

AGENDA
INLAND COUNTIES REGIONAL CENTER, INC.
BOARD OF TRUSTEES MEETING
MONDAY, SEPTEMBER 12, 2022
Meeting: 5:00 p.m. to 6:00 p.m.
Only Via Live Stream at [Inlandrc.org/live](https://inlandrc.org/live)

Call to Order/ Ms. O'Connell

Minutes of July 11, 2022 Board Meeting/Ms. O'Connell Action

Public Input: Comments limited to 3 minutes per person. Action may not be taken on any item that is not on the Agenda. ***Due to the existing COVID-19 State of Emergency, all requests for public comment must be submitted in writing prior to the meeting by using the submission form found at inlandrc.org/live. In order to protect the rights of our consumers, comments should not include personal consumer information. If you have a specific issue or comment, contact your CSC or email your comments to Btrustees@inlandrc.org.***

Executive Director's Report/Ms. Johnson Info

Director's Reports/Directors Info

Committee Reports (Written Reports)

- | | |
|---------------------------------------|------|
| 1) Another Way/Ms. Gonzales | Info |
| 2) Executive Committee/Ms. O'Connell | Info |
| 3) Legislative Committee/Ms. Cummings | Info |
| 4) Master Trust Committee/Ms. Miller | Info |

Old Business:

- | | |
|--------------------------------|--------|
| 1) Salary Schedule/Mr. Beckett | Action |
|--------------------------------|--------|

New Business

- | | |
|--|--------|
| 1) Approval of Board Officers/Ms. O'Connell | Action |
| 2) Another Way Investment Policy and Account/Ms. Steuwer | Action |
| 3) Another Way Projected Budget/Ms. Steuwer | Action |

Trustee Input

Executive Session

- 1) Legal Matters (In accordance with Welfare & Institutions Code Section 4663(a)(5))
- 2) Employee Salaries and Benefits (In accordance with Welfare & Institutions Code Section 4663(a)(3))

Next Meeting Date: November 14, 2022

MINUTES OF July 11, 2022
Inland Counties Regional Center, Inc.
Board of Trustee Meeting

BOARD PRESENT VIA CONFERENCE CALL: Jay Connor; Alicia Lara; Theodore Leonard; Eric Naranjo; Maureen O'Connell; Rene Rojo; Teri Smith; Joshua Souder

BOARD MEMBERS ABSENT: Kiana Buffington; Carmela Garnica; Gizelle Siojo; April Stewart

BOARD FACILITATOR: Robyn Souder

DIRECTORS PRESENT VIA CONFERENCE CALL: Steve Beckett; Lavinia Johnson; Don Meza; Merissa Steuwer; Vince Toms; Treva Webster

STAFF PRESENT VIA CONFERENCE CALL: Kurtis Franklin

RECORDING SECRETARY: Sandra Guzman

CALL TO ORDER: Meeting was called to order by Ms. O'Connell at 4:01 pm.

MINUTES OF May 9, 2022 BOARD MEETING: 1. Motion made to approve the minutes of the May 9, 2022 Annual Board Meeting as presented M/S/C Souder/Connor.

PUBLIC COMMENT: None

EXECUTIVE DIRECTOR'S REPORT: Ms. Johnson reported the following 1) IRC serves 43,944 active consumers 2) IRC currently has 832 employees which included 508 service coordinators. The average caseload is 84 to 1. 3) Managers continue to interview. IRC is projecting to hire approximately 110 more service coordinators. 4) IRC building was opened to the public by appointment only on July 5th. A guard is stationed up front to assist with screening and checking in. 5) Staff continue to work remotely but are required to come into the office at least once a week. Directors, Managers and their CST3s are required to come into the office twice a week. 6) COVID testing continues to be provided at the San Bernardino and Riverside offices.

DIRECTOR'S REPORT: Written reports were submitted. Mr. Connor inquired if day programs will open before December 2022? Mr. Toms stated it all depends on COVID. Some programs are operating at about 75%. 25% is in person. The health and safety of our consumer is everyone's #1 goal.

COMMITTEE REPORTS:

- 1) **ANOTHER WAY COMMITTEE:** Ms. Gonzales submitted a written report. No questions from the Board.
- 2) **EXECUTIVE COMMITTEE:** The minutes from the May and June meetings were submitted. There were no questions from the Board.
- 3) **LEGISLATIVE COMMITTEE:** Ms. Cummings submitted a written report. There were no questions from the Board.

- 4) **MASTER TRUST COMMITTEE:** Ms. Miller submitted a written report. No question from the Board.
- 5) **VENDOR ADVISORY COMMITTEE:** Ms. Stewart submitted a summary from the May and June VAC meetings. No question from the Board.

OLD BUSINESS:

- 1) **SALARY SCHEDULE CORRECTIONS:** Ms. Steuwer presented the corrections made to the Salary Schedule. **2. Motion made to approve the corrections to the Salary Schedule as presented M/S/C Connor/Rojo.** Ms. Steuwer requested the Board authorize the Executive Committee the authority to approve minor corrections such as this if they arise. **3. Motion made to authorize the Executive Committee to approve minor corrections to the Salary Schedule whenever necessary M/S/C Connor/Souder.**

NEW BUSINESS:

- 1) **APPROVAL OF NEW BOARD MEMBERS:** Ms. Lara stated that the Nominations Committee interview two applicants. Theodore Leonard and Carmela Garnica are both very knowledgeable and both come with prior board experience. It is the committee's recommendation that the Board approve Theodore Leonard and Carmela Garnica to serve on the Board. **4. Motion made to approve Carmela Garnica and Theodore Leonard to serve on the Board M/S/C Connor/Naranjo.**
- 2) **POS POLICY:** Mr. Toms presented 5 changes to the Purchase of Service Policy. One was an addendum the Respite Services found on page 8 and 4 additions. Camp and Associated Travel Expenses, page 12; Nonmedical Therapies, page 12; Social Recreation, page 13 and Educational Services, page 14 were added to the Purchase of Service Policy effective July 1, 2022. **5. Motion to approve the revisions as presented M/S/C Souder/Connor.**
- 3) **BANK SIGNATORIES FOR NEW BOARD OFFICERS:** Ms. Steuwer stated due to the Board Chair resigning, this item will need to be tabled until a new Chair is named.
- 4) **EMPLOYEE HEALTH BENEFITS FOR PLAN YEAR 10/1/2022:** Ms. Steuwer shared that the health plan year for employees begins on October 1. She just received the marketing proposal from the broker and have not had time to review. Open Enrollment begins the 3rd week in August. Ms. Steuwer is requesting the Board authorize the Executive Committee the authority to review and approve the health benefits effective October 1st. **6. Motion made to authorize the Executive Committee to review and approve the health benefits M/S/C Connor/Souder.**
- 5) **MASTER TRUST INVESTMENT OBJECTIVES AND POLICIES:** Mr. Beckett shared that the Master Trust Investment Objectives and Policies was updated to include types of investments we want or don't want to invest in, review asset allocations and appropriate benchmarks and basically bring the policy up to date. **7. Motion made to approve the Master Trust Investment Objectives and Policies M/S/C Souder/Naranjo.**

TRUSTEE INPUT:

Mr. Naranjo shared that his mother passed away on June 3rd of a heart attack. She was very special and of everything he did. He would not be on this Board if it wasn't for her.

Ms. Johnson was inquiring if the Board would prefer to move the Board Meetings to 5:00 p.m. to accommodate everyone's work schedule? Board Trainings can also be changed to 5:00 p.m. or 5:30 p.m.? The Board agreed to move Board Meetings to 5:00 and Board Trainings to 4:00 for the hour-long trainings and 4:30 for the half hour trainings. These time changes will begin with the August training and September Board Meeting.

Executive Committee meetings can also be moved to a later time. The Executive Committee decided to change the meeting time to 4:30 p.m. beginning in July.

Ms. Johnson stated we really wanted to acknowledge the Board's time and all the support they provide. Years ago, the Board was provided a per diem. Starting in July, we would like to offer each Board Member a \$200 per diem for participating in Board Trainings/Meetings. We want to thank you for all you do for the IRC. Merissa will work out the details with Sandra who will be in contact with you.

Ms. O'Connell adjourned the meeting at 4:49 p.m. and reminded everyone of the new training and meeting time.

Sincerely,

Alicia Lara
Board Secretary

Sandra Guzman
Assistant Secretary

MOTIONS FOR THE JULY 11, 2022 BOARD OF TRUSTEES MEETING

1. Motion made to approve the minutes of the May 9, 2022 Annual Board Meeting as presented M/S/C Souder/Connor.
2. Motion made to approve the corrections to the Salary Schedule as presented M/S/C Connor/Rojo.
3. Motion made to authorize the Executive Committee to approve minor corrections to the Salary Schedule whenever necessary M/S/C Connor/Souder.
4. Motion made to approve Carmela Garnica and Theodore Leonard to serve on the Board M/S/C Connor/Naranjo.
5. Motion to approve the revisions as presented M/S/C Souder/Connor.
6. Motion made to authorize the Executive Committee to review and approve the health benefits M/S/C Connor/Souder.
7. Motion made to approve the Master Trust Investment Objectives and Policies M/S/C Souder/Naranjo.

Director Adult Services Report
September 2022
Respectfully submitted by Don Meza

Adult Services Team Update: The adult services team has worked remotely since the state of emergency was declared by Governor Newsom on 3/04/2020. The case management teams have been completing in-person visits with consumers in a conscientious and safe manner. The focus of in-person visits has been for consumers residing in Board and Care and Specialized Facilities, in Skilled Nursing Facilities, and for independent consumers with Supported Living services. DDS has continued to extend directives to provide service delivery to consumers and we are allowed some flexibility in completing face to face vs. virtual IPP visits, as COVID infection rates fluctuate in the community. The directives for Alternative Services by non-residential vendors (day programs, habilitation, and transportation) remain in place but we expect an end to these services effective December 31, 2022 as reflected in recent trailer bill language. In Adult services there are currently 13 teams with approximately 200 service coordinators that cover the two-county catchment. With the new 22/23 budget we will be expanding the teams with new staff to have a smaller caseload ratio for the CSCs.

Federal Programs/Medicaid Waiver (MW): A Federal Programs audit was conducted at IRC the first two weeks of October 2021. The MW team had been preparing for several months to accommodate the fully virtual audit. This audit was completed virtually by auditors from DDS and DHS. In addition to a review of the documentation, the audit process included staff, consumer, and vendor interviews. A virtual cloud platform was created by Kurtis from our IT team to allow the auditors access to the documents. The Case Management, Resource, and Waiver teams worked tirelessly to get the documentation in order. An exit interview was conducted on October 18th, and the auditors shared their initial results. The auditors praised IRC for having excellent documentation and excellent organization of the Waiver eligible cases.

As of July 2022, IRC serves 15,553 active Medicaid Waiver enrolled consumers. The review process and reaccreditation of Waiver cases continues to be challenging in the current remote working model. Regardless of the challenges of COVID 19, the MW staff continues to add "Deeming" cases. DDS will continue to provide the accounting of 1915i cases directly to CMS.

Self Determination (SD): The SD Advisory Committee last met via "ZOOM" on August 25th, 2022. IRC currently has 84 consumers active in the Self Determination program and 8 consumers who are in pending status. There are additional consumers who are in the process of becoming active in the Self Determination program. An "orientation" to Self Determination remains a requirement, and IRC continues to offer Remote/Virtual SDP orientations with various dates scheduled. There has been a very good turnout for the virtual SDP orientations. There is in new statewide SDP orientation available that consumers/parents can participate in as an option to meet the requirement. As a regional center we are advancing forward with self-determination. We currently have 2 "Participant Choice Specialists" to provide support and guidance to consumers and staff. A third Participant Choice specialist will be joining the accounting/POS team soon. These are new positions created with guidance from DDS to help facilitate the process of initiation into the Self Determination Program

Inland Regional Center Children & Transition Services

September 12, 2022 IRC Board of Trustees Report

Submitted by Felipe J. Garcia IRC Director of Children and Transition Services

Greetings, Children, and Transition services continue to grow at a rapid pace. Our statistics are as follows: as of July 31, 2022, we currently have 22,016 cases under School Age and Transition services. School Age has 14,123 and Transition has 7,893 cases. There are 255 active caseloads of which 164 are in School Age and 91 are in Transition. We continue to hire replacements as soon as possible in an effort to ensure that consumers have a Consumer Services Coordinator (CSC).

Preschool Units

As a result of Assembly Bill 188 Regional Centers are being funded to create specialized units for children ages 0-6. Due to the current distribution of age groups, the Director of Children and Transition Services will create 4 units for ages 3-6. The purpose of the units will be to have a lower caseload of 1:40 that will allow (CSC's) to provide resources and information to children who are IRC eligible at age 3 and make a connection to the child's local school district. As of today, we have identified that we will have 2 units of 23-25 CSC's. Each County will have 2 units to help us with these new requirements. We will also be hiring 3 Program Managers to lead the teams, and due to the level of experience needed, we will be looking at our current management team for candidates. It is an exciting time for School Age and Transition as we are eager to get these units started. The goal is to start hiring as soon as possible so that we can have teams established by the end of this calendar year.

Senior Program Manager-Transition

Senior Program Manager Eric Hamler started his position on May 6, 2022 and has provided much needed assistance to the Director of School age and Transition Services. Eric is leading the Transition teams and special projects such as the Self Determination workgroup, the two new positions (Participant Choice Specialist); the 1:25 caseload under the Transition Unit and our new program that will oversee cases in a specialized caseload 1:40 which will address disparities in services. Eric has been able to move into his new position with ease and we are excited to see his vision for these programs grow.

Participant Choice Specialist

The participant Choice Specialists (PCP) have been assisting in the completion of IRC's fiscal year rollover for all Self-Determination (SDP). Both, PCPS have facilitated a two-part training for IRC to discuss information about SDP including but no limited to an overview of the program, budget allocation, spending plans and other important SDP related topics. Both PCPs in addition to the Senior Program Manager attended the virtual Self-Determination Advisory Committee meeting on August 22, 2022.

Systems-Care Coordinator

Rosalba Martinez was selected as IRC's system of care coordinator effective on May 6, 2022. Rosalba has been assisting with care coordinator with our community partners in accordance with Assembly Bill 2083. Rosalba provides great assistance with the youth that are served by multiple agencies in coordinator of services.



Intake, Early Start, Clinical Services and The Early Start Family Resource Network REPORT

July-August 2022

(This specific report will focus on Early Start and
The Early Start Family Resource Network)

Early Start Family Resource Network (ESFRN)

The ESFRN has the exciting opportunity to begin expanding the services they offer to families and individuals with special needs in our catchment area.

In addition to the Early Start funding the ESFRN receives from DDS, they were provided Community Navigator Project (CNP) funding. This funding will be used to provide navigation services to families and individuals of all ages who are regional center clients. This project will focus on peer-to-peer support, assistance with navigating regional center services and generic community resources.

The ESFRN was also recently awarded the Family Empowerment Center (FEC) grant from the California Department of Education. This grant will be used to improve educational outcomes and success for children and individuals, ages 3-22, receiving special education services. This project will provide families and individuals with peer-to-peer support, training, information, and resources.

Both new projects are currently in the planning phase.

Early Start

Good News! The California state legislature (Through SB 188) approved funding a 1:40 Caseloads for Regional Center clients ages 0 through 5. This will allow the service coordinators to spend more time with each little client and their family. This will address some of the unmet needs that were identified over the past many years.

Hiring so many new Early Start service coordinators will not be easy and it may not be accomplished quickly. We are looking for educated professionals who have a strong work ethic, and real heart for service, especially for the individuals we serve.

Along with hiring more coordinators, we must reassess the areas we serve to ensure the appropriate number of coordinators for each area. There probably will need to be some re-alignment of unit territories made. Change is hardly ever easy for staff or for the children and families we serve. We have a very strong cohort of Early Start service providers so we feel that if we continue to work cohesively, the disruption will be as minimal as possible.

The Passage of SB 188 also affects Early Start and ESFRN in the follow ways:

- Adds a 6th specified area for an eligible infant or toddler to have a developmental delay by bifurcating communication development to include both expressive and receptive communication development and changes the definition of significant difference to require a 25% delay in one or more of those developmental areas.
- Clarifies that fetal alcohol syndrome is a condition with established harmful developmental consequences for purposes of the eligibility criteria described above.
- Requires the department to make efforts to schedule meetings with, and engage, parents and legal guardians in transition-related activities
- Requires each regional center to designate a main point of contact for coordinating and completing, with other agencies and persons, the transition of a child and family from Part C to Part B. The bill would require those regulations to be updated, on or before October 1, 2024, to include a process for Part C programs to incorporate family feedback to help update and improve the transition process, training, and family satisfaction.
- This bill would require a service coordinator to conduct at least quarterly reviews of the individualized family service plan.
- Existing law requires a referral to be made to the local family resource center or network and conditions this referral on parent or guardian consent. The bill requires a request for consent for the referral to be offered to the parents or the legal guardian at the initial individualized family service plan meeting and at any subsequent individualized family service plan meeting if consent was not previously obtained.
- Authorizes the department, in consultation with the State Department of Education, to provide additional resources to families with information on specified areas, including, among others, options for services for families after their child reaches three years of age.
- Suspends the AFPF and FCPP requirements from July 1, 2022, to June 30, 2023



Inland Regional Center Board Report
Submitted by Andrea Gonzales, Another Way Coordinator
Date: August 30, 2022

To: The Board of Trustees

- I. **Golf Tournament (September 16th and 17th) – Temecula Creek Inn**
 - A. \$154,975 in committed sponsorships to date
 - i. \$61,700 Paid
 - ii. \$93,275 in A/R
 - B. We're going to meet or exceed 180 golfers
 - i. Augustine Band of Cahuilla Indians will be letting me know if they are sponsoring on September 6th.
 - C. Rooms are booked/filled the block
 - D. Board and Employee rate \$175 per golfer.
- II. **Requests for Assistance**
 - A. Requests are beginning to pick-up with most consumers asking for help with their rent or utilities.
 - i. Pause on evictions has lifted so we're anticipating more request for rental assistance.
- III. **Backpack Event (July 30th)**
 - A. Backpack giveaway event was held in IRC's back parking lot
 - B. Received 112 referrals from case managers
 - i. Distributed approximately 30 backpacks and gift cards for clothing the day of the event.
 - ii. Days following events CSCs picked up 20 backpacks and gift cards following the event.
- IV. **Training session for Advisory Committee**
 - A. Training took place on July 15th and 16th.
 - B. Key takeaways
 - i. Need more flexibility with requests

- a. Committee voted to increase stipends as follows: Rent from \$700 to \$1500; Burials from \$700 to \$1000; and Beds and Appliances from \$700 to \$1000.
 - ii. Social Media
 - a. Need to develop a social media committee and commit to posting on at least one platform consistently.

V. OT/PT Program

- A. Another Way was able to purchase the following items for OT/PT:
 - i. 6 size 2 Tomato Chairs
 - ii. 8 size 3 Tomato Chairs
 - iii. 2 XL Tumble Form chairs
 - iv. 3 Out and About Seats
 - v. 4 Small Adjustable Zipper Vests with Tether Mounts
 - vi. 4 Medium Adjustable Zipper Vests with Tether Mounts
 - vii. 4 Large Adjustable Zipper Vests with Tether Mounts
- B. The Carpenter Grant funded the items.
- C. Developing a program with OT and PT to distribute the items to the consumers most in need.

VI. Toy Drive – Tentative date is December 7th, 2022.

- A. The event will take place at Club Events Center in San Bernardino, pending COVID is not an issue.
- B. Developing a Newsletter to share with consumers to promote greater attendance at the event.

VII. Grants

- A. *Pending grants:* \$5000; Stater Brothers for food support - \$5000; and The Annette Williams Charitable Foundation (new) - \$5,000 general operating support.
- B. *Grants Awarded:* Annenberg- \$25,000 General Operating Support.
- C. *Denied Grants:* The Lawrence Foundation (\$5000)
- D. *Current grants:* Cal Wellness (\$59,789.49); Kaiser (\$67,140.00); IECF (\$3,333.29); Carpenter (\$471.42).
- E. *Grant Reports submitted:* Annenberg report submitted in March and accepted.
- F. *Grant Extension submitted:* Kaiser approved a grant extension through March of 2023.
- G. *Grant Extension submitted:* California Wellness approved a grant extension through June of 2023.

INLAND REGIONAL CENTER

**Board of Trustees
Executive Committee Meeting**

August 10, 2022

4:30 p.m.

EXECUTIVE COMMITTEE: Jay Connor; Alicia Lara; Maureen O'Connell; Josh Souder

STAFF/EX OFFICIO: Lavinia Johnson; Merissa Steuwer

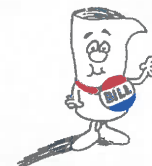
RECORDING SECRETARY: Sandra Guzman, Executive Assistant

1. \$250,000 Contracts: Item was removed from agenda.
2. Board Chair: Executive Committee would like to recommend Maureen O'Connell for Chair and Carmela Garnica as Vice Chair.
3. Salary Schedule Changes: Merissa reviewed the minor corrections made to the Salary Schedule. Corrections consisted of title changes and math error rounding. The Board authorized the Executive Committee to approve minor changes to the Salary Schedule when needed. 1. Motion made to approve the changes to the Salary Schedule as presented M/S/C Souder/Lara.
4. Benefit Package: Merissa reviewed IRC's health benefit package for 2022-23. At the July Board Meeting, the Board granted the Executive Committee the authority to approve the benefit package when it became available. **1. Motion made to approve Employee Benefit Package as presented M/S/C Souder/Connor.**
5. Another Way Investment Policy and Change in Investment Account: Another Way is the fundraising arm for IRC. Another Way is a committee of the Board, and its purpose is to support the unmet needs of IRC's consumers who met the financial eligibility living in San Bernardino and Riverside County. IRC would like to consolidate and move Another Way's investment portfolio to the same advisory as Master Trust. Staff will be requesting to move funds and custody to Union Bank and switch investment firms from LPL Financial Advisory to Glass Onion PMC, LLC. The Executive Committee agreed to make said recommendation to the full Board at the September meeting.
6. Master Trust Investment Portfolio: Merissa reviewed the Master Trust Investment Portfolio for the month of July 2022.
7. Building the September Board Meeting Agenda: The following items will be added in addition to the regular committee reports, Approval of Officers and Another Way Investment Account.

Next Executive Committee Meeting: September 21, 2022 at 4:30 p.m.



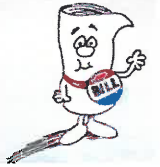
LEGISLATIVE REPORT
August 31, 2022
 Respectfully Submitted by Jennifer Cummings
 Fair Hearings and Legal Affairs



Bill	Title	ARCA Position	
HR 3321	Credit for Caring Act – The bill supports family caregivers by offering a federal tax credit of up to \$5,000 for those who qualify.	-	Introduced 5/18/21
HR 3474; S.1858 (Federal)	Keeping All Students Safe Act – This bill would prohibit physical restraint that is life-threatening or restricts breathing, mechanical restraint, chemical restraint, and seclusion in schools that receive federal funding	-	Introduced 5/25/21
HR 3763 (Federal)	Supplemental Security Income (SSI) Restoration - Would enhance SSI program by updating general income disregard to \$123/month, adjusting the earned income disregard to \$399/month, and increasing resource limits to \$10,000/individual and \$20,000/couple.	-	Introduced 6/6/21
HR 4131; S. 2210 (Federal)	Better Care Better Jobs Act - proposes a \$400 billion investment in Medicaid home and community-based services (HCBS) to expand access to these vital services and create more and better direct care jobs.	-	Introduced 6/24/21
HR 6405 (Federal)	Marriage Equality for Disabled Adults Act - Would eliminate requirements that disabled adult children (DAC) remain unmarried in order to receive Social Security benefits and Medicare and Medicaid. Endorsed by The Arc.	-	Introduced 1/13/22
AB 13 (2-YEAR)	Personal rights: automated decision systems.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 32 (2-YEAR)	Telehealth. Expands and enshrines the new telemedicine world.	Support	PASSED - ON TO GOVERNOR
AB 58 (2-YEAR)	Pupil health: suicide prevention policies and training.	Support	PASSED - ON TO GOVERNOR
AB 84 (2-YEAR)	Employment: COVID-19: supplemental paid sick leave.	Tracked by ARCA	Senate - Budget & Fiscal Review
AB 114 (2-YEAR)	Medi-Cal benefits: rapid Whole Genome Sequencing. Adds whole genome sequencing to the list of Medi-Cal benefits.	Support	Senate - Appropriations
AB 126 (2-YEAR)	Special education programs: Family Empowerment Centers on Disability.	Support	Senate - Education
AB 129	Budget Act of 2022	Tracked by ARCA	Senate - Budget & Fiscal Review
AB 154	Budget Act of 2022	Tracked by ARCA	Senate - Inactive
AB 321	Childcare services: enrollment priority.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 371 (2-YEAR)	Shared mobility devices: insurance and tracking.	Support	PASSED - ON TO GOVERNOR
AB 499 (2-YEAR)	Referral source for residential care facilities for the elderly: duties.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 552 (2-YEAR)	Integrated School-Based Behavioral Health Partnership Program.	Support	PASSED - ON TO GOVERNOR
AB 662 (2-YEAR)	Mental health: dispatch and response protocols: working group	Support if Amended	PASSED - ON TO GOVERNOR
AB 682	Planning and zoning: density bonuses: cohousing buildings.	Support	PASSED - ON TO GOVERNOR
AB 695 (2-YEAR)	Elder and dependent adults. Simplifies the definition of elder/dependent adult for APS purposes.	Support	Senate - Appropriations
AB 813 (2-YEAR)	Developmental services: service outcome pilot project.	Support in Concept	Senate - Appropriations



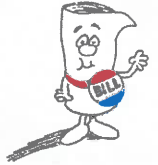
LEGISLATIVE REPORT
August 31, 2022
 Respectfully Submitted by Jennifer Cummings
 Fair Hearings and Legal Affairs



Bill	Title	ARCA Position	
AB 895 (2-YEAR)	Residential care facilities: conditions.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 967 (2-YEAR)	Special education: COVID-19 Special Education Fund.	Support	Senate - Education
AB 988 (2-YEAR)	Mental health: mobile crisis support teams: 988 crisis hotline.	Support	PASSED - ON TO GOVERNOR
AB 1007 (2-YEAR)	Forced or Involuntary Sterilization Compensation Program.	Support	Senate - Appropriations
AB 1051 (2-YEAR)	Medi-Cal: specialty mental health services: foster youth.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 1071 (2-YEAR)	Office of Emergency Services: tabletop exercises.	Support	Senate - Appropriations
AB 1355	Medi-Cal: Independent Medical Review System.	Support	PASSED - ON TO GOVERNOR
AB 1417 (2-YEAR)	Community colleges: providers of care for individuals with developmental disabilities: model curriculum for certification program.	Tracked by ARCA	Senate - Education
AB 1502 (2-YEAR)	Skilled nursing facilities. (No borrowing licenses)	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 1624	Budget Act of 2022	Tracked by ARCA	Assembly - Budget
AB 1630	AB-1630 Competence to stand trial: statewide application.	Tracked by ARCA	Senate - Appropriations
AB 1663	Protective proceedings. (Conservatorship reform bill)	Support if Amended	PASSED - ON TO GOVERNOR
AB 1720	Community care facilities: criminal background checks.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 1751	Workers' compensation: COVID-19: critical workers.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 1809	Nursing Facility Resident Informed Consent Protection Act of 2022.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 1810	Pupil health: seizure disorders.	Support	PASSED - ON TO GOVERNOR
AB 1907	Long-term health care facilities: inspections.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 1914	Resource family approval: training.	Support	PASSED - ON TO GOVERNOR
AB 1915	Developmental services.	Tracked by ARCA	Assembly - Pending Referral
AB 1927	Director of Developmental Services: guardianship and conservatorship.	Tracked by ARCA	Assembly - Pending Referral
AB 1947	Hate crimes: law enforcement policies.	Tracked by ARCA	Senate - Inactive
AB 1957	Disparities within the developmental services system.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 1962	Telephone support services: seniors and individuals with disabilities.	Support	Assembly-Aging/Long Term Care
AB 1982	Telehealth: dental care.	Support	PASSED - ON TO GOVERNOR
AB 1993	Employment: COVID-19 vaccination requirements.	Tracked by ARCA	Assembly - Labor & Employment
AB 1994	Long-term supports and services.	Tracked by ARCA	Assembly - Pending Referral
AB 1999	Medi-Cal: behavioral health: individuals with vision loss.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 2003	California Workforce Development Board: model career pathways.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 2017	Evidence: hearsay: exceptions.	Support	DIED
AB 2020	Mental health services: gravely disabled.	Tracked by ARCA	Assembly - Health
AB 2023	Jails: discharge plans.	Support	PASSED - ON TO GOVERNOR
AB 2036	Resource family approval: training.	Tracked by ARCA	Assembly - Pending Referral
AB 2063	Density bonuses: affordable housing impact fees.	Tracked by ARCA	PASSED - ON TO GOVERNOR



LEGISLATIVE REPORT
August 31, 2022
 Respectfully Submitted by Jennifer Cummings
 Fair Hearings and Legal Affairs



Bill	Title	ARCA Position	
AB 2069	California Home Health Aide Training Scholarship Act.	Support	PASSED - ON TO GOVERNOR
AB 2077	Medi-Cal: monthly maintenance amount: personal and incidental needs.	Support	PASSED - ON TO GOVERNOR
AB 2079	Skilled nursing facilities: direct care spending requirement.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 2145	Dental services: skilled nursing and intermediate care facilities/developmentally disabled.	Support	CHAPTERED
AB 2164	Disability access: funding.	Support	PASSED - ON TO GOVERNOR
AB 2165	Persons with developmental disabilities.	Tracked by ARCA	Assembly - Pending Referral
AB 2216	The Qualified ABLE Program: tax-advantaged savings accounts.	Support	PASSED - ON TO GOVERNOR
AB 2249	Public postsecondary education: students with disabilities.	Tracked by ARCA	Assembly - Pending Referral
AB 2256	Office of Broadband and Digital Literacy: reports.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 2275	Mental health: involuntary commitment.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 2317	Children's psychiatric residential treatment facilities.	Support if Amended	Assembly - In Floor Process
AB 2394	Long-term services and supports.	Tracked by ARCA	Assembly-Aging/Long Term Care
AB 2402	Medi-Cal: continuous eligibility.	Support	Senate - Inactive
AB 2405	Intensive behavioral health treatment facilities.	Support if Amended	Assembly - Health
AB 2410	Local educational agencies: home-to-school transportation.	Comments	Assembly - Education
AB 2511	Skilled nursing facilities: backup power source.	Support	PASSED - ON TO GOVERNOR
AB 2547	Peace officers: determination of bias.	Support	Senate - Appropriations
AB 2619	Residential care facilities for the elderly: capacity.	Tracked by ARCA	Assembly - Human Services
AB 2634	Developmental disabilities.	Tracked by ARCA	Assembly - Human Services
AB 2680	Medi-Cal: Community Health Navigator Program.	Support	Senate - Inactive
AB 2693	COVID-19: exposure.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 2697	Medi-Cal: community health workers and promotores.	Support	PASSED - ON TO GOVERNOR
AB 2750	Department of Technology: digital equity plan.	Support	PASSED - ON TO GOVERNOR
AB 2751	Affordable Internet and Net Equality Act of 2022.	Tracked by ARCA	Senate - Gov. Organization
AB 2776	Residential care facilities: placement of children.	Tracked by ARCA	Assembly - Pending Referral
AB 2786	Children's Crisis Continuum Pilot Program.	Support	Senate - Health
AB 2806	Childcare and developmental services: preschool: expulsion and suspension: mental health services: reimbursement rates.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 2813	Long-Term Services and Supports Benefit Program.	Tracked by ARCA	Assembly-Aging/Long Term Care
AB 2827	Child daycare facilities.	Support	PASSED - ON TO GOVERNOR
AB 2841	Disqualification from voting.	Tracked by ARCA	PASSED - ON TO GOVERNOR
AB 2853	Mental health: involuntary holds.	Tracked by ARCA	Assembly - Judiciary
AB 2917	State law: disability access. (construction-related accessibility claims)	Support	PASSED - ON TO GOVERNOR
ACR 135	Suicide Prevention Week. (Sept. 4-10, 2022)	Support	CHAPTERED



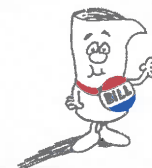
LEGISLATIVE REPORT
August 31, 2022
 Respectfully Submitted by Jennifer Cummings
 Fair Hearings and Legal Affairs



Bill	Title	ARCA Position	
ACR 165	World Autism Awareness Day. (April 2, 2022)	Support	CHAPTERED
SB 17 (2-YEAR)	Office of Racial Equity.	Tracked by ARCA	Assembly - Third Reading
SB 21 (2-YEAR)	Specialized license plates: mental health awareness.	Support	Assembly - Appropriations
SB 107 (2-YEAR)	CalFresh. Goal is to improve and simplify access to CalFresh	Support	PASSED - ON TO GOVERNOR
SB 128	Budget Act of 2022.	Tracked by ARCA	Assembly - Third Reading
SB 237 (2-YEAR)	Special education: dyslexia screening.	Support	Assembly - Education
SB 291 (2-YEAR)	Advisory Commission on Special Education: pupil advisory council.	Tracked by ARCA	PASSED - ON TO GOVERNOR
SB 293 (2-YEAR)	Medi-Cal specialty mental health services.	Tracked by ARCA	Assembly - Appropriations
SB 387	Pupil health: school employee and pupil training: youth mental and behavioral health.	Support	Assembly - Education
SB 518 (2-YEAR)	Developmental services: Self-Determination Program.	Tracked by ARCA	PASSED - ON TO GOVERNOR
SB 562 (2-YEAR)	Health care coverage: pervasive developmental disorders or autism. Revises "BHT" def.	Tracked by ARCA	Assembly - Third Reading
SB 568 (2-YEAR)	Deductibles: chronic disease management.	Support	Assembly - Health
SB 692 (2-YEAR)	Local control and accountability plans: state priorities: least restrictive environment.	Tracked by ARCA	PASSED - ON TO GOVERNOR
SB 840	Budget Act of 2022	Tracked by ARCA	Senate - Budget & Fiscal Review
SB 855	Childhood Drowning Data Collection Pilot Program.	Support	PASSED - ON TO GOVERNOR
SB 861	Dementia Care Navigator Grant Pilot Program.	Tracked by ARCA	PASSED - ON TO GOVERNOR
SB 870	Developmental services. Modifies "developmental disability" age or origination from 18 to 22	Support if Amended	Assembly - Third Reading
SB 882	Advisory Council on Improving Interactions between People with Intellectual and Development Disabilities and Law Enforcement.	Support	PASSED - ON TO GOVERNOR
SB 912	Biomarker testing.	Support	PASSED - ON TO GOVERNOR
SB 965	Conservatorships: medical record: hearsay rule.	Tracked by ARCA	Assembly - Judiciary
SB 979	Health emergencies.	Tracked by ARCA	PASSED - ON TO GOVERNOR
SB 988	Compassionate Access to Medical Cannabis Act or Ryan's Law.	Tracked by ARCA	PASSED - ON TO GOVERNOR
SB 1005	Conservatorship: sale of personal residence.	Tracked by ARCA	CHAPTERED
SB 1019	Medi-Cal managed care plans: mental health benefits.	Support	PASSED - ON TO GOVERNOR
SB 1093	Community care facilities: criminal background checks.	Support	PASSED - ON TO GOVERNOR
SB 1113	Special education: inclusive education: universal design for learning.	Support	PASSED - ON TO GOVERNOR
SB 1227	Involuntary commitment: intensive treatment.	Tracked by ARCA	PASSED - ON TO GOVERNOR
SB 1238	Behavioral health services: existing and projected needs.	Support	PASSED - ON TO GOVERNOR
SB 1279	Guardian ad litem appointment.	Tracked by ARCA	PASSED - ON TO GOVERNOR
SB 1354	Design-build contracting: cities, counties, and cities and counties: compliance with the federal Americans with Disabilities Act of 1990.	Support	PASSED - ON TO GOVERNOR
SB 1394	Conservatorships: gravely disabled persons.	Tracked by ARCA	PASSED - ON TO GOVERNOR
SB 1416	Mental health services: gravely disabled persons.	Tracked by ARCA	Assembly - Judiciary



LEGISLATIVE REPORT
August 31, 2022
Respectfully Submitted by Jennifer Cummings
Fair Hearings and Legal Affairs



Bill	Title	ARCA Position	
SB 1421	California Interagency Council on Homelessness.	Support	PASSED - ON TO GOVERNOR
SB 1446	Behavioral health-related treatment, housing that heals, and other services or supports.	Support in Concept	PASSED - ON TO GOVERNOR
SB 1480	Remote accessible vote by mail systems.	Support	Assembly - Elections
SCA 4 (2-YEAR)	Legislature: 2-year budget. Would put before the voters a two-year budget cycle for California. Year one of the Legislative session would be Budget and Trailer Bill only. Year two is for other legislation.	Tracked by ARCA	Senate - Budget & Fiscal Review
SCR 71	Traumatic Brain Injury Awareness Month.	Support	CHAPTERED
SJR 4 (2-YEAR)	Special education funding. Would fully fund the federal IDEA.	Support	CHAPTERED
SJR 8	Social Security Disability Insurance: disabled adult child benefit.	Support	CHAPTERED

UPCOMING LEGISLATIVE DEADLINES & EVENTS:

August 12 – Suspense deadline

August 31 – End of session

September 30 – Last day for Gov. to act on bills

November 8 – The election!

December 5 – Legislature reconvenes to swear in new members

January 1, 2023 – Signed bills go into effect



MASTER TRUST of CALIFORNIA

Serving People with a Developmental Disability

BOARD OF TRUSTEES REPORT
September 12, 2022
RESPECTFULLY SUBMITTED BY LAURA MILLER

Cash Assets July 31, 2022	\$22,720,241.32
---------------------------	-----------------

COMMITTEE MEMBERS

Tom Cosand, Drew Cutler, Bob McGuire, Debra Mannon,
Evan Page, Jack Padilla, and Steve Spears

OPERATIONS

Our team reviews distribution requests for beneficiaries every week. We would like to share how we process and review these requests, especially since we have had an increase in requests in the past few months. To ensure beneficiaries have access to their trust funds as soon as possible, the Master Trust Committee has authorized the Trust Administrator to approve requests up to \$5,000.00 and pre-need burial plans up to \$15,000.00. These purchases are reviewed and ratified at the monthly committee meeting. Requests exceeding the Trust Administrator limits are reviewed by the committee at the regular monthly meeting.

All requests must be submitted in writing. Beneficiaries, case managers, care providers, supported living employees, or family members can submit requests on-line via the Master Trust of California website.

This system allows for upload of receipts or any other supporting documentation. The Trust Administrator may consult with our Master Trust staff, dental consultant, attorney, or occupational therapist for additional input. Some things to consider when reviewing requests include:

- Request could cause a reduction in benefits.
 - Payments made directly to a beneficiary or payments for rent or food can cause a benefit overpayment or increase to Medi-Cal share of cost.
- Age of beneficiary, current and foreseeable needs, and balance in the trust.
 - For example, beneficiary has a trust owned vehicle that has annual expenses such as registration, insurance, and repairs. Trust may not be able to support the vehicle expenses and other requests.
- Another source should be paying for the item or service.
 - Should medical insurance, school, or Regional Center be paying for this expense?
- Specific trust language or court order does not allow for the distribution.

Checks or funding of debit cards are processed weekly. If a request is not approved or is being held for committee review, the requestor is notified within one week.



MASTER TRUST *of* CALIFORNIA

Serving People with a Developmental Disability

ACCESS

In June and July of 2022, 846 distribution requests were processed totaling \$329,042.95. Requests included air purifier, association dues, attendant services, bus pass, cable bills, carpet cleaning, cell phone bills, cleaning services, clothing, electronics, entertainment, federal & state taxes (quarterly), furniture, gym membership, healthcare premiums, home repairs, hygiene products, incontinence supplies, landscape services, legal fees, medical/dental expenses not covered by insurance, pest control, pool maintenance, pre-need burial, rent, salon services, tax preparation, trustee fees, utilities, vehicle insurance, vehicle registration, and vehicle repairs.

INLAND REGIONAL CENTER SALARY SCHEDULE FOR FY 2022/2023

Changes Effective 7/1/2022 and 9/1/2022

Date of Board Approval: 9/12/2022

Proposed changes effective 7/1/2022

Proposed changes effective 9/1/2022

Position Code	Position	Salary Range	Hourly Step 1	Monthly Step 1	Annual Step 1	Hourly Top Step	Monthly Top step	Annual Top Step	Reason for Revision/Correction
Non-Exempt									
410	Auditor 3	LA	\$ 30.0000	\$ 5,200.00	\$62,400.00	\$ 44.3237	\$ 7,682.77	\$ 92,193.22	Change Salary Range name from G to LA; no change in rate.
427	Account Tech - Payroll	LA	\$ 30.0000	\$ 5,200.00	\$62,400.00	\$ 44.3237	\$ 7,682.77	\$ 92,193.22	Change Salary Range name from UA to LA; no change in rate.
609	Senior IT Technician	UT	\$ 26.9128	\$ 4,664.89	55978.62	\$ 41.7506	\$ 7,236.77	\$ 86,841.22	Change Salary Range name from UA to UT; no change in rate.
720	Case Management Trainee (Full-time)	DF	\$ 21.5000	\$ 3,726.67	\$44,720.00	N/A	N/A	N/A	Change rate from 19.05 to 21.50/hr; change Salary Range name from DD to DF.
721	Case Management Trainee (Part-time, 20 hrs/wk)	DP	\$ 21.5000	\$ 1,863.33	\$22,360.00	N/A	N/A	N/A	New part-time position

ANOTHER WAY ADVISORY COMMITTEE INVESTMENT OBJECTIVES AND POLICIES

I. INTRODUCTION

The Another Way Advisory Committee (Another Way) is an IRC Board of Trustees committee whose purpose is to support the unmet needs of developmentally disabled individuals living in San Bernardino and Riverside Counties, who meet the financial eligibility and have needs that cannot be met by the services and supports provided by IRC under the Lanterman Developmental Disabilities Services Act or by an existing community resource.

II. PORTFOLIO COMPOSITION AND ASSET ALLOCATION

Objectives

The purpose of this policy is to foster a clear understanding of the investment objectives, policies and guidelines for the Another Way investment account (the Fund) with the IRC Board, Another Way members, IRC staff and the investment manager (Investment Manager). The assets governed by this investment policy are the financial assets of Another Way.

Another Way's investment objective is to preserve capital while providing stable, conservative growth. It is the intention that all earnings will be reinvested in the Fund.

Investments will be focused on quality securities that are diversified among asset classes and within a broad range of government and industry categories for each asset class to help minimize risk. Low cost, high quality, institutional style investment solutions will be used where available and present.

Risk and return are considered inseparable. There exists a correlation between portfolio returns and the amount of portfolio risk one is willing to accept. Portfolios emphasizing solely long-term growth tend to experience high price fluctuations over the short-term. Growth comes with a price of higher volatility and larger valuation swings.

Diversification

Diversification is a risk management strategy that combines a wide variety of investments within a portfolio. It attempts to limit exposure to any singular investment or asset class. Diversification is an all-weather portfolio advantage.

By combining assets through diversification, the Fund seeks to minimize volatility yet optimize returns for a given level of risk. The rationale behind this technique is that a portfolio constructed of different asset classes will, in theory, yield higher long-term returns with lower volatility compared to the risk of any individual holding or security.

Diversification is an admission that we cannot predict the future. Since the future is unknowable, diversification, the combining of different assets with different return characteristics and risk profiles, is a core principle for the Fund's investments.

Strategic Asset Allocation

Asset allocation is an investment theory that aims to determine portfolio return attribution. In other words, "What makes a portfolio go up, and what makes it go down".

Widely accepted research by Brinson, Beebower and Singer determined that a portfolio's asset allocation decision was responsible for the majority of its variation of return. According to their research, individual security selection and market timing contributed less than 7% of a portfolio's return while a strategic asset allocation contributed over 91%.

Another Way Advisory Committee
Investment Objectives and Policies

Another Way will focus on the asset allocation decision and minimize individual security selection and short-term market timing.

Asset Classes		
U.S. Equities	International Equities	Government Debt
Corporate Debt	Commodity	Real Estate
Precious Metals	Certificate of Deposits	Foreign Exchange

Investment vehicles that compliment a strategic asset allocation strategy are:

- low-cost institutional style mutual funds
- exchange traded funds (ETFs) from experienced, reputable providers

Re-Balance

Over time, the return of asset classes can be quite uneven. If left unattended, a portfolio's risk characteristics can be altered by market returns. Periodic re-balancing allows investment portfolios to keep its risk levels in check and prevent imbalances. The Fund will be re-balanced, as necessary, but at least once a year.

Cost Efficiency

Investment management, transaction, custodial, research and consulting fees are all money management realities. Acknowledging and monitoring these costs are part of a successful investment process.

Minimizing or eliminating costs like frequent transactions, commissions, high expense mutual funds, front-end load mutual funds and contingent deferred sales charges contributes to enhanced portfolio returns.

Time Horizon

The Fund is invested with a time horizon outlook of between 1 to 5 years.

Risk Profile

The risk profile for the Fund is to preserve capital balanced with stable, conservative growth.

Restricted Direct Investment Securities

The Fund shall not include any of the following types of investments:

- Annuities
- Cryptocurrency
- Non-Fungible Tokens (NFTs)
- Leveraged Exchange Traded Funds
- Stand-alone Futures
- Stand-alone Options
- Stand-alone REIT's
- Special Purpose Acquisition Companies (SPAC)
- Private Equity
- Individual Bonds

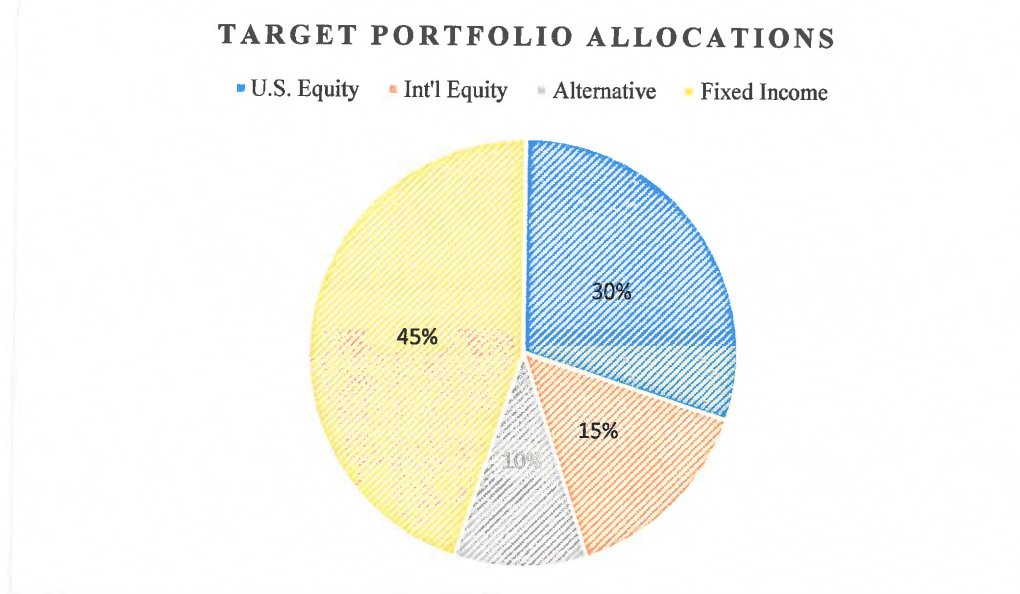
Target Portfolio

Investment objective and risk profile are two primary asset allocation determinants. Also important are general market investment conditions: interest rates, economic growth expectations, inflation outlook,

Another Way Advisory Committee
Investment Objectives and Policies

valuation levels, political stability.

With the understanding that Policy Targets are long-term in nature and will change given general investment market conditions, a target portfolio example would be:



Target Allocation	Asset Class	Range
30%	U.S. Equity	10 – 60%
15%	International Equity	0 – 30%
10%	Alternative	0 – 20%
45%	Fixed Income / Cash	20 – 80%

Actual portfolio allocations will vary within the above ranges given the Investment Committee's outlook for optimal returns given prevailing market conditions.

Equity: Common Stocks

Alternative: Commodity, Real Estate, Precious Metals

Fixed Income/Cash: Bills, Notes and Bonds (Govt, Corporate, Domestic and Foreign)

Benchmarks*		
Asset Class	Benchmark	General Description
U.S. Equity	S&P 500	U.S. Domestic Stocks
International Equity	MSCI EAFE	Foreign Stocks
Alternative: Commodity	MSCI World Na Resources	Natural Resources
Alternative: Precious Metals	LBMA Gold Price	Gold
Fixed Income Govt Bond	US Bloomberg Long Treasury	US Bloomberg Long Treasury
Fixed Income Corporate Bond	Bloomberg US 5-10 Yr Corp	Corporate Bonds
Cash	1-3 Month US Treasury Index	ST Money Market

*Note: particular funds may be benchmarked to a more specific benchmark than listed above.

Taxation

Another Way is a part of Inland Counties Regional Center, Inc., a nonprofit public benefit corporation with a 501(c)(3) status and an exemption from taxation.

Duty and Conflicts of Interest

All members of Another Way, IRC staff, the Investment Committee and the Investment Manager have a duty of loyalty to Another Way and shall do the following:

- Act with reasonable care, exercise prudent judgment and must act for the benefit of Another Way and the Fund and place Another Way's interests before those of themselves or their employer.
- Determine that an investment is appropriate for, and consistent with, Another Way's written objectives, mandates and constraints for the Fund before making an investment recommendation or taking investment action.
- Have a reasonable and adequate basis, supported by appropriate research and investigation, for any investment analysis, recommendation or action.
- Promptly make full and fair disclosure of all matters that could reasonably be expected to impair their independence and objectivity or interfere with their duty to Another Way.
- Promptly disclose to Another Way any compensation, consideration or benefit that has been or will be received from, or paid to, others for the recommendation of, or investment in, any particular investment product or service.
- Promptly disclose to Another Way any ownership of, or financial interest in, any investment product or service that is recommended to Another Way.

III. MONITORING OF OBJECTIVES AND RESULTS

- A. All objectives and policies are in effect until modified by the Investment Committee, which will review them as needed for their continued appropriateness. The Investment Committee will meet as needed to review the performance of the Fund.
- B. If at any time the Investment Manager believes that any policy guideline inhibits his or her investment performance, it is his or her responsibility to communicate this view to the Investment Committee.
- C. The Fund's portfolio will be monitored by the Investment Committee on a periodic basis for consistency of investment philosophy, return relative to objectives and investment risk. Risk will be evaluated as a function of asset concentration, exposure to extreme economic conditions, and performance volatility. The Investment Committee will also regularly review the Investment Manager to confirm that the factors underlying the performance expectations remain in place.
- D. The Investment Manager will report the following information to the Investment Committee at least annually: total return (on time-weighted basis, before fees and after fees) in the aggregate, and disaggregated for the equity and fixed income portions, net of all commissions, and purchases and sales for the quarter. Regular communication concerning investment strategy and outlook is expected. Additionally, the Investment Manager is required to promptly inform the Investment Committee of any change in firm ownership or fundamental investment philosophy, any significant change in organizational structure or professional personnel, any change in manager(s) for the Fund's portfolio or any change in the Investment Manager's registration status with any regulatory agencies, such as the S.E.C.

Another Way Advisory Committee
Investment Objectives and Policies

- E. At all times the investment and management of the assets in the Fund's portfolio shall comply with the California Uniform Prudent Investor Act (*Probate Code* §§ 16045 *et seq*).

IV. PERIODIC INVESTMENT REVIEWS

- A. Fund performance will be measured by the asset allocation and appropriate benchmarks. Reviews must be periodic and not less than annually. Should performance in any particular asset class lag, changes should be considered.
- B. The Investment Manager is required to report to the Investment Committee any areas of underperformance. Watchlists shall be created for underperforming investments and any such investments shall be monitored and removed or replaced, if warranted.
- C. The Investment Committee will periodically review the related services provided to Another Way, including custodial services and consulting.

Another Way IRC
Budget Overview: FY 22-23 Operating Budget (Copy) - FY23 P&L
 July 2022 - June 2023

	Budget		Notes	PY Actual
Income				
40000 Donations				
Employee Donations	\$	43,000.00	Expecting employee donations to increase, will be hosting donor appreciation days.	\$ 29,663.15
			Need to spend down prior year grants first. Based grants on anticipated funding from Carpenter	
Foundation Grants	\$	85,000.00	Foundation, funding awarded by Annenberg and we will be reaching out to new donors.	\$ 171,575.00
Special Events	\$	130,000.00	Golf tournament income averages \$150,000 annually. \$25K received last fiscal year.	\$ 119,812.00
Special Events-Other	\$	36,200.00	Resume bowling tournament	\$ 14,300.00
Other Donations	\$	11,700.00	Unexpected checks received during holidays and year-end solicitation	\$ -
Total Income	\$	305,900.00		\$ 335,350.15
Expenses				
Program expense	\$	154,500.00	Target to spend down prior years' grants	\$ 74,085.75
Special Event Exp	\$	90,000.00	Last year includes some 2 prior year golf expenses	\$ 124,310.49
Special Events Exp-Other	\$	21,500.00	Resume bowling tournament & NEEB gift cards	\$ -
Operating Expenses	\$	87,900.00		\$ 83,206.55
Total Expenses	\$	353,900.00		\$ 281,602.79
Net Operating Income	\$	(48,000.00)	Spend down (\$150K) grants received in previous fiscal years, offset by +\$40K income generated from golf tournament and +\$60K income generated from other incomes, e.g. other special events, donations.	\$ 53,747.36

3.2.2 Compliance Review (continued)

V. Respite

7. Consumers ages 0-3 who are status 1 may qualify for respite if they have a diagnosis of a developmental disability. For children without a diagnosis, respite services may only be provided to allow a parent to develop the capacity to assist in his/her child in meeting his/her developmental needs while participating in appropriate Early Intervention activities.

BACKGROUND

In-home respite service means intermittent or regularly scheduled temporary non-medical care and supervision provided in the individual's home. For Early Intervention, respite hours are contingent upon relevance to the Early Start service and in relation to the child's area of developmental delay.

Per FR CFR 303.12 (a), "Early Intervention Services" means services that

- 1) Are designed to meet the developmental needs of each child eligible under this part and the needs of the family related to enhancing the child's development;
- 2) Are selected in collaboration with the parents; and

Per FR CFR 303.12 NOTE after section (e): "Early Intervention services may include such services as the provision of respite and other family support services." Respite services are intended to:

For infants and toddlers less than three years of age in the Early Start Program, respite may only be provided to enable parents to receive other early intervention services designed to meet the specific needs outcomes on the child's IFSP.

Respite categorized as an "Other" service. "Other" services are required to be purchased only when they are necessary for a family to benefit from a required service.

RESPITE SERVICES PROCEDURES

CRITERIA

Respite is available for consumers who are status 2 or have an established risk condition. For children without a diagnosis of a developmental delay, the parent(s) shall provide proof, documentation, and/or verification of a attendance of family training as defined in 303.12(d)(3) when using respite services.

AMOUNT OF SERVICES

The number of hours of respite which are recommended for the child will be determined by the needs and outcomes identified for the child and the amount of time required for parents to participate in Early Intervention parent training activities.

Generic services and natural supports (extended family, friends, and co-ops) must be explored and secured prior to IRC's purchase of respite services. Foster families must be referred back to the foster family agency or CSW for support. Family members who are foster parents must be referred to Kin Care for support.

Generic or community resources include but are not limited to:

- Private insurance or Medi-Cal which may provide nursing care;

NURSING: If a family is receiving EPSDT hours, IRC will consider those hours.

IRC may not substitute hours when nursing agency is unable to fulfill the hours child has qualified for. Family should be referred to Department of Managed Health Care if there are concerns with insurance funded services.

- IHSS can be considered a generic resource when the approved IHSS hours meet the respite needs as identified in the IFSP [WIC 4686.5(a) (5) and 4659(c)].

PROCESS FOR RESPITE APPROVAL

New request: Service coordinator will provide parents with respite questionnaire and once it is completed, request case consultation with program manager for program planning and recommendations. The respite reference guide may be consulted, but each request will be considered based on individual merits.

On-going service continuation: Service coordinator will request a new respite questionnaire to assist with program planning and recommendations based on new/current information and reports. The respite reference guide may be consulted, but each request will be considered based on individual merits.

Upon recommendation and approval of respite services, the service coordinator will follow respite procedure instructions (A Parent Requested Respite, Now What?). Like any other service, Respite services are to be reviewed at each IFSP meeting. The planning team, vendor reports, review by Early Intervention service coordinator, and consumer/family feedback will serve as the mechanism for evaluating the effectiveness of the service. If the duration of the service exceeds six months, the purchase of the service will need to be evaluated every six months or more frequently as recommended by the IFSP team.

RESPITE SERVICES QUESTIONNAIRE

In-home respite service means intermittent or regularly scheduled temporary non-medical care and supervision provided in the individual's home. For Early Intervention, respite hours are contingent upon relevance to meeting the IFSP Outcomes and in relation to a child's developmental disability. Please fill out this form to help us understand more about your request for respite care. Return this form to your service coordinator.

1. Describe the reason why you feel you need respite services:
2. What do you feel is the difference between your child's care and that of a child the same age, without special needs?
3. Who is currently assisting you in caring for your child?
4. What type of care do you currently use for your other children without special needs?
5. If you are a single mother/father, what role does the child's other parent have in your child's life?
6. Who are you planning on using to provide respite services for you?
7. How are you planning on using your respite hours?

Parent Signature: _____

DATE: _____

Consumer Name: _____

UCI: _____

RESPITE AUTHORIZATION WORKSHEET

Consumer: _____ Date: _____

ISC: _____ Eligibility _____

**PLEASE INDICATE RELEVANT FACTORS IN ONE
OR MORE AREA(S)**

(Submit with the corresponding parent request)

Medical:
Behavioral:
Self-Care:
Care Giver Conditions:
Family Stress Factors:
Action Plan for Increased Respite Levels over 30 Hours:

REFERENCE GUIDE FOR RESPITE LEVELS OF SERVICE

LEVEL A

Up to 8 hours per month of respite will be considered if one or more of the following is present:

- A.1** **MEDICAL:** Consumer has special medical needs, excluding follow-up and/or therapy appointments.
- A.2** **BEHAVIORAL:** Consumer's behavior is difficult to manage, e.g., resistance, tantrums, etc. beyond what is expected for children this age.
- A.3** **SELF-CARE:** Consumer requires supervision or assistance with self-care needs related to the consumer's delay or disability.
- A.4** **CARE GIVER CONDITION:** Care giver identifies stress related to the consumer's disability.
- A.5** **FAMILY STRESS FACTORS:** Family has been participating in consumer's Early Intervention Services related to meeting the child's IFSP outcomes. Caregiver requires time to research child's disability or to engage in family support activities (i.e. parent support group, FRN).

LEVEL B

Up to 10 hours per month of respite will be considered if Level A is met and one or more of the following is present:

- B.1** **MEDICAL:** Consumer has medical condition(s) requiring ongoing supervision beyond age expectations, e.g., requires equipment periodically, frequent hospitalizations and severe uncontrolled seizures.
- B.2** **BEHAVIORAL:** Consumer is demonstrating intermittent challenging or atypical behavior(s) beyond age expectations (e.g., aggression, self-harm, disruptive/destructive behaviors, extreme irritability and atypical behavior related to a diagnosis).

- B.3 SELF-CARE:** Consumer requires constant prompting or assistance in two or more self-care areas beyond typical age expectations or physical challenges beyond age expectations (to be considered for consumers over 18 months of age).
- B.4 CARE GIVER CONDITION:**
- ✓ single parent with limited social supports, or
 - ✓ Parent diagnosed with a developmental disability, or care giver has physical, psychiatric or medical condition and has no other supports, causing more difficulty in caring for consumer
- B.5 FAMILY STRESS FACTORS:**
- ✓ family is experiencing significant disruption related to the consumer's disability, or
 - ✓ Care giver requires hours to attend regular support groups or counseling.
 - ✓ Primary caregiver requires hours to attend to medical appointments related to physical, psychiatric, or medical condition that impacts their ability to care for the consumer.

LEVEL C

Up to 15 hours per month of respite will be considered if Level B is met and one or more of the following is present:

- C.1 MEDICAL:** Consumer is medically fragile and requires care on a periodic basis during the day and does not qualify for ongoing nursing care.
- C.2 BEHAVIORAL:** Consumer is demonstrating ongoing challenging or atypical behavior(s) beyond age expectations (e.g., aggression, self-harm, disruptive/destructive behavior, extreme irritability, atypical behavior related to a diagnosis).
- C.3 SELF-CARE:** Consumer has chronic medical and physical needs requiring total care (e.g., personal hygiene, eating/feeding, bathing and dressing). This is to be considered for children over age 18 months.
- C.4 CARE GIVER CONDITION:**
- ✓ Care giver has physical, psychiatric or medical condition

- requiring frequent treatment, or
- ✓ Care giver has a chronic physical, psychiatric or medical issues which impact his/her ability to care for the consumer and has no other supports, or
- ✓ Care giver is caring for another family member who is elderly or has a chronic and significant medical or mental condition and has no other supports, or
- ✓ Primary care giver with no assistance experiences sleep disruption for up to one hour every night; this disruption is beyond developmental expectations for the child's age and caregiver has no other supports.

C.5 FAMILY STRESS FACTORS:

- ✓ Two or more consumers in the family, or
- ✓ Consumer is at risk of being abused, or Family is receiving counseling for stress-related issues.

LEVEL D

Up to 20 hours per month of respite will be considered if Level C is met and one or more of the following is present:

- D.1 MEDICAL:** (Meets Level C.1 and No additional criteria identified)
- D.2 BEHAVIORAL:**
 - ✓ Consumer is exhibiting severe behavioral concerns and is injuring self and/or others, or
 - ✓ Consumer requires continuous supervision due to disruptive and destructive behaviors (e.g., constant biting, smearing feces, periodic wandering). Behaviors are beyond developmental expectations for the child's age.
- D.3 SELF-CARE:** (No additional criteria identified)
 - ✓ Family has been referred to and is applying for IHSS
- D.4 CARE GIVER CONDITION:** Consumer's care significantly interferes with sleep of care giver (e.g., requires treatment every two hours, feedings take over an hour).
- D.5 FAMILY STRESS FACTORS:** Severity and combination of Level C criteria may necessitate additional hours.

LEVEL E

Up to 25 hours per month of respite will be considered if Level D is met and one or more of the following is present:

- E.1 MEDICAL: Consumer is medically fragile and requires special care on an hourly basis during the day (e.g., suctioning, drip feedings).
 - ✓ Consumer has applied for nursing care
 - ✓ Nursing hours are insufficient to provide a break for caregiver
- E.2 BEHAVIORAL: (No additional criteria identified)
- E.3 SELF-CARE: (No additional criteria identified)
- E.4 CARE GIVER CONDITION: (No additional criteria identified)
- E.5 FAMILY STRESS FACTORS: The severity and combination of Level C and D criteria may necessitate additional hours.

LEVEL F

More than 30 hours per month of respite or over the family's regular monthly authorization for respite services is an exceptional time- limited service that would meet the exemption criteria as determined by the regional center per WIC 4686.5(a)(3)] and may be necessary under situations described below. An Action Plan must be written for this level of service. The IFSP must include an Action Plan describing how the family intends to reduce their respite needs over time. Hours must be reviewed and re-authorized on a quarterly to semi-annual basis, depending on the number of hours approved.

- G.1 MEDICAL: (No criteria identified)
- G.2 BEHAVIORAL: (No criteria identified)
- G.3 SELF-CARE: (No criteria identified)
- G.4 CARE GIVER CONDITION: Care giver or family has an emergency need due to death in the family, hospitalization or care giver or family member, or post hospitalization care.
- G.5 FAMILY STRESS FACTORS:
 - ✓ Severity and combination of Level F criteria, or
 - ✓ inability to locate the requested residential placement, or

- ✓ consumer has been evicted from daycare program, or
- ✓ Caregiver or family member requires hospitalization, or has a severe medical condition requiring special care in a particular month. This should be reviewed monthly.
- ✓ Family may receive additional one-time respite hours in order to attend a conference or workshop related to the consumer's disability. (Limited to 16 hours/conference; limited to 2 conferences /year, using the consumer's annual review year.)

RESPITE AUTHORIZATION WORKSHEET

Consumer: _____ Date: _____

S.C.: _____ Corresponding 1-11# _____

**PLEASE INDICATE RELEVANT FACTORS IN
ONE OR MORE AREA(S)**

(Submit with the corresponding Request for funding)

Medical:

Behavioral:

Self-Care:

Care Giver Conditions:

Family Stress Factors:

Action Plan for Increased Respite Levels over 30 Hours:

A Parent Requested Respite, Now What?

ISC GUIDE

1. Let PM know you had a Request for Respite. Title 19 the Request. You must respond to the request within 15 days.
2. Send Parent the Flyer “Respite Fact Sheet”, along with the “Respite Questionnaire”.
3. When you Receive the Questionnaire back from the Family, complete the respite worksheet. Contact your PM to discuss the reasons for the Respite Request. Have updated program reports and child’s diagnosis available.
4. If the Request is Denied, you will send an NOA within 5 days of notifying the parent. NOA must be sent no later than 20 days from the request.
5. If the Request is approved, let the family know and ask them if they have someone they want to use (Preferred) or if they need someone (Routine). Choose a Respite Vendor. Email them the IFSP, and let them know what you are looking for, as far as either Routine or Preferred. As soon as the vendor accepts the referral, you will complete the IFSP 05a, have parent sign it. Once you have a signed IFSP addendum, you may send the referral to the respite agency.
 - a. The referral will include the current IFSP and IFSP addendum as well as current infant program reports and social assessment.
6. Input POS (may change with Atlas). End date should be child’s 3rd birthday, however like the 805 infant program service this service needs to be reviewed at each IFSP review.
7. Make Sure to Add an Outcome for this Service to be reviewed at the Annual IFSP.