/26/2022 18:09	4/26/2022 19:30
Yes	Ryan Jones	4/26/2022 17:58	4/26/2022 19:30

Attendee Details

Attended	User Name (Original Name)	Join Time	Leave Time
Yes	Susan Graham	4/26/2022 18:15	4/26/2022 19:30
Yes	Edwin Pineda	4/26/2022 17:58	4/26/2022 19:30
Yes	Sofia Benitez	4/26/2022 18:02	4/26/2022 19:30
Yes	Call-In User_1	4/26/2022 17:59	4/26/2022 19:30
Yes	John Noriega	4/26/2022 18:16	4/26/2022 19:22

Meeting Attachments

KRC Board Meeting

April 26, 2022

**Kern Regional Center
Board of Directors Meeting
March 22, 2022
6:00 – 7:00 p.m.
Zoom Webinar**

3200 N. Sillect Avenue ∞ Bakersfield, CA 93308 ∞ 661-327-8531

MINUTES

KRC BOARD MEMBERS PRESENT:

Kevin Gosselin, Vice President
Carlos Isidoro, Board Member
Ryan Jones, Board Member
Tracey Mensch, Board Member
Donald Tobias, Board Member
Mark Tolentino, Board Member
Martin Vasquez, Secretary
Ruth Watterson, Board Member
Shawn White, VAC Representative

KRC BOARD MEMBERS ABSENT:

Jasmeet Bains, M.D., President
Oscar Axume, Board Member
Simon Verdugo, Board Member

STAFF PRESENT:

Michi Gates, PhD, Executive Director
Kristine Khuu, Assistant Director of Client Services
Jamie Patino, Employment Specialist
Enrique Roman, Director of Community Services
Celia Pinal, Director of Client Services
Tom Wolfgram, CFO

GUESTS PRESENT:

Cindy Cox, Advocate for Donald Tobias
Milan Dinsmore
Familias Unidas Representative
Edwin Pineda, DDS
Jeffrey Popkin
Mitzi Villalon
Call-In User

INTERPRETER: Nidya Madrigal Navia

CALL TO ORDER

Vice President Kevin Gosselin called the meeting to order at 6:08 PM. A quorum was present. Mr. Gosselin began with introductions of the Board Members and Kern Regional Center staff.

APPROVAL OF AGENDA

All board members had received the agenda ahead of the meeting for review. Dr. Gates requested a change to the agenda with the deletion of items 13.b. *Start-Up Contract for MARS Group for the Johnson Home* and 13.c. *Vendor Contract with Endless Possibilities for the Vargas Home*. It is not necessary to bring 13.b to the Board of Directors and 13.c has been delayed. Vice President Gosselin asked for a motion to approve the agenda with the deletion of items 13.b and 13.c.

M/S/C (Vasquez, Mensch)

Ayes = 9; Nays = 0; Abstained = 0

Motion Carried

REVIEW OF MINUTES

The Board of Directors all received the minutes of the board meeting held on February 22, 2022 for review. Vice President Gosselin asked for a motion to approve the February 22, 2022 minutes.

M/S/C (White, Mensch)

Ayes = 9; Nays = 0; Abstained = 0

Motion Carried



CONSIDERATION OF BOARD APPLICANT FOR APPOINTMENT TO KRC BOARD OF DIRECTORS

– MILAN DINSMORE

Milan Dinsmore introduced herself and gave a brief synopsis of why she would like to be a KRC Board of Directors member. With a background in behavioral therapy, she has a passion for serving. She is on the staff at The Bridge Bible Church as a Special Needs Coordinator. In her role as Special Needs Coordinator at The Bridge Bible Church, she coordinates giving special needs families the opportunity to participate in large worship services and other activities. She would like to be a board member because she feels like this would better equip her to connect the families that she serves, as well as others in the community, to the services they are qualified for.

After Ms. Dinsmore addressed the Board, Vice-President Gosselin asked for a motion to accept Milan Dinsmore as a member of the Kern Regional Board of Directors.

M/S/C (Mensch, Vasquez)

Ayes = 9; Nays = 0; Abstained = 0

Motion Carried

CLIENT EMPLOYMENT PRESENTATION

Jamie Patino, Employment Specialist at Kern Regional Center, introduced herself and gave an excellent presentation about client employment. Ms. Patino reported that many vendors and clients continued to work during the pandemic. This was a great success during a difficult time. Some items covered:

- The two programs that power client employment are the PIP (Paid Internship Program) and the CEI (Competitive Integrated Employment) programs.
- The PIP Program allows working-age adults to work with one of our agencies to develop an internship in the community. The client participates in paid work experience for a full year, 20 hours per week. Vendors assist the client/potential intern go out and develop these internships, help them prepare for an interview, learn what type of job tasks a particular job entails, etc.
- The CIE (Competitive Integrated Employment) is a program that facilitates the actual hiring of a client or intern. There are some great vendors that help individuals realize their employment goals. Jamie is also working to get information out to the community.
 - **Question by Ryan Jones:** Can this information be shared on KRC's Facebook page?
 - **Answer by Jamie Patino:** Yes. She will meet with Tim to plan.
 - **Question by Tracey Mensch:** How many people have successfully utilized both programs?
 - **Answer by Jamie Patino:** There are 100 open POS's for PIP and CIE. Two individuals have transitioned to permanent employment. These are individuals who did an extraordinary job during their internship.
 - **Question by Kevin Gosselin:** Who is financially responsible for the internships?
 - **Answer by Jamie Patino:** SMS, Financial Management Service, is the employer of record and manage the budget. Payment that comes from the Regional Center budget.
 - **Question by Kevin Gosselin:** Are there other incentives for employers?
 - **Answer by Jamie Patino:** PIP covers wages and payroll costs. The CIE has tax incentives for employers who hire individuals with disabilities.
 - **Question by Kevin Gosselin:** Are there other ways that we can get the word out?

- **Answer by Jamie Patino:** Mr. Jones' suggestion to utilize social media is a great idea. I am always available if someone has a lead to a community vendor that could use one of our clients.
- **Comment by Shawn White:** Speaking on behalf of PathPoint's success, Social Media and word of mouth is effective. Mr. White feels the programs open-up the conversation with employers, giving an employer a better look at a possible candidate. The people that we serve do tremendous work, they are reliable, and it is a joy to work with them. Shawn has done an article for the Californian and would be willing to work with anyone who is interested in doing something like that.
- **Comment by Tracey Mensch:** I am a success story of PathPoint and these programs. I have been employed in Guest Services Department of Mechanics Bank arena for 3 years.
- **Question from Chat:** Is there a plan or idea on how to reach out to those KRC clients that live rurally outside of Bakersfield?
- **Answer by Jamie Patino:** PathPoint has developed and begun to implement the services for PIP and CIE in the Ridgecrest area. We are excited. We do have a potential out-of-town vendor who is looking at services in Bishop as well.

BOARD MEETING MONTHLY TOPIC IDEAS

Kevin would like to continue to push forward with these monthly presentations, such as Ms. Patino just gave. If you have an idea on a topic, please post in the chat. We do have some ideas for the next few months. We are welcoming ideas from Board Members and community. Please reach out to Mr. Gosselin or Dr. Gates if you have interest in a topic that you would like to see presented.

PUBLIC INPUT

A representative from Familias Unidas addressed the Board concerning the upcoming Zoom conference on Tuesday, March 29. This presentation will discuss POS Expenditure and Utilization and Caseload Ratios. The representative specifically addressed the 45-minute timeframe of the meeting. Familias Unidas suggests 1-2 hours for the English portion and Spanish portion, respectively, which will allow more time for discussion, questions, and answers.

Public member, Jeffrey Popkin, voiced concerns regarding the same meeting. He felt that the public notification did not provide enough information and did not provide good website references.

Vice President Gosselin thanked Familias Unidas and Mr. Popkin for their feedback. They both provided good information for review and comparison. KRC's Executive Team will take the feedback and collaborate to make improvements. This information will be part of the minutes and is greatly appreciated.

BOARD PRESIDENT REPORT

Vice President, Kevin Gosselin

Mr. Gosselin had nothing to report at this time.

ARCA DIRECTORS MEETING REPORT

Tracey Mensch, KRC Board Member as well as Kern's ARCA Delegate, reported on the topics discussed at the ARCA Directors Meeting held on March 18, 2022. Ms. Mensch specifically touched on case ratios; operational funding methods; participation in the legislative process; increased employment opportunities, affordable housing options, response to culturally- and ethnically-diverse communities,

strategic resource development; person-centered thinking and planning; and the self-determination program. She spoke about Assembly and Senate bills that are of special interest to ARCA and regional

centers and how they are being tracked. She gave a quick rundown of the ARCA Board Committees and their chairs and ended by giving the contact information for ARCA and Kern Regional Center. A copy of the PowerPoint presentation made by Ms. Mensch is attached to these minutes as a matter of record.

FINANCIAL REPORT

Tom Wolfram, CFO

Purchase of Services Report as of January 31, 2022

Total spent YTD: \$14,524,031

There are approximately \$2 Million in unbilled services. Taking this into account, we are pleased to have provided about \$6 Million in services to clients in January 2022.

Operations Report as of January 31, 2022

Total expenses: \$1,933,015

Salaries & Benefits are decreased this month because we have received our CPP (Community Placement Plan) allocation. When KRC receives the allocation for CPP, we transfer the salaries allocated out of the general fund over to the CPP fund. That's why Operations salaries appear to be so low.

The CPP allocation for salaries is \$1,081,257; Operating Expenses \$42,200; Salaries are \$380,755. If you add the CPP wages to the Operations Salaries of \$908,941 the total is \$1,289,696 which is consistent with previous months. We are doing well.

The Operations Report and the Purchases of Services Report are filed as an attachment with these minutes as a matter of record.

EXECUTIVE DIRECTOR'S REPORT

Dr. Michi Gates

First, Dr. Gates expressed appreciation for the public feedback. The Executive Team will be looking at this information to strategize our interaction with our public for the best possible outcomes. The comments are valuable, and the feedback is truly appreciated.

COVID-19 Data Dashboards are no longer being provided by DDS and regional centers are no longer required to provide the data separately. COVID-19 data will now be taken directly from our special incident reports. The emphasis has changed from counting individuals who have COVID-19 to counting the number of cases (since some individuals contract COVID-19 more than once).

Dr. Gates will soon be sharing the ARCA report on statewide caseload ratios. The number of service coordinators that are needed to meet caseload ratios has increased. Regional center populations are growing and workforce shrinkage is making an impact. New caseload ratio funding is coming July 1; however, that funding is based upon last year's numbers. We will continue to fall short in workforce numbers if we do not get reform to the core staffing formula, the formula used by DDS to determine regional center operations funding used to hire staff.

Grass Roots will be held April 5. Thank you to Tracey Mensch for being part of our team and presenting issues that we want to promote and advocate for in this budget season to our legislators. Some of the main points we want to present:

1. Elimination of family program and cost participation fees.
2. Acceleration of rate increases for our providers.
3. Reform to the Core Staffing Formula.

Dr. Gates encouraged everyone to look on ARCA's website to view related bills that ARCA is co-sponsoring or involved with. She spoke about 2 bills in particular:

1. AB2378, proposed by Assembly Member Irwin, includes provision of further incentives and additional tax credit for employers to hire individuals with developmental disabilities.
2. SB882, proposed by Senator Eggman, would create an advisory council to look at the way law enforcement interacts with individuals with developmental disabilities.

Dr. Gates specifically thanked our vendors. An excellent Vendor Advisory Committee was held this morning and the passion, collaboration and ideas were very much appreciated.

VENDOR ADVISOR COMMITTEE REPORT

Shawn White, VAC Representative

Mr. White reported that the VAC Committee was held this morning. A copy of the Vendor Advisory Committee agenda of March 22, 2022 is attached to these minutes.

Mr. White reported that the vendors are discussing and evaluating a possible Hybrid committee meeting. The vendors also voted to have the RC Vendor Luncheon in November 2022, hopefully in person, and 4 people volunteered to help plan for the event. We will have more information and a confirmed date by our May meeting.,

During the Sub-Committee portion of the agenda, a great discussion took place around law enforcement. More collaboration between vendors and law enforcement is needed. As a result of this discussion, we will be developing a Safety Net Task Force to work on these issues. Mr. White will be sending an e-mail to vendors to recruit volunteers who desire to serve on this task force. We will also form a subcommittee to review service of equity issues as well as a subcommittee to look at performance contract reviews. One more update from our Employment Subcommittee is the phase-out of the sub-minimum wage (AB639). Any vendor interested in giving input or working with the task force can go to the site at the DDS website for information so they can attend that meeting.

STAFF REPORT

EMPLOYMENT FIRST POLICY

Enrique Roman, Director of Community Services

Mr. Enrique Roman comes before the board to ask for the review and approval of the Employment First Policy. The purpose of this policy is for Kern Regional Center to embrace the notion of Employment First. What this means for our clients is that when we are looking at the IPP (Individual Program Plan) we plan ahead to get services and goals in place that will lead to some type of integrated, competitive employment for the individual. It serves as a paradigm shift—looking at abilities instead of disabilities. The policy also involves working with our other stakeholders that support our clients by establishing a local partnership agreement with our educational system and the Department of Rehabilitation. These entities play a role in preparing our individuals for adulthood, including employment. The IEP process will begin in Early Start to prepare for the IPP stage resulting in the training being in place for when the individual exits the educational system. The partnership with the Department of Rehabilitation is vital because they have many of the resources that the regional center doesn't have, but they provide some of the job coaching and preparation of the individual in the workplace. Once their services end, KRC comes in to continue the support. Promotion of Employment First and education of clients and families about employment will be a top concern, including engagement counselors to work with clients on the financial side of things.

Question from Tracey Mensch: Is there any guidance from the Department of Rehabilitation about any in-depth tools to use from SSI?

Answer from Enrique Roman: We are in the initial steps of exploring these services. We have some contacts in the community that we would like to meet with and have discussions so that we can get concrete answers to these types of areas.

Ms. Mensch would like to be part of these discussions. Mr. Roman will reach out to her once the meetings are coordinated.

Mr. Roman asked for a motion to approve and adopt the Employment First policy.

M/S/C (Mensch, Tolentino)

Ayes = 8; Nays = 0; Abstained = 1 (Shawn White)

Motion Carried

ADJOURNMENT

With nothing further to discuss, Mr. Gosselin adjourned the meeting at 7:56 p.m.

The next meeting will take place on Tuesday, April 26, 2022, at 6:00 p.m.

Respectfully Submitted,

*Darlene Pankey
Executive Assistant*

Home and Community-Based Services (HCBS)

Presented by:

Leslie Reynaga, HCBS Program Evaluator

Kern Regional Center

Lreynaga@kernrc.org – 661-852-3227

1

Change is a constant in our world.

Michigan Governor (1969-1983) (Milliken) Addresses and Special Messages



2



Agenda

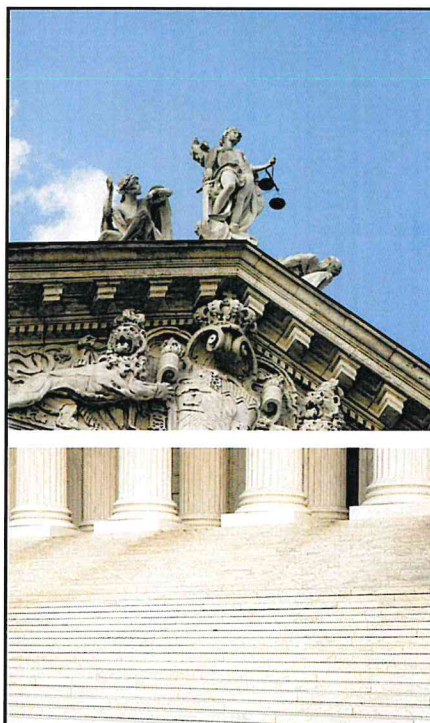
Brief overview of the HCBS Final Rule

Purpose

Statewide Transition Plan

Final Rule Federal Requirements #1-10

3



Key Points in History

Home and Community Based Services (HCBS) Waiver was added to section 1915(c) of the Social Security Act. (3)

LR4

California's Statewide Transition Plan (STP) was initially approved by CMS in 2018, identifies the framework and strategy for achieving and maintaining compliance with the Final Rule federal requirements for HCBS settings by 2023. (4)

LR5

1980s



2014



2018



In the HCBS Final Rules were released by the Centers of Medicare and Medicaid (CMS), as part of the Affordable Care Act. The rules ensure that home and community-based services programs funded through Medicaid – called Medi-Cal in California – provide eligible persons with disabilities full access to the benefits of community living and offer them long-term services and supports in the most integrated settings of their choosing. (4)

4

Slide 4

LR4 Medi-aid (Medi-cal) in California, through what is called the Wavier, helps pay for most of the services regional centers provide to individuals with developmental disabilities. In March 2014 new federal rules became effective describing how home and community-based services are provided.

Leslie Reynaga, 1/6/2022

LR5 Prior to the Final Rule, home and community-based (HCB) setting requirements were based on location, geography, or physical characteristics. The Final Rules define HCB settings as more process and outcome-oriented, guided by the individual's receiving services person-centered service plan by:

Leslie Reynaga, 4/13/2022



What is Home and Community Based Services?

HCBS essentially different kinds of **long term service and supports** for people with disabilities and older adults **to live and spend their days**; for example such as living in a licensed residential care facility; attend day program. (2)

The **HCBS Final Rule** explains what these settings **should be like and describes quality services** within its 10 Federal Requirements.

These services can be a combination of standard medical services and non-medical services.

Services can include, but are not limited to:

- case management (i.e. supports and service coordination)

- homemaker

- home health aide

- personal care

- adult day health services

- habilitation (day program and residential care facilities)**

- Employment and Work Activity Programs**

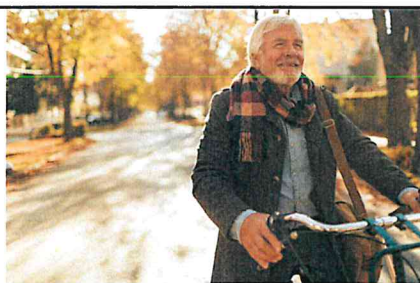
- and respite care (4)

5

What is the Final Rule About?

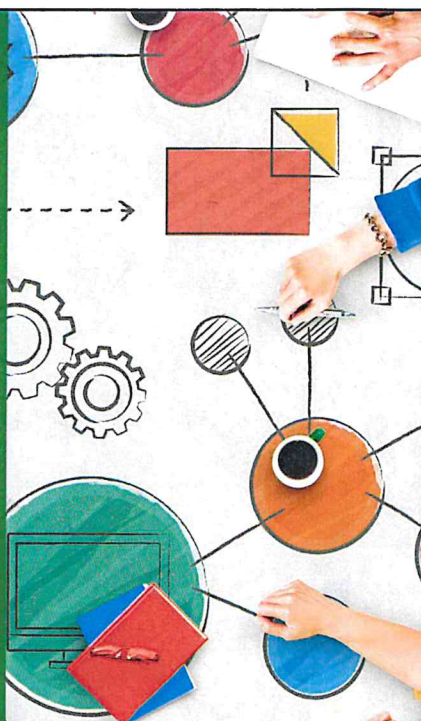
The purpose of the Final Rule is to ensure that individuals receive services in settings that are **integrated** in and **support full access** to the greater community.

This includes **opportunities** to seek employment and work in competitive and integrated settings, engage in community life, control personal resources, and receive services to the same degree as individuals who do not receive regional center services. (1)



6

Encourages person-centered planning process, and the plan reflects the individual's service and supports and what is important to them. (1)



- Enhance the **quality of Services**
- Provide protections to participants
 - The rules are **rights afforded** to participants
 - The services, supports and any modifications would be custom to the individual and **tailored to each individual needs** and documented within their service plans.
- **Assure full access** to benefits of community living
 - Receive services in the most **integrated setting, with type and frequency**
 - Receive services to the **same degree of access** as individuals not receiving HCBS or regional services





What does it mean?

If you are an **individual who receives services**, it means there will be a focus on choice in how you choose to spend the day and where to live and whom to live with, afforded personal rights and respect, access, and options of being involved in the community, a choosing from different services and service providers ⁽¹⁾

If you are a **service provider**, it means that you may need to reflect on how services are provided and make changes in how you operate in order to meet the new federal rules by modifying policies and program designs, where and how your service are delivered, and providing training to assure that your staff members understand the expectations of the rules. ⁽¹⁾

9

Coordinated Support for the Final Rule

The Centers of Medicare and Medicaid (CMS) and the Department of Developmental Services (DDS) and its collaborative partners have created a Statewide Transition Plan (STP) detailing steps toward compliance with the Final Rule by 2023. Some of these steps include provider self-assessments, virtual assessments, webinar trainings, and opportunities for compliance funding. ⁽¹⁾



10

HCBS Final Rule Federal Requirements

<div style="background-color: #003366; color: white; padding: 5px; text-align: center;"> Federal Requirements 6-9 are only applicable to residential services </div>	Federal Requirement #1	Access to the Community
	Federal Requirement #2	Choice of Setting
	Federal Requirement #3	Right to be Treated Well
	Federal Requirement #4	Independence
	Federal Requirement #5	Choice of Services and Supports
	Federal Requirement #6	Residential Agreement
	Federal Requirement #7	Privacy
	Federal Requirement #8	Schedule and Access to Food
	Federal Requirement #9	Right to Visitors
	Federal Requirement #10	Accessibility

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Shared Responsibility

Additionally, a provider may not be solely responsible for the activities associated with each requirement, as some may be a shared responsibility with the regional center or another entity.

Each individual and service provider is unique. As a result, there are many ways to align services in California to meet the federal requirements. Collecting input from individuals on their experience is necessary to ensure services are individualized and person-centered since there is not a singular template or service design that can be used to meet these requirements in all situations. (5)

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Exploring the Federal Requirements further

- For Providers and Regional Center staff the Self Assessment is a great tool for exploring the elements within each requirement

You may find a copy of the Self Assessment on DDS's website:

<https://www.dds.ca.gov/initiatives/cms-hcbs-regulations/assessment-information/>

You may find a great HCBS guide on Tri-Counties Website:

[Living Well In My Community - A Guide to Home and Community Based Service Standards and Person-Centered Practices - Tri Counties Regional Center \(tri-counties.org\)](https://www.tri-counties.org/Living-Well-In-My-Community-A-Guide-to-Home-and-Community-Based-Service-Standards-and-Person-Centered-Practices)

13

Modified based on individualized need

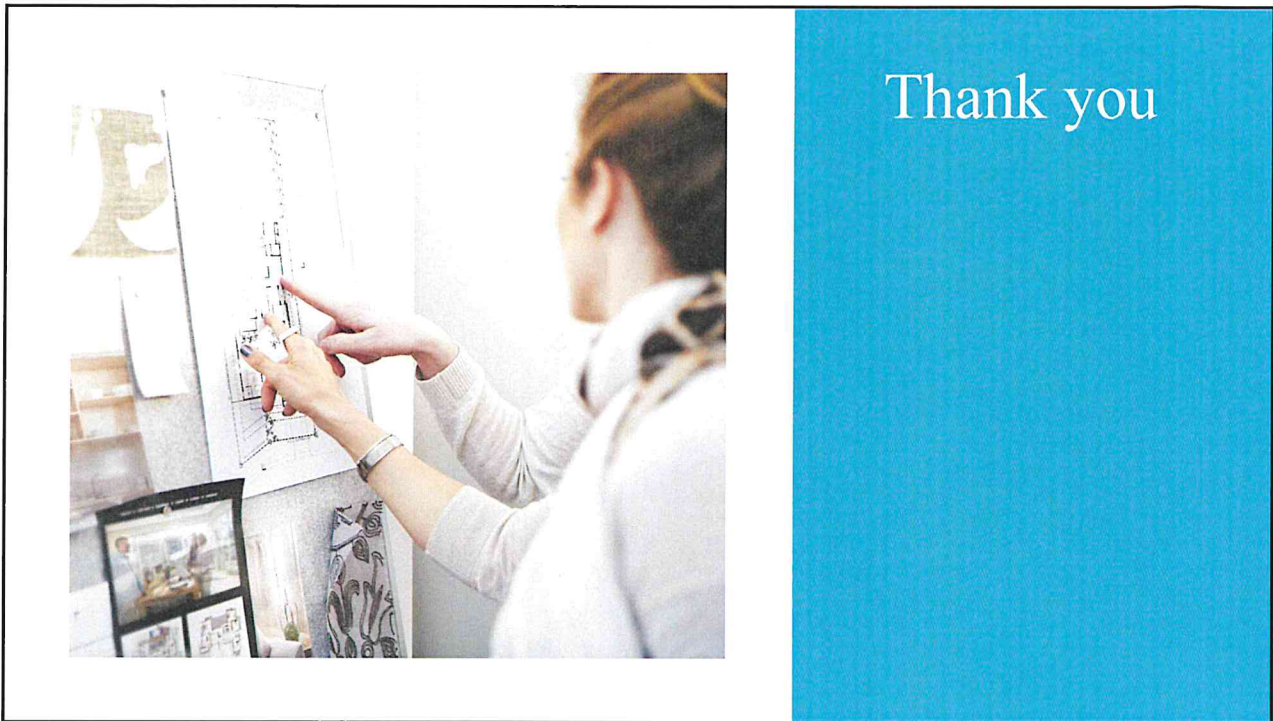


there are some requirements within the HCBS Final Rule that can be modified based on an individualized need. However, all the following must be documented in the individual's program plan and/or service plan:

- A specific and individualized assessed need.
- Positive interventions and supports used prior to any modification(s).
- Less intrusive methods of meeting the need that have been tried but did not work.
- Clear description of the condition(s) that is directly proportionate to the specific assessed need.
- Review of regulations and data to measure the ongoing effectiveness of the modification(s).
- Established time limits for periodic reviews to determine if the modification(s) is still necessary or can be terminated.
- Informed consent of the individual.
- An assurance that interventions and supports will cause no harm to the individual

(5)

14



15

Resources and Support

Visit DDS Website for information on Assessments, Statewide Transition Plan, Compliance funding and Training tools:

1. [Home and Community-Based Services \(HCBS\) Final Rule - CA Department of Developmental Services](#)
2. [Living Well In My Community - A Guide to Home and Community Based Service Standards and Person-Centered Practices - Tri Counties Regional Center \(tri-counties.org\)](#)
3. [The HCBS Waiver Primer and Policy Manual \(ca.gov\) https://www.dds.ca.gov/wp-content/uploads/2019/02/HCBS_WaiverPrimerPolicy_20190212.pdf](#)
4. [Fact Sheet: Home and Community Based Setting Rule - CA Department of Developmental Services](#)
5. <https://www.dds.ca.gov/initiatives/cms-hcbs-regulations/assessment-information/>

Questions?

Leslie Reynaga

Home and Community-Based Services Program Evaluator

Lreynaga@kernrc.org

661-852-3227

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- 5.9.3 Be an employee or member of the Board of any entity from which the Corporation purchases client services, except as otherwise permitted under Section 4622(a)(7) of the California Welfare and Institutions Code, and as provided pursuant to section 5.6 of these Bylaws pertaining to one (1) member of the Board selected by the Providers' Advisory Committee;
- 5.9.4 Have a financial interest, as defined in Section 87103 of the Government Code, in the Corporation's operations except as a consumer of services provided by the Corporation;
- 5.9.5 Be, or have a spouse who is, an owner, partner, member of the Board, officer, or employee of any contractor of the Corporation; or
- 5.9.6 Otherwise be a person barred from serving on the Board of the Corporation by law or government regulation.

5.10 Facilitators [Proposed]

The Corporation will provide a facilitator to those Directors who require additional support to ensure maximum understanding and participation in carrying out their duties per W&I Code, Section 4622(g)(1) and (2). Further the Corporation will provide training and monitoring of these facilitators to ensure they provide meaningful support within the boundaries of their role.

5.11 Vacancies.

- 5.10.1 Events Causing Vacancy. A vacancy on the Board shall exist on the occurrence of one or more of the following:
 - (a) The death, resignation, or removal of any Director.
 - (b) The declaration by the Board of a vacancy of the office of a director who has been declared of unsound mind by an order of the Court or convicted of a felony or has been found by final order or judgment of any court to have breached a duty under Sections 5320 et seq. of the California Nonprofit Corporation Law.
 - (c) The vote of a majority of Directors then in office to remove a director, other than a director pursuant to section 5222 of the California Nonprofit Corporation Law.
 - (d) An increase in the authorized number of Directors.
 - (e) The removal by the Providers' Advisory Committee of the Director designated pursuant to section 5.6 of these Bylaws.
- 5.10.2 Resignations. Except as provided in this section, any Director may resign by giving written notice to the President or the Secretary of the Board. No Director may resign when the Corporation would be left without a duly elected Director or Directors in charge of its affairs.
- 5.10.3 Vacancies Filled by Board. The Board may elect a Director at any time to fill a vacancy, other than a vacancy created due to the death, resignation or vacancy

Socialization, Leisure and Recreation Skills

Kern Regional Center Policy

Socialization, leisure and recreation services are those services and supports designed to enhance the development of appropriate socialization skills for children who may have social skill challenges that limit age-appropriate socialization opportunities or adults who may have difficulty developing friendships. Such services may include activities that involve sports, hobbies, music appreciation, arts, leisure, education, service club participation and the development of other leisure time skills.

Social skills are those abilities and behaviors needed to initiate, plan, explore and participate in meaningful, age appropriate social relationships and activities.

Social skills challenges may include, but are not limited to: excessive shyness or passivity; limited responses to social approaches by others; inappropriate social interactions (e.g., teasing/bullying); excessive friendly advances toward others; socially unacceptable mannerisms, difficulty in developing friendships, and other behaviors (easily frustrated, resistive) that might interfere with appropriate social interaction with peers and others.

KRC recognizes that socialization, leisure and recreation activities are valuable and will support efforts to remove barriers and to facilitate our clients' full participation, along with other citizens, in a broad range of such community opportunities. In doing so we will pursue the goal of services to persons with developmental disabilities in the most inclusive setting and the maximum possible participation in typical socialization, leisure and recreational settings in the community. In communities where such opportunities are not available to persons with developmental disabilities, KRC will encourage publicly and privately funded socialization, leisure and recreational programs to adapt their services in order to accommodate our clients.

KRC also recognizes, however, that some individuals with developmental disabilities are precluded from participation in typical social activities by virtue of their behavior, physical condition or level of skill. Such children and adults often require sports that are absent from many typical social/recreation programs. Accordingly, KRC will purchase socialization, leisure and recreation services or supports under the following circumstances:

- When the client is at least (3) years of age; and
- When an Interdisciplinary Team has determined that the client has a social skill (challenge(s), as defined above, and such challenge(s) has been documented in the client's record; and
- An opportunity has been identified to achieve an improvement in the client's social, recreational and leisure life in the community or to develop friendships; and
- No socialization, leisure or recreational opportunity is otherwise available to the client. In making this determination, KRC, the client and the family must first make reasonable efforts to identify and use typical community socialization, leisure or recreation programs to meet the client's needs. Such reasonable efforts must include consideration of the provision of supports (natural or purchased) which will enable the client to participate in a typical social/recreational program. KRC will not purchase a segregated socialization program when there is a generic service which is willing (either with or without supports) to include the client in its activities; and
- The need for the purchased service is documented in the client's Individual Program Plan which also includes specific desired outcomes and plans to develop social skills or friendships with the overall goal of including the client in social/recreation activities with nondisabled peers; and

- The purchase of segregated socialization programming is for a reasonable time-limited period (the client's progress in achieving specific outcomes must be reviewed at intervals not to exceed six months and there must be evidence that progress is being made in order to continue the service; it is expected that the client will be included in typical community recreational programs, with supports if necessary, following the purchase of segregated socialization programming); and
- In determining the frequency/duration of socialization, leisure or recreation skill development for a child with a developmental disability, care is taken not to unduly interfere with the time that families spend together in social activities during weekends and vacations; and
- Social, leisure and recreation programs are not designed to be used as a childcare service for working parents (see Guidelines on Childcare), or as an ongoing source of recreation and the purchase of these services for such purposes will not be authorized; and
- Social/recreational activities should not interfere with or occur during educational programming and or adult day programming; and
- KRC believes that participation by clients in a socialization, leisure or recreation program may also meet a family's need for respite. Accordingly, KRC will review the purchase of both respite and social, leisure and recreation services and make individual adjustments accordingly.
- Clients who live in community care and health care residential homes are entitled to receive social, leisure and recreation services as part of such residential programming as a rule these services may not be purchased for clients who reside in such licensed homes. Campership not to exceed two consecutive weeks annually will be allowed.
- Clients may choose to attend up to a two- week campership per year as a socialization, leisure and recreational activity. For minor children, families will be asked to assume parental responsibilities. KRC's participation in providing for a camp purchase will be viewed as meeting respite, socialization, leisure or recreational objectives. Individual adjustment in purchased services will be reviewed accordingly.
- KRC may purchase supported community integration programming at a 1:1 staff to client ratio based on individual needs and per the Individual Program Plan.
- When these circumstances are not met and the planning team determines an exception is warranted, an interdisciplinary team review will take place. The interdisciplinary team may include the client/representative, Service Coordinator, Program Manager, Client Services Assistant Director/Director, and other consultants depending on need. The exception shall be granted on an individual basis per the Individual Program Plan.

Revised: 11/2021 4/14/22

Approved November 30, 2021 KRC Board of Directors

Attachment 4

KERN REGIONAL CENTER
PURCHASE OF SERVICE
FY 2021-2022
AS OF FEBRUARY 28, 2022

PURCHASE OF SERVICES	July 2021	August 2021	September 2021	October 2021	November 2021	December 2021	January 2022	February 2022	March 2022	April 2022	May 2022	June 2022	2021-2022 Total
OUT-OF-HOME													
Community Care Facility	4,323,910	4,372,225	4,353,377	4,374,111	4,354,630	4,374,592	4,418,544	4,319,454					34,890,843
ICF/SNF Facility	66,607	69,980	78,331	68,820	75,960	78,426	70,086	51,054					558,864
TOTAL OUT OF HOME	4,390,517	4,441,805	4,431,708	4,442,931	4,430,590	4,453,018	4,488,630	4,370,508	-	-	-	-	35,449,707
DAY PROGRAMS													
Day Care	52,330	54,384	51,559	52,979	51,723	51,936	51,823	47,097					413,831
Day Training	2,507,131	2,529,512	2,522,635	2,523,651	2,477,931	2,492,340	2,330,852	2,167,737					19,551,789
Supported Employment	395,336	434,186	355,224	383,766	345,893	351,505	320,738	311,270					2,898,020
Work Activity Program	5,990	6,152	6,364	5,375	5,187	4,866	4,866	4,225					43,025
SUBTOTAL DAY PROGRAMS	2,960,787	3,024,236	2,935,782	2,965,771	2,880,834	2,900,647	2,708,279	2,530,329	-	-	-	-	22,906,685
OTHER SERVICES													
Non Medical Services Prof	357,862	395,555	388,695	414,810	424,905	410,931	317,494	298,852					3,009,104
Home Care Services Prog	1,411,165	1,392,479	1,340,966	1,339,083	1,237,914	1,244,633	1,191,102	1,224,515					10,381,857
Transportation	23,797	18,447	15,263	14,242	14,577	13,956	11,165	2,075					113,522
Transportation Contracts	446,147	448,710	452,542	465,061	463,829	462,347	462,197	460,928					3,661,761
Prevention Services	604,704	599,279	563,417	571,781	553,793	558,192	568,603	548,666					4,568,445
Other Authorized Services	568,138	581,494	576,885	584,733	571,716	565,933	557,735	218,757					4,227,391
P & I Expense	3,792,119	3,761,996	3,791,696	3,803,968	3,656,235	3,522,811	3,451,079	3,234,518					29,014,422
Hospital Care	9,493	9,304	8,630	9,650	9,855	9,579	11,083	11,099					78,693
Medical Equipment	9,523	6,899	46,893	1,587	8,640	10,333	2,092	809					-
Medical Services Prof	173,755	192,758	174,943	196,111	192,050	192,351	169,883	130,201					86,776
Medical Services Prog	44,666	50,619	45,163	44,546	47,426	47,206	43,487	46,799					1,422,062
Respite Care - In Home	1,817,417	1,804,950	1,800,819	1,826,430	1,804,535	1,832,692	1,759,901	1,135,864					369,932
Respite Care - Out of Home	31,379	19,901	16,653	7,238	5,555	15,186	4,409	14,125					13,782,608
													114,446
													-
													-
TOTAL OTHER SERVICES	9,290,185	9,282,391	9,224,565	9,279,250	8,991,030	8,886,160	8,550,230	7,327,208	-	-	-	-	70,831,019
TOTAL PURCHASE OF SERVICES	16,641,489	16,748,432	16,592,055	16,687,952	16,302,454	16,239,875	15,747,139	14,228,045	-	-	-	-	129,187,391
COMMUNITY PLACEMENT PLAN													
Community Care Facility	218,621	218,621	218,783	215,971	215,359	216,460	201,164	193,441					1,698,420
ICF/SNF Facility													-
Day Training													-
Non-Medical Services			425	1,434									1,859
Non-Medical Services-Programs													-
Transportation		86											-
Other Authorized Services	1,425	1,613	1,901	1,489	2,151	1,152	1,351	50					11,332
Other Services													-
Medical Care - Prof													-
Community Care Facility	9,330	9,330	9,330	9,330	9,330	9,330	9,197	9,197					74,374
TOTAL COMMUNITY PLACEMENT PL	229,376	229,850	230,439	228,224	226,840	226,942	211,712	202,686	-	-	-	-	1,785,985
TOTAL PURCHASE OF SERVICE	16,870,865	16,978,282	16,822,494	16,916,176	16,529,294	16,466,767	15,958,851	14,430,733	-	-	-	-	130,973,376

Attachment 5

KERN REGIONAL CENTER
OPERATIONS
FY 2021/2022
AS OF FEBRUARY 28, 2022

	PROPOSED EXPENDITURE	YEAR TO DATE	07/31/21	08/31/21	09/30/21	10/31/21	11/30/21	12/31/21	01/31/22	02/28/22	03/31/22	04/30/22	05/31/22	06/30/22	TOTAL	OVER/UNDER
OPERATIONS																
Salaries & Benefits	20,308,776	11,716,602	1,408,718	1,321,905	1,856,452	1,487,745	1,351,822	1,889,350	908,941	1,276,801					11,501,734	214,867
Operating Expenses	4,794,000	4,794,000	322,819	314,808	360,853	485,622	377,784	575,089	386,813	505,931					3,339,719	1,454,281
SUBTOTAL OPS	25,102,776	16,510,602	1,731,537	1,636,713	2,217,305	1,983,367	1,729,607	2,464,438	1,295,755	1,782,732					14,841,454	1,669,148
COMMUNITY PLACEMENT PLAN																
Salaries & Benefits	1,081,257	623,802							380,755	42,562					423,317	200,486
Operating Expenses	42,200	24,617							242,481	40,568					283,028	(296,411)
SUBTOTAL CPP	1,123,457	648,419							623,215	83,129					706,345	(57,926)
FOSTER GRANDPARENT PROGRAM																
Salaries & Benefits	69,809	40,274	3,371	3,427	4,713	3,407	3,464	3,427	3,334	5,868					31,012	9,263
Operating Expenses	127,864	74,587	4,032	7,393	10,371	2,916	140	13,565	3,558	3,756					45,731	28,856
SUBTOTAL FGP	197,673	114,862	7,404	10,820	15,085	6,323	3,604	16,992	6,892	9,624					76,743	38,119
SENIOR COMPANION PROGRAM																
Salaries & Benefits	85,320	49,223	4,120	4,188	5,761	4,164	4,234	4,188	4,075	3,506					34,236	14,987
Operating Expenses	155,596	90,764	4,087	4,200	3,738	1,823	248	6,238	3,077	2,227					25,638	65,127
SUBTOTAL SCP	240,916	139,987	8,207	8,388	9,498	5,987	4,482	10,426	7,153	5,732					59,874	80,113
TOTAL OPERATIONS	26,664,822	17,413,869	1,747,148	1,655,921	2,241,889	1,995,677	1,737,692	2,491,857	1,933,015	1,881,218					15,684,415	1,729,454