



Board of Directors Meeting Agenda

Tuesday, May 23, 2023

6:00 – 7:30 p.m.

Kern Regional Center, 3200 N. Sillect Ave., Bakersfield CA 93308

Malibu Room

General Business			
1. Call to Order and Introductions		Kevin Gosselin	6:00 – 6:05 p.m.
2. Approval/Additions to Agenda	Action	Kevin Gosselin	6:05 – 6:07 p.m.
3. Review and approve minutes of meeting held on April 25, 2023 (Attachment 1)	Action	Kevin Gosselin	6:07 – 6:10 p.m.
4. Regional Center Performance Measures (Attachment 2)	Info.	Dr. Michi Gates, KRC Executive Director Celia Pinal, KRC Client Services Director Enrique Roman, KRC Community Services Director	6:10 – 6:40 p.m.
5. Public Input	Info.		6:40 – 6:45 p.m.
Reports			
6. Board President Report	Info.	Kevin Gosselin	7:00 – 7:05 p.m.
7. Executive Director Report	Info.	Dr. Michi Gates	7:05 – 7:20 p.m.
8. Financial Report <i>a.</i> POS Report for March 2023 (Attachment 3) <i>b.</i> Operations Report for March 2023 (Attachment 4)	Info	Tom Wolfram	7:20 – 7:25 p.m.
9. Vendor Advisory Committee Report	Info.	Tamerla Prince	7:25 – 7:30 p.m.

Please click the link below to join the webinar:

<https://us02web.zoom.us/j/84787923204?pwd=QzNsZHZvVzR1RjQvZmpvdi9MZE9qdz09>

Webinar ID: 876 9766 3898 Passcode: 655708

Dial-In Number: (206) 337-9723

No Public Board Meeting in June

Board Member Education Retreat

June 27, 2023, 6:00 – 7:30 PM

Kern Regional Center, 3200 N. Sillect Ave., Bakersfield CA 93308

Malibu Room

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
May 23, 2023, 6:00 – 7:30 p.m.

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

MINUTES

KRC BOARD MEMBERS PRESENT:

Kevin Gosselin, President
Ryan Jones, Board Member
Tracey Mensch, Vice President/ARCA Delegate
Tamerla Prince, VAC Representative
Donald Tobias, Board Member
Mark Tolentino, Board Member
Martin Vasquez, Secretary
Simon Verdugo, Board Member

FACILITATORS:

John Noriega, Advocate for Simon Verdugo

KRC STAFF PRESENT:

Michi Gates, PhD, Executive Director
Kristine Khuu, Asst. Director of Client Services
Yesenia Mackie, Asst. Director of Client Services
Celia Pinal, Director of Client Services
Enrique Roman, Director of Community Services
Jose Santana, IT
Tom Wolfgram, Chief Financial Officer

KRC BOARD MEMBERS ABSENT:

Oscar Axume
Carlos Isidoro
Ruth Watterson

GUESTS:

Ana Alonso
Edwin Pineda, DDS
Samantha Pinto
Jonathan Torres
Norma Tuiasosopo
Yesenia Velasquez

INTERPRETERS:

Kimberly Cantwell, ASL
Mark Robinson, ASL
Nidya Madrigal-Navia, Spanish

CALL TO ORDER

President Kevin Gosselin called the meeting of the KRC Board of Directors to order at 6:10 p.m. Introductions of board members, KRC staff, and guests were made.

APPROVAL OF AGENDA

The Board of Directors had previously received the agenda for review.

No additions or edits were requested. President Gosselin asked for a motion to approve the agenda of May 23, 2023.

M/S/C: (Prince, Mensch)

Ayes: 8

Motion Carried

REVIEW OF MINUTES

The Board of Directors had previously received the minutes of the Board Meeting held on April 25, 2023, for review.

No edits were requested. President Gosselin asked for a motion to approve the minutes of April 25, 2023.

M/S/C: (Mensch, Prince)

Ayes: 8

Motion Carried

REGIONAL CENTER PERFORMANCE MEASURES

Dr. Michi Gates, KRC Executive Director

Dr. Gates presented the Regional Center (RC) Performance Measures developed by the Department of Developmental Services (DDS) and DDS Regional Center Performance Measure Stakeholder Work Group. This report outlines the performance measures required from regional centers. Dr. Gates presented the different measures by focus areas, measures, and desired outcomes.

Focus Area	Measure	Desired Outcome
Early Start	Child Find and Identification	Children who are eligible for Early Start are identified and enrolled in a timely manner.
	Timely Access to Early Start Services	Children and families have timely access to Early Start services to minimize the impact of developmental delays.
Employment	Participation in Competitive Integrated Employment (CIE)	People who want a job, have a job, and employment services help people get and keep jobs that maximize their skills and interests.
	Data Points and Reporting for Competitive Integrated Employment (CIE)	People who want a job, have a job, and employment services help people get and keep jobs that maximize their skills and interests.
Equity and Cultural Competency	Linguistic Diversity	Regional Center staff communicate with individuals they support in the individual's preferred spoken language.
	Language Access	Regional Center staff communicate with individuals they support in the individual's preferred spoken language.
	Service Coordinator Competency in Cultural and Ethnic Diversity	All individuals and families supported by Regional Centers experience service coordination that respects their culture.
Individual & Family Experience and Satisfaction	Consumer/Family Satisfaction with Regional Center Services	Individuals served by Regional Centers, including families, are listened to by the RC and are satisfied with services delivered by RC staff.
Person-Centered Services Planning	Service Plans Demonstrate Person-Centered Criteria	People served by Regional Centers have person-centered service plans.
	Service Coordinator Facilitation Skills	Regional Center Service Coordinators demonstrate person-centered planning skills.
Service Coordination and Regional Center Operations	Choice of Services within Regional Center	People served by the Regional Center have choice of service vendors to meet their needs and preferences.
	Timely Service Authorizations	Individuals and families served by Regional Centers receive service authorization in a timely manner.
	Service Coordinator Competency	Service Coordinators demonstrate the knowledge and skills necessary to successfully meet the needs of individuals and families served by RC.
	Intake Process	Individuals and families who apply to the Regional Center for services are treated with respect and Regional Center Intake procedures are equitable.

REGIONAL CENTER PERFORMANCE MEASURES (Continued)

Dr. Michi Gates, KRC Executive Director

These measures are to be implemented in four phases that are detailed along with measure descriptions, data sources, target population, incentive types, and performance target and incentive methodologies, on the DDS PowerPoint attached to these minutes.

PUBLIC INPUT

No public input at this meeting from members of the public attending.

Vice President Mensch announced that she had given an Emergency Preparedness presentation at the Bakersfield City Council meeting today, representing persons with disabilities. She encouraged the public to be aware of the needs of persons with disabilities during an emergency and to take steps to be prepared.

BOARD PRESIDENT'S REPORT

Kevin Gosselin, President

1. President Gosselin thanked everyone who participated in the Vendor Fair at KRC on May 19. It was great!
2. Our Board of Directors Education is scheduled for June 27 at 6:00 p.m. This will be a dinner session and the location, along with all the details, will be announced soon. He is really looking forward to the board members all getting together in person for this event.
3. We are still looking for new board members. A potential board member was interviewed by him and Vice President Mensch this week and he anticipates moving forward with this nominee soon. He asked if board members would be willing to call a special public meeting in June to meet the candidate and hold a vote. He will follow up with board members to see if this is possible.

EXECUTIVE DIRECTOR REPORT

Dr. Michi Gates, Executive Director

Dr. Gates expressed her thanks to Tamerla Prince for the outstanding job she did in the coordination of the Vendor Fair at KRC. Service Coordinators really appreciated it and look forward to the next one.

Dr. Gates also expressed her thanks to Vice President Mensch for her advocacy efforts on behalf of KRC with our legislators. She and Tracey recently visited the office of Senator Shannon Grove and spoke with her about KRC and the clients we serve.

We will be having our Self Determination Program (SDP) local advisory group meeting, in hybrid format, here in the KRC Malibu Room on Monday, June 5, 5:00 – 7:00 p.m. Spanish interpretation will be provided. Dr. Gates encouraged everyone to spread the word to the public. DDS will be presenting at this meeting and will be available for public questions and comments.

As happens each year, Dr. Gates is collaborating with her peers to address the May Revise. The May Revise is the resubmitted budget proposal after taxes were received in April. Regional Centers are having to regroup due to the State of California having a large deficit of funds. The May Revise brings major impacts to our system such as:

1. Provisional eligibility (a lower bar to allow eligibility for ages 3-4). DDS was instructed to seek Federal Funds for this, which they did, however CMS will only fund if ages 0-3 are also included in provisional eligibility. It is pretty certain that this will go through as it is imperative to receive federal funding, but, in

turn, presents concerns on how this is going to affect the regional centers Early Start program. The concern is that our Early Start service coordinators (who can currently focus on Early Start regulations and how to best serve the age 0-3 population) will then be required to also understand the Lanterman regulations under provisional eligibility. KRC will be strategically planning how to best deal with these requirements to avoid unintended reduction of the quality of services and supports in the case coordination that we provide to 0–3-year-old individuals.

2. Core Staffing Model – a lot of effort has gone into getting the Core Staffing Model updated so that regional centers receive allocations from DDS that match what we pay our service coordinators. Unfortunately, this will probably have to be reduced because the State of California is looking at a projected \$32 billion deficit. Although disappointing, any progress made is positive.
3. Generic Resources - DDS has proposed statute or trailer bill language that would require regional centers to fund medical and dental services if, after 60 days, generic resources have not met that need or are not providing that service. This will, of course, have workload implications and may present a challenge for regional centers to be able to find personnel to provide services to our individuals at the rates that we are allowed to pay.

Additional funding to correct DDS’s error last year of not giving regional center enough funds to reduce ages 0-5 caseloads to a ratio of 1:40 will be corrected. We should be granted the additional funding on July 1 and KRC is planning to hire the additional staff needed to make this happen. Kern is positioning itself to have an Early Childhood Department, moving Intake to a standalone department instead of being combined with Early Start. This will restructure Early Start and ages 3-5 years to fall under the Early Childhood Department.

Assembly Bill 1147 is continuing to move forward. It is currently being supported in the Assembly and will next go to the Senate. AB1147 has some features that would impact regional center boards, i.e., a reduction in the amount of years allowed to serve from seven to six; after completing a 6-year term, it would require a 5 year absence before a member can return to serve on the board.

Dr. Gates has been working with ARCA to collaborate more with our advocacy groups. It is of utmost importance to get feedback from them on regional center performance. In June she will be meeting with ARCA, the leaders of Disability Voices United, the Integrated Community Collaborative and a small group of directors. The goal of this meeting is to get their input on major changes that are coming to our system and the regional center performance measures. We hope to make these meetings regular and consistent. Dr. Gates is also working on a DDS Complex Needs Work Group. Individuals with complex needs are those individuals who are served by our RCs and have the most challenging needs. Their needs are not always being met, or able to be met, through our system.

FINANCIAL REPORT

Tom Wolfgram, CFO

Purchase of Services Report as of March 31, 2023

Total spent for month ending March 31, 2023: \$18,681,571

YTD: \$171,099,557

There was \$22,650,000 more spent for services this year than at this time last year. This spending comes from an increase of overall services to clients and hiring new service coordinators. Vice-President Mensch asked if there was a report that showed which areas of service have the increased spending. Mr. Wolfgram will bring this report to the next meeting in August.

Operations Report as of March 31, 2023

Total expenses for month ending March 31, 2023: \$2,991,430

YTD: \$20,293,247

Mr. Wolfgram estimates that we will have approximately \$800,000 left over from salary and wages due to positions that we have not been able to fill. We have overspent approximately \$66,000 in the equipment category due to recent hiring and staff working at home--estimated expenses will be adjusted to allow for this. Considering all expenses, he expects approximately \$900,000 left over at the end of the fiscal year.

The Purchase of Services Report and the Operations Report ending February 28, 2023, are filed with these minutes.

VENDOR ADVISORY COMMITTEE REPORT

Tamerla Prince, VAC Representative

Vendor Advisory Committee meeting took place today and the following topics were discussed:

1. Vendor Fair – a lot of positive feedback! Ms. Prince received many e-mails thanking her and expressing how good it was to meet new people and see familiar faces again.
2. HCBS Update – The project was discussed and as well as some challenges, lack of participation being a central focus. The goal of the HCBS project is to increase voices to be heard from all involved. Challenges are being addressed, but overall, there is improvement. Monthly meetings, community of practice, and community education will continue. Training opportunities are coming up. Community of Quality and Leadership which would educate 50 providers in the first and another 50 in the second year. Starting July 31 – August 3 Dr. Tom Pomeranz, an amazing motivational speaker in the field of services for people with disabilities, will be doing small workshops for the HCBS project.
3. Law Enforcement Committee – Ms. Prince and Mr. Noriega attended a stakeholders meeting downtown held on May 10. The topic was Crisis Intervention Services and how law enforcement is working to improve processes. Break out groups were conducted, one being for disabled and special needs individuals. They provided good training and there was good interaction with the network of law enforcement and community members.
4. Ms. Prince is excited that, after a long pandemic, plans are underway to hold a Vendor Advisory Committee luncheon in November. More to come!

ADJOURNMENT

With nothing further to discuss, President Gosselin adjourned the meeting at 7:20 p.m.

Board Member Education Retreat will take place on June 27. Venue to be announced.

No public board meeting in June. The Board will be on recess in July.

The next public meeting will take place on Tuesday, August 22, 2023, at 6:00 p.m.

Respectfully Submitted,



Darlene Pankey
Executive Assistant

Attachment 1

**Kern Regional Center
Board of Directors Meeting
April 25, 2023, 6:00 – 7:30 p.m.**

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

MINUTES

KRC BOARD MEMBERS PRESENT:

Oscar Axume, Treasurer
Kevin Gosselin, President
Carlos Isidoro, Board Member
Ryan Jones, Board Member
Tracey Mensch, Vice President/ARCA Delegate
Tamerla Prince, VAC Representative
Martin Vasquez, Secretary
Simon Verdugo, Board Member

KRC STAFF PRESENT:

Michi Gates, PhD, Executive Director
Celia Pinal, Director of Client Services
Enrique Roman, Director of Community Services
Tom Wolfram, Chief Financial Officer

KRC BOARD MEMBERS ABSENT:

Donald Tobias
Mark Tolentino
Ruth Watterson

GUESTS:

Ana Alonso (Machuca)
Jill Green
Briseida Moreno
Edwin Pineda, DDS
Samantha Pinto
Scott Rice
Norma Tuiasosopo

INTERPRETERS:

Kimberly Cantwell, ASL
Alexandra Leyva, ASL
Nidya Madrigal-Navia, Spanish

CALL TO ORDER

President Kevin Gosselin called the meeting of the KRC Board of Directors to order at 6:05 p.m. Introductions of board members and KRC staff were made.

APPROVAL OF AGENDA

The Board of Directors had previously received tonight's agenda for review and they were available in the meeting packet distributed at this meeting.

President Gosselin asked for a motion to approve the agenda of April 25, 2023.

M/S/C: (Mensch, Jones)

Ayes: 9

Motion Carried

REVIEW OF MINUTES

The Board of Directors had previously received the minutes of the Board Meeting held on March 28, 2023, for review and they were available in the meeting packet distributed at this meeting.

No additions or edits were requested. President Gosselin asked for a motion to approve the minutes of March 28, 2023.

M/S/C: (Prince, Mensch)

Ayes: 9

Motion Carried

SUPPORTS FOR DEAF AND HARD OF HEARING INDIVIDUALS AND OUTCOMES

Enrique Roman, KRC Director of Community Services and Celia Pinal, KRC Director of Client Services

Mr. Roman and Ms. Pinal gave a presentation to the Board of Directors covering Kern Regional Center's efforts to provide quality services to the Deaf Plus individuals served. Ashley Fontes, the Deaf and Hard of Hearing Coordinator for Kern Regional Center, was unable to be at the meeting due to illness, but she is a central part of the work done on behalf of these clients. KRC is addressing these details in relation to Deaf Plus individuals served:

1. Cultural Sensitivity Training – previously presented and will soon be repeated.
2. Legal requirements.
3. Accompanying service coordinators to client appointments and working with IPPs.
4. Consulting with vendors.
5. Coordinating ASL classes for families that includes vendoring with BGLAD; funding through Grants; establishing connections, and advocacy.

Ms. Pinal reported that 762 individuals have been identified as mild-to-moderately hearing impaired and approximately 200 individuals have been identified with profound hearing loss. There are 564 of these that are English speaking; 179 that are Spanish speaking; and 15 who can communicate with ASL. KRC will begin by focusing on the individuals with profound hearing loss. We have one hearing impaired service coordinator who understands and communicates with ASL and one service coordinator who has personal experience working with a family member who is deaf and hard-of-hearing. Ms. Pinal looks forward to more training for client services staff through cultural sensitivity training and eventual assessment for ASL fluency.

PUBLIC INPUT

President Gosselin and Tracey Mensch announced a public event for GET Bus's 50th Anniversary celebration that is open to the public. Ms. Mensch will send information to Dr. Gates so that it can be distributed to board members.

Ms. Ana Alonso came forward to speak to the Board of Directors about her participation with the Padres Unidos group that meets at KRC monthly. She expressed her appreciation for the improvements that she feels are being made in this group and thanked Mr. Roman and Ms. Pinal for all their work on behalf of Padres Unidos.

BOARD PRESIDENT'S REPORT

Kevin Gosselin, President

1. President Gosselin thanked everyone who participated in the successful Autism Awareness Day in Arvin on April 15.
2. Our Board of Directors Education is scheduled for June 27 and, in addition to board education, he would like to make this an enjoyable retreat time, with dinner, to show appreciation to all board members who volunteer their time to help make a difference to the individuals KRC serves. President Gosselin would appreciate feedback and suggestions on location and type of food. Please send all suggestions as soon as possible to President Gosselin, Dr. Gates, or Darlene Pankey. Also, please let us know if June 27 is a good date for everyone.
3. President Gosselin spoke about the need to recruit board members. Two board members will be ending their terms with the Board of Directors at the end of this year, so we need new members now more than

ever. The Board is especially in need of someone with a financial background and, to better serve our catchment area, members who are of Hispanic origin and bilingual in English/Spanish.

EXECUTIVE DIRECTOR REPORT

Dr. Michi Gates, Executive Director

Dr. Gates shared that she had participated in the Little Hoover Commission interviews and that the Commission had presented a negative picture of our regional centers. One related item is Assembly Bill 1147, sponsored by Senator Dawn Addis, which contains changes directed to regional centers. Dr. Gates emphasized that although a negative picture was painted, it is important to remember all the good work regional centers do to improve the lives of our individuals. We are seeing dynamic changes happening and regional centers have a positive future. Subcommittee 1 will hold a follow-up hearing tomorrow. If interested, please see the California State Assembly website.

To increase our communications with the community, KRC is adding a Website Coordinator and Social Media Specialist.

The Autism Awareness Day in Arvin was successful. Dr. Gates would like to have these types of events expanded to other cities within Kern, Inyo, and Mono Counties and KRC will be looking into opportunities to do that.

The DDS Bi-Annual Audit began yesterday, April 24, 2023, and will continue through this week and next week. The audit covers Fiscal Year 2021-22. Mr. Wolfgram reports that all is going well.

FINANCIAL REPORT

Tom Wolfgram, CFO

Purchase of Services Report as of February 28, 2023

Total spent for month ending February 28, 2023: \$17,011,390

YTD: \$146,876,294

\$16 Million more were spent for services this year than at this time last year. Mr. Wolfgram estimates there are \$1.7 Million in unbilled services, which will bring us up to \$18 Million more spent to provide services this year.

Operations Report as of February 28, 2023

Total expenses for month ending February 28, 2023: \$2,280,489

YTD: \$17,301,817

This spending is comparable to what we spent last year at this time. Mr. Wolfgram estimates there will be \$1.8 Million left over at the end of the year.

The Purchase of Services Report and the Operations Report ending February 28, 2023, are filed with these minutes.

VENDOR ADVISORY COMMITTEE REPORT

Tamerla Prince, VAC Representative

The Autism Event in Arvin was wonderful. She suggests that next year we focus more on children's services and activities as there seems to be a need in the area.

Two more events are coming up: Transition Fair on April 29 and the Vendor Fair on May 19, 10:00 a.m. – 2:00 p.m. Registration will be going out and vendors have been made aware to save the dates of the events.

From Vendor Advisory Committee:

Ms. Prince spoke about items from the last VAC Committee, specifically pertaining to law enforcement:

1. California Bills - AB751 (Elder Abuse), AB449 (Hate Crimes), and AB1064 have unanimously passed in the Assembly of Public Safety committee and are headed to the legislature. All the bills provide protection for our community from violence and hate crimes.
2. New Transportation Insurance changes – now requiring 7-year’s driving experience requirement, which would create a minimum age of 23 for a driver. This change will have a huge impact on staffing. Ms. Prince just received the information, and she will keep the Board posted on any changes and developments on this new policy.

ADJOURNMENT

With nothing further to discuss, President Gosselin adjourned the meeting at 7:33 p.m.

The next public meeting will take place on Tuesday, May 23, 2023, at 6:00 p.m.

Respectfully Submitted,

*Darlene Pankey
Executive Assistant*

Attachment 2

Proposed Regional Center (RC) Performance Measures

December 13, 2022



**Focus Area: Early Start
Measure: Child Find and Identification**

Desired Outcome: Children who are eligible for Early Start are identified* and enrolled in a timely manner.

	Phase 1	Phase 2	Phase 3	Phase 4
Measure Description	<p>1) RC submits a Child Find Plan and will work with DDS to establish a reporting structure that will be used by all RCs to report on measures and the types of outreach/child find activities supported by RC staff or funding</p> <p>2) Number of children identified* in proportion to the total number of 0-2 year-old children in the county, or zip code, reported by language, race and ethnicity.</p>	<p>1) Number of outreach/child find activities supported by RC staff or funding, reported by type of activity.</p> <p>2) Number of children identified* in proportion to the total number of 0-2 year-old children in the county or zip code, reported by language, race and ethnicity</p> <p>Note: RC will update their plan annually</p>		Number of children identified* in proportion to the total number of 0-2 year-old children in the county or zip code, reported by language, race and ethnicity.
Data Source	RC-reported data			
Target Population	All child consumers (ages 0-2) who are identified for Early Start assessment			
Incentive Type	Recognition			
Performance Target and Incentive Methodology	Recognition given to RC that meets criteria in measure description above	Recognition given to RC that meets criteria in measure description above	Recognition given to RC that meets criteria in measure description above	Recognition given to RC for rate of increase in children identified relative to prior reporting period

*Definitions of specific data elements will be established during implementation process (i.e., specific definition of 45-day time period for IFSP development in Early Intervention in compliance with OSEP).

Note: Additional measure specifications (e.g., operational definitions, calculation methodologies, reporting periods) will be defined in a detailed implementation plan document.

**Focus Area: Early Start
Measure: Timely Access to Early Start Services**

Desired Outcome: Children and families have timely access to Early Start services to minimize the impact of developmental delays.

	Phase 1	Phase 2	Phase 3	Phase 4
Measure Description	Rate of Individual Family Service Plan (IFSPs) completed within the federally required 45-day timeframe from receipt of referral.	Rate of IFSP completion within the federally required 45-day timeframe from receipt of referral, stratified by language, race and ethnicity and reported as an average and a range.		1) TBD based on effectiveness and results of prior phase incentives. 2) Percentage of families who report satisfaction with the length of time to completion of the intake process, stratified by language, race and ethnicity.
Data Source	RC-reported data			1) TBD 2) Individual Satisfaction Survey
Target Population	All child consumers (ages 0-2)	determined eligible for Early Start services		
Incentive Type	Baseline	Pay-For-Performance	TBD	
Performance Target and Incentive Methodology	No incentive; data collection	Flat rate tiered payment for the percentage of IFSPs completed within 31-35 days and 36-40 days* *eligibility for payment determinant on compliance with the federal 45-day standard		TBD based on effectiveness and results of prior phase incentives.

Note: Additional measure specifications (e.g., operational definitions, calculation methodologies, reporting periods) will be defined in a detailed implementation plan document.

Focus Area: Employment Measure: Participation in Competitive Integrated Employment (CIE)

Desired Outcome: People who want a job have a job, and employment services help people get and keep jobs that maximize their skills and interests.

	Phase 1	Phase 2	Phase 3	Phase 4
Measure Description	<p>Number of consumers who participate in competitive integrated employment (CIE) for at least 30 days during the reporting period</p> <ul style="list-style-type: none"> Students enrolled in or attending secondary education Adults who are no longer enrolled in or attending secondary education 			
Data Source	RC-reported data, NCI data			
Target Population	All consumers determined eligible for RC services under the Lanterman Act who are eligible for CIE			
Incentive Type	Pay-For-Performance			
Performance Target and Incentive Methodology	<p>Incentive payment given to RC for meeting or exceeding a performance target* for the percentage of students and adults who want to work and who participate in CIE and who have been participating in CIE for 30 days or more during the reporting period.</p> <p>*TBD percentage increase over FY 2021-22</p>			
		<p>Measure updates for Phase 2 and beyond will be based on effectiveness and results of Phase 1 incentives. For example, performance targets for the percentage of consumers who want to work and who participate in CIE may be raised over time or reframed based on improvement relative to the prior performance year.</p> <p>Additional future measures for consideration may include:</p> <ul style="list-style-type: none"> Consumer satisfaction with the support they receive to get and keep their job Length of time that a consumer remains employed Training and accreditation attainment for day services and employment providers (e.g., ACRE accreditation) 		

Note: Additional measure specifications (e.g., operational definitions, calculation methodologies, reporting periods) will be defined in a detailed implementation plan document.

Focus Area: Employment
Measure: Data Points and Reporting for Competitive Integrated Employment (CIE)

Desired Outcome: People who want a job have a job, and employment services help people get and keep jobs that maximize their skills and interests.

	Phase 1	Phase 2	Phase 3	Phase 4
Measure Description	RCs will work with DDS to establish data points and reporting in SANDIS regarding interest in or actively participating in CIE	Percentage of RC reporting data points in SANDIS regarding interest in or actively participating in CIE		Increased percentage of consumers showing interest in or actively participating in CIE as reported in SANDIS
Data Source	None RC-reported data			
Target Population	All consumers determined eligible for RC services under the Lanterman Act who are eligible for CIE			
Incentive Type	Baseline Pay-for-Performance			
Performance Target and Incentive Methodology	N/A		Incentive payment based on number of people actively participating in CIE	

Note: Additional measure specifications (e.g., operational definitions, calculation methodologies, reporting periods) will be defined in a detailed implementation plan document.

Focus Area: Equity and Cultural Competency Measure: Linguistic Diversity

Desired Outcome: Regional Center staff communicate with individuals they support in the individual's preferred spoken language*.

	Phase 1	Phase 2	Phase 3	Phase 4
Measure Description	<ol style="list-style-type: none"> Number of bilingual Service Coordinators (SCs) including intake staff and first line supervisors for each language Language distribution across people receiving RC services 	<ol style="list-style-type: none"> Ratio of SCs including intake staff and first line supervisors who are bilingual compared to the preferred spoken language needs of people served by the RC 	<ol style="list-style-type: none"> Ratio of SCs including intake staff and first line supervisors who are bilingual compared to the preferred language needs of people served by the RC Number of individuals supported by the RC and families who report their preferred spoken language 	<p>Number of individuals supported by the RC and families who report the RC staff communicates with them in their preferred spoken language</p>
Data Source	RC-reported data		<ol style="list-style-type: none"> RC-reported data Individual Satisfaction Survey 	Individual Satisfaction Survey
Target Population	All consumers determined eligible for RC services under the Lanterman Act			
Incentive Type	<ol style="list-style-type: none"> Pay-for-Reporting Pay-for-Performance 	Recognition		
Performance Target and Incentive Methodology	<ol style="list-style-type: none"> Report on the bilingual status of staff Incentive for verifying and updating language in the CDER and ESR for 100% of consumers 	Recognition given to RC that meets or exceeds threshold ratio target (TRD) of SCs and staff who are bilingual, compared to the preferred spoken language of people served by the RC	Recognition given to RC that meets or exceeds threshold ratio target (TRD) of bilingual SCs and staff aligned with spoken language of people supported	

*This refers to the individual's preferred conversational language, including augmented communication or adaptive speech and Sign Languages; it does not preclude the legal requirement for written documents to be in the primary language.

Note: Additional measure specifications (e.g., operational definitions, calculation methodologies, reporting periods) will be defined in a detailed implementation plan document.

Focus Area: Equity and Cultural Competency
Measure: Language Access

Desired Outcome: Regional Center staff communicate with individuals they support in the individual's preferred spoken language*.

	Phase 1	Phase 2	Phase 3	Phase 4
Measure Description	Number of requests for translated IPP documents and length of time to complete request			Rate of translated IPP document requests that are completed under the legal standard of 45 days
Data Source	RC-reported data			
Target Population	All consumers determined eligible for RC services under the Lanterman Act			
Incentive Type	Baseline			Pay-for-performance
Performance Target and Incentive Methodology	No incentive; data collection			Incentive given to RC for the percentage of translated IPP documents completed within 31-35 days and 36-40 days

*This refers to the individual's preferred conversational language, including augmented communication or adaptive speech and Sign Languages; it does not preclude the legal requirement for written documents to be in the primary language.

Note: Additional measure specifications (e.g., operational definitions, calculation methodologies, reporting periods) will be defined in a detailed implementation plan document.

Focus Area: Equity and Cultural Competency
Measure: Service Coordinator Competency in Cultural & Ethnic Diversity

Desired Outcome: All individuals and families supported by Regional Centers experience service coordination that respects their culture.

	Phase 1	Phase 2	Phase 3	Phase 4
Measure Description	Percentage of Service Coordinators (SCs) including intake staff and first line supervisors participating in training related to cultural and linguistic competency.	Percentage of SCs including intake staff and first line supervisors demonstrating competency in cultural and linguistic diversity, through participation in and completion of 8 or more training hours in DDS-approved training related to cultural and linguistic competency.	Percentage of SCs including intake staff and first line supervisors demonstrating competency in cultural and linguistic diversity, through participation in and completion of 8 or more training hours in DDS-approved training related to cultural and linguistic competency.	Percentage of families supported by the RC (includes no POS) who agree or strongly agree that their SC including intake staff and first line supervisors respects their family's culture.
Data Source	RC-reported data			
Target Population	All consumers determined eligible for RC services under the Lanterman Act			
Incentive Type	Baseline			
Performance Target and Incentive Methodology	No incentive; data collection	Recognition for increased percentage of staff in each tier category (meets standards, exceeds standards, exceeds by 50% or more, top tier) for demonstrated competency in cultural and ethnic diversity		Individual Satisfaction Survey
				TBD
				TBD

Note: Additional measure specifications (e.g., operational definitions, calculation methodologies, reporting periods) will be defined in a detailed implementation plan document.

Focus Area: Individual & Family Experience and Satisfaction
Measure: Consumer/Family Satisfaction with Regional Center Services

Desired Outcome: Individuals served by Regional Centers, including families, are listened to by the RC and are satisfied with services delivered by RC staff.

	Phase 1	Phase 2	Phase 3	Phase 4	Beyond Phase 4
Measure Description	RCs will work with DDS to establish annual feedback from individuals receiving RC services and family members, with eight or more common components agreed upon across all 21 RCs (see next slide)	Number of individuals and families who indicate that they are satisfied with RC services across the eight or more common components defined in Phase 1			
Data Source	None	Individual Satisfaction Survey			
Target Population	All consumers determined eligible for RC services under the Lanterman Act				
Incentive Type	Baseline	Pay-for-Reporting	Pay-For-Performance		
Performance Target and Incentive Methodology	N/A	Incentive payment for public reporting of feedback from individuals and families on RC service satisfaction	Incentive payment for public data reporting of improvement* in at least one area addressed in the common components identified in Phase 1 and identified as priorities by the community		Incentive payment for public data reporting of improvement* in more than one area addressed in the common components identified in Phase 1 and identified as priorities by the community

*RCs performing at levels higher than all others in all eight areas would be eligible for incentive payment based on high performance. DDS and Regional Centers will work with stakeholders to prioritize the common components used by all RC's in their feedback instrument. **Page 9**

Note: Additional measure specifications (e.g., operational definitions, calculation methodologies, reporting periods) will be defined in a detailed implementation plan document.

Summary of Identified Outcomes of Phases 3 and 4

(may be reported through the Consumer/Family Satisfaction with Regional Center Services measure)

Early Start

- 1) Percentage of families who report satisfaction with the length of time to complete the intake process stratified by language, race and ethnicity

Employment

- 2) Percentage of people who have a job who would like to keep their job.

Equity and Cultural Competency

- 3) Number of individuals supported by the RC and families who report their SC communicates with them in their preferred spoken language
- 4) Percentage of families supported by the RC (includes no POS) who agree or strongly agree their service coordinator respects their family's culture

Person-Centered Services Planning

- 5) Percentage of people who agree their SC was skilled in developing the person-centered service plan
- 6) Percentage of people who agree their service plan is person-centered and meets their needs**
- 7) Percentage of people who are satisfied with the quality of their IPP**

Service Coordination and Regional Center Operations

- 8) Percentage of families who report they had two or more vendors to choose from
- 9) Percentage of families and individuals agree their SC had the knowledge needed to meet their needs
- 10) Percentage of families who report they were treated with respect during the intake process

**DDS will establish methods for assuring families and self-advocates receive support for understanding and identifying effective person-centered planning. DDS will work closely with regional centers in establishing components of person-centered service plan documents and process consistent with federal Home and Community-Based Services (HCBS)

Note: Additional measure specifications (e.g., operational definitions, calculation methodologies, reporting periods) will be defined in a detailed implementation plan document.

Focus Area: Person-Centered Services Planning
Measure: Service Plans Demonstrate Person-Centered Criteria

Desired Outcome: People served by Regional Centers have person-centered service plans.

	Phase 1	Phase 2	Phase 3	Phase 4
Measure Description	RCs commit to the development and use of a consistent person-centered service plan document.	Develop components of a person-centered service plan document and a person-centered planning process that meets federal person-centered service plan standards.	1) Percentage of consumers who agree their service plan is person-centered and meets their needs. 2) Percentage of consumers who are satisfied with the quality of their Individual Program Plan (IPP).	
Data Source	None		Individual Satisfaction Survey	
Target Population	All consumers determined eligible for RC services under the Lanterman Act			
Incentive Type	Baseline			Pay-For-Performance
Performance Target and Incentive Methodology	N/A			Incentive payment for the percentage of consumers who agree their service plan is person-centered and meets their needs and are satisfied with the quality of their IPP, with increasing incentive based on: 50% or higher agree; 75% or higher agree; 90% or higher agree

DDS will establish methods for assuring families and self-advocates receive support for understanding and identifying effective person-centered planning. **Page 11
 Note: Additional measure specifications (e.g., operational definitions, calculation methodologies, reporting periods) will be defined in a detailed implementation plan document.

Focus Area: Person-Centered Services Planning
Measure: Service Coordinator Facilitation Skills

Desired Outcome: Regional Center Service Coordinators demonstrate person centered planning skills.

	Phase 1	Phase 2	Phase 3	Phase 4
Measure Description	Number of certified Person-Centered Plan Facilitation Trainers employed by the RC and qualified to deliver plan facilitation training	<ol style="list-style-type: none"> Number of certified Person-Centered Plan Facilitation Trainers employed by the RC and who are qualified to deliver plan facilitation training (Note: RCs must have a minimum of one certified trainer per 10,000 consumers served in the RC service area) Number of existing and new SCs including intake staff and first line supervisors who have completed training in Person-Centered Plan Facilitation (Note: In Phases 1-2, DDS will develop operational definitions and standards for person-centered plans.) 	<ol style="list-style-type: none"> Percentage of new SCs who complete training in Person-Centered Plan Facilitation Percentage of consumers and families who agree their SC was skilled in developing their person-centered service plan 	<p>Percentage of consumers and families whose feedback indicates their SC was skilled in developing their person-centered service plan. For example:</p> <ul style="list-style-type: none"> The percentage of people reporting their SC asks what the individual wants in the service plan The SC included in the service plan things that are important to the individual The SC assisted the consumer to chose and invite people to their last service planning meeting Their SC told them how to ask for changes when they want their service plan to be different
Data Source	RC-reported data		RC-reported data Individual Satisfaction Survey	Individual Satisfaction Survey
Target Population	All consumers determined eligible for RC services under the Lanterman Act			
Incentive Type	Pay-for-Performance	<ol style="list-style-type: none"> Pay-for-Reporting Pay-for-Performance 		Pay-For-Performance
Performance Target and Incentive Methodology	Incentive payment for the number of certified Person-Centered Plan Facilitation Trainers employed by the RC and qualified to deliver plan facilitation training	<ol style="list-style-type: none"> Incentive payment based on the number of certified Person-Centered Plan Facilitation trainers meeting or exceeding one per 10,000 consumers Incentive payment for the reported number of staff who have completed training in Person-Centered Plan Facilitation 		Incentive payment based on the percentage of consumers who agree their SC was skilled in developing the person-centered plan (50% or higher agree; 75% or higher agree; 90% or higher agree) Page 12

Note: Additional measure specifications (e.g., operational definitions, calculation methodologies, reporting periods) will be defined in a detailed implementation plan document.

Focus Area: Service Coordination and Regional Center Operations
Measure: Choice of Services within Regional Centers

Desired Outcome: People served by the Regional Center have choice of service vendors to meet their needs and preferences.

	Phase 1	Phase 2	Phase 3	Phase 4
Measure Description				<ol style="list-style-type: none"> 1) Number of vendors and vendor capacity for core services within the RC catchment area, reported by zip code 2) Percentage of families who are served by the RC and report that they are satisfied with the cultural diversity of vendors
Data Source				<ol style="list-style-type: none"> 1) RC-reported data 2) Individual Satisfaction Survey
Target Population				
Incentive Type	Baseline	Pay-for-Reporting		Pay-For-Performance
Performance Target and Incentive Methodology	No incentive; data collection	Incentive payment for public reporting on the highest utilized services available by vendor	Incentive payment for public reporting on all services available by vendor	<ol style="list-style-type: none"> 1) Incentive payment for RC with two or more vendors for every core service in the catchment area 2) Incentive payment for meeting a performance target (TBD) for the percentage of families who report satisfaction with the cultural diversity of available vendors

Focus Area: Service Coordination and Regional Center Operations
Measure: Timely Service Authorizations

Desired Outcome: Individuals and families served by Regional Centers receive service authorization in a timely manner.

	Phase 1	Phase 2	Phase 3	Phase 4
Measure Description	Number of days between annual individual program plan (IPP) review and service authorization, reported as an average and range.			
Data Source	RC-reported data			
Target Population	All consumers determined eligible for RC services under the Lanterman Act and have received at least one service during the reporting period			
Incentive Type	Baseline Pay-For-Performance			
Performance Target and Incentive Methodology	No incentive; data collected in Phases 1, 2, and 3 will be used to establish baseline for incentive in Phase 4 and beyond		Incentive payment for meaningful improvement (benchmark threshold TBD) in number of days between service plan meeting and service authorization, reported as an average and range	

Note: Additional measure specifications (e.g., operational definitions, calculation methodologies, reporting periods) will be defined in a detailed implementation plan document.

Focus Area: Service Coordination and Regional Center Operations
Measure: Service Coordinator Competency

Desired Outcome: Service Coordinators demonstrate the knowledge and skills necessary to successfully meet the needs of individuals and families served by Regional Center.

	Phase 1	Phase 2	Phase 3	Phase 4
Measure Description	<p>1) Develop a set of Service Coordinator (SC) training standards and competencies approved by DDS for use statewide</p> <p>2) Establish data elements for reporting on number of SCs who completed all requirements within the standards</p>	<p>1) Adoption of the set of SC training standards and competencies approved by DDS for use statewide</p> <p>2) Number of SCs who completed all requirements within the standards</p> <p>Note: In Phases 2-3, statewide benchmarks will be established for measure description using two years of data.</p>	<p>Percentage of SCs who completed all requirements within the standards</p>	<p>Percentage of families and individuals responding to the individual satisfaction survey who agree their SC had the knowledge needed to meet their needs</p>
Data Source	None	RC-reported data		Individual Satisfaction Survey
Target Population	All consumers determined eligible for RC services under the Lanterman Act			
Incentive Type	Baseline	Recognition	Pay-for-Performance	
Performance Target and Incentive Methodology	N/A	Recognition given to RC that meets criteria in measure description above	Incentive given to RC exceeding the State's benchmark for the percentage of SCs who completed all requirements within the standards	Incentive given to RC exceeding the State's benchmark for the percentage of families and individuals who are satisfied with their SC's knowledge

Note: Additional measure specifications (e.g., operational definitions, calculation methodologies, reporting periods) will be defined in a detailed implementation plan document.

Focus Area: Service Coordination and Regional Center Operations Measure: Intake Process

Desired Outcome: Individuals and families who apply to the Regional Center for services are treated with respect and Regional Center Intake procedures are equitable.

	Phase 1	Phase 2	Phase 3	Phase 4
Measure Description	<p>RCs agree to develop and utilize a standard intake process that includes core elements articulated by DDS, focused on customer service.</p> <p>Note: DDS will collaborate with RCs to develop core elements based on existing RC best practices (e.g., a standardized intake form). RCs are asked to agree to core elements.</p>	<p>1) Percentage of families and individuals who report being treated with respect during intake, sorted by those who are and are not eligible through the Lanterman Act.</p> <p>2) Ratio of individuals determined eligible for services through the Lanterman Act compared to the number who apply for RC services, sorted by age category.</p>	<p>1) Percentage of families and individuals who report being treated with respect during intake, sorted by those who are and are not eligible through the Lanterman Act.</p> <p>2) Percentage of individuals who apply for services who are determined eligible through the Lanterman Act, sorted by age category, language, race and ethnicity.</p>	
Data Source	None	<p>1) Individual Satisfaction Survey</p> <p>2) RC-reported data</p>		
Target Population	All consumers who request intake from a Regional Center			
Incentive Type	Recognition			
Performance Target and Incentive Methodology	N/A	Recognition of public reporting of intake feedback, sorted by eligibility determination.	Recognition of public reporting of intake feedback, sorted by eligibility determination, age category, language, race and ethnicity.	Recognition for meeting a performance target (TBD) for intake feedback, sorted by eligibility determination, age category, language, race and ethnicity.

Note: Additional measure specifications (e.g., operational definitions, calculation methodologies, reporting periods) will be defined in a detailed implementation plan document. **Page 16**

Attachment 3

KERN REGIONAL CENTER
PURCHASE OF SERVICE
FY 2022-2023
AS OF MARCH 31, 2023

PURCHASE OF SERVICES	July 2022	August 2022	September 2022	October 2022	November 2022	December 2022	January 2023	February 2023	March 2023	April 2023	May 2023	June 2023	2022-2023 Total
OUT-OF-HOME													
Community Care Facility	5,373,080	5,447,968	5,416,610	5,447,994	5,485,711	5,470,750	5,635,768	5,371,078	5,594,039				49,242,998
ICF/SNF Facility	158,123	200,550	239,986	235,778	227,988	226,900	249,954	260,561	320,353				2,120,193
TOTAL OUT OF HOME	5,531,203	5,648,518	5,656,596	5,683,772	5,713,699	5,697,650	5,885,722	5,631,639	5,914,392				51,363,191
DAY PROGRAMS													
Day Care	51,627	53,088	49,271	48,862	48,627	49,070	47,803	46,348	33,920				428,616
Day Training	2,787,365	3,244,900	3,096,513	3,068,916	3,058,605	2,880,927	3,053,807	2,997,790	3,422,944				27,611,767
Supported Employment	419,447	476,591	458,631	426,474	425,068	365,980	452,291	422,148	422,673				3,669,303
Work Activity Program	8,562	9,740	10,097	8,755	7,685	7,655	7,740	8,412	-				68,646
SUBTOTAL DAY PROGRAMS	3,267,001	3,784,319	3,614,512	3,553,007	3,539,985	3,303,632	3,561,641	3,474,698	3,879,537				31,978,332
OTHER SERVICES													
Non Medical Services Prof	384,327	418,830	408,761	420,101	403,736	370,428	398,138	422,186	398,518				3,625,025
Non Medical Services Prog	1,301,594	1,521,747	1,506,708	1,612,408	1,549,406	1,578,828	1,545,611	1,549,852	1,663,745				14,029,699
Home Care Services Prog	13,804	18,410	20,175	17,768	12,962	11,679	11,890	13,108	7,219				127,015
Transportation	468,895	481,166	479,606	445,959	480,578	471,100	365,602	360,657	412,685				3,966,248
Transportation Contracts	594,787	620,972	683,064	596,931	547,222	605,872	573,144	531,252	613,709				5,846,953
Prevention Services	547,433	651,145	627,205	670,800	664,320	660,802	700,633	577,401	283,238				5,382,977
Other Authorized Services	3,547,988	3,694,453	3,618,232	3,685,797	3,612,677	3,509,568	3,591,571	3,493,467	3,554,075				32,307,428
P & I Expense	16,418	9,986	11,218	10,602	18,910	10,756	11,682	11,346	11,514				112,432
Hospital Care	7,500												7,500
Medical Equipment	2,538	9,562	9,458	7,193	4,393	12,155	1,107	1,722	10,126				58,254
Medical Services Prof	200,220	206,572	235,285	268,815	237,641	258,892	220,827	237,318	221,224				2,086,794
Medical Services Prog	34,005	38,749	36,593	30,134	25,720	26,008	25,774	25,473	24,809				267,265
Respite Care - In Home	2,155,217	2,227,698	2,204,260	2,242,035	2,283,709	2,211,701	2,238,856	2,130,585	1,287,193				16,981,254
Respite Care - Out of Home	18,656	9,600	9,017	15,768	11,882	21,389	26,439	27,663	20,630				161,044
TOTAL OTHER SERVICES	9,292,982	9,908,890	9,829,582	10,024,311	9,853,156	9,748,978	9,711,274	9,382,030	8,708,685				86,459,888
TOTAL PURCHASE OF SERVICES	18,091,186	19,341,727	19,100,690	19,261,090	19,106,840	18,750,260	19,156,637	18,488,367	18,502,614				169,801,411
COMMUNITY PLACEMENT PLAN													
Community Care Facility	44,362	44,362	100,299	152,418	142,559	142,559	142,446	325,585	173,787				1,266,377
ICF/SNF Facility													-
Day Training													-
Non-Medical Services													-
Non-Medical Services-Programs													-
Transportation													22,865
Other Authorized Services	951	1,313	3,677	963				3,367	5,170				6,904
Other Services													-
Medical Care - Prof													-
Community Care Facility													-
TOTAL COMMUNITY PLACEMENT PL	45,313	47,225	103,976	155,496	147,562	148,199	142,446	328,952	178,957				1,296,146
TOTAL PURCHASE OF SERVICE	18,136,499	19,388,952	19,204,666	19,416,586	19,254,422	18,899,459	19,301,083	18,817,319	18,681,571				171,099,557

Attachment 4

KERN REGIONAL CENTER
 OPERATIONS
 FY 2022/2023
 AS OF MARCH 31, 2023

	PROPOSED EXPENDITURE	YEAR TO DATE	07/31/22	08/31/22	09/30/22	10/31/22	11/30/22	12/31/22	01/31/23	02/28/23	03/31/23	04/30/23	05/31/23	06/30/23	TOTAL	OVER/UNDER
OPERATIONS																
Salaries & Benefits	20,378,826	15,676,020	1,427,790	1,567,602	2,011,650	1,261,290	1,116,049	1,915,921	1,620,048	1,597,623	2,320,501				14,898,473	837,547
Operating Expenses	5,668,000	4,360,000	306,691	363,842	403,645	530,362	629,596	537,121	544,486	596,390	514,461				4,426,594	(66,594)
SUBTOTAL OPS	26,046,826	20,036,020	1,734,481	1,931,444	2,415,295	1,791,651	1,745,645	2,453,042	2,164,534	2,194,013	2,834,962				19,265,068	770,952
COMMUNITY PLACEMENT PLAN																
Salaries & Benefits	870,375	669,519	-	-	30,170	266,852	63,808	48,818	57,638	62,728	78,082				577,926	91,593
Operating Expenses	253,082	189,812	-	-	30,170	56,416	47,670	17,708	56,082	3,517	48,874				260,447	(70,635)
SUBTOTAL CPP	1,123,457	859,331	-	-	30,170	323,268	111,478	66,526	113,731	66,245	126,956				838,373	20,957
FOSTER GRANDPARENT PROGRAM																
Salaries & Benefits	98,040	75,415	3,823	4,467	6,206	4,467	4,467	4,467	4,573	4,471	6,206				43,147	32,268
Operating Expenses	151,503	113,627	3,444	153	4,221	14,490	11,476	9,633	9,489	7,802	12,582				73,301	40,326
SUBTOTAL FGP	249,543	189,043	7,267	4,620	10,427	18,957	15,943	14,100	14,073	12,273	18,788				116,448	72,595
SENIOR COMPANION PROGRAM																
Salaries & Benefits	65,360	50,277	2,557	2,978	4,137	2,978	2,978	2,978	3,049	2,981	4,137				28,773	21,504
Operating Expenses	101,002	75,752	2,565	194	2,921	8,019	6,810	5,947	6,466	4,977	6,588				44,585	31,166
SUBTOTAL SCP	166,362	126,028	5,122	3,172	7,058	10,997	9,888	8,925	9,514	7,958	10,725				73,358	52,670
TOTAL OPERATIONS	27,586,188	21,210,422	1,746,869	1,939,236	2,462,951	2,144,873	1,882,953	2,542,593	2,301,852	2,260,489	2,991,430				20,293,247	917,175