



**SOUTH CENTRAL LOS ANGELES REGIONAL CENTER  
MINUTES OF THE SPECIAL BOARD OF DIRECTORS MEETING  
March 23, 2010**

**I. MEMBERS PRESENT:**

Mr. Art Dansby	Ms. Davina Douthard	Mr. Bill West
Ms. Lisa Sanchez	Mr. Karen Washington	Ms. Manami Go
Mr. Fred Washington	Ms. Guadalupe Barerra	

**MEMBERS ABSENT:**

Mr. Carla Vega (excused)	Ms. Gabriela Valdovinos (excused)
Mr. Jabulani Leffall (excused)	Mr. Fred Washington (excused)
Ms. Desiree Boykin (excused)	

**STAFF PRESENT:**

Mr. Dexter A. Henderson	Mr. Reuben Lee	Mr. Roy Doronila
Fezem Shabaf	Daisie Flores	Leah Chin

**PUBLIC:**

Phylis McClean	Maria Peralta
Allan Smith, DDS	Dan Merrell
Rene Lee Austin – A & G Activity Services	JB Wagoner, Mid-Cities
Veronica Solano- The Jeffery Foundation	Cynthia Torres- Straight Path
Illona Hendrick	Karen Neal
Tim Lawson- Pals	Peggie Neal
Ken Richard, Solid Foundation	Renee Tims, Wright Road
Saadite Green- WAF, Inc	Beautina Robinson
Alyce Morris- The Jeffery Foundation	Victor Lira
Faye Williams	Paul Warren – Signs of Life
Carol Bennett	Ben Robbins
Stephanie Dinwiddie	Cheryl Johnson
Jennifer Wiltz, SMS Transportation	Nicole Farley - EAH
David P. Hood – Behavior Change Group	Gilbert Williams - EAH
Tammy Hood- ARC Mid Cities	Margarita Sanchez – Indep. Hands
Lara Okunubi, Ideal	

**CALL TO ORDER:**

The meeting was called to order by Board President Bill West

**II. APPROVAL OF BOARD OF DIRECTOR MEETING MINUTES FOR  
JANUARY 26, 2010**

Board Action:

To approve the minutes of the Board of Directors meeting for January 26, 2010

(M/S/C: Dansby /Douthard/ unanimous)

**IV. BOARD PRESIDENT REPORT:**

To accommodate the Vendor Forum, the Board President and SCLARC Reports were tabled until the next board meeting.

**COMMITTEE REPORTS**

**Finance:**

**As reported by Roy Doronila, Chief Financial Officer -**

Mr. Doronila, requested the board to review item 1C of the finance section of the agenda, ratification of adoption of CalPERS 457 Plan (Deferred Compensation Plan), which was discussed and adopted at the last Committee of the Whole meeting on February 16, 2010 via telephone conference call. The CalPERS 457 Plan is an additional option for tax deferred savings account for SCLARC employees. Employees currently have available a 401(k) savings program via Principal Life Insurance. There is no fiscal impact to the agency but another way for employees to save more money. Mr. Doronila requested the board to ratify the adoption of the CalPers 457 plan for the employees of SCLARC.

Board Action:

To approve full implementation of the CalPers 457 Tax Deferred Compensation Program

( M/S/C: Douthard/ Sanchez)

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Mr. Doronila asked the board to review at the latest Sufficiency of Allocation Report (SOAR). The report reflects a projected expenditure in Purchase of Services (POS) in the amount of \$122.6 Million, this is \$3.3Million lower than last month.

The latest Financial Statements now reflects the A3 allocation which added \$2M to our budget. Our latest projected deficit in POS is \$2.9M. We expect to balance our budget in

Operations and POS. Mr. Doronila reported on the financial impact of the Trailer Bill Language. We are in compliance with the law and the changes are being implemented. As result of this, our POS expenditures are significantly lower.

**Consumer Services Issues:**

To accommodate the Vendor Forum, The consumer services issues were deferred .

**E. VAC Report**

In Lieu of the VAC Report information about important vendor issues were presented during the Vendor Forum.

**Consumer Advisory Committee**

As reported by Karen Washington for Desiree Boykin, CAC President. Ms. Washington addressed the board. The Consumer Advisory Committees of all the regional centers were invited by DDS to participate in a conference call regarding the pending closure of Lanterman Developmental Center. During this call the CAC members were able to give their opinion on what should happen or what should be implemented for Developmental Center (DC) consumers once they are integrated into the community. The CAC members provided a number of suggestions, including considering all medical needs, social integration, and vocational training consumers might need; make sure that appropriate nurses are at the group home service; the consumers are placed in. Have workshops and jobs in place for the consumers when they come out of Lanterman. Also that social gatherings should take place so that consumers from the DC can meet consumers in their community. They also felt that the DC should not be closed and also to take into consideration the input of the consumers at the DC and also speak to the consumers service coordinators to ensure that the needs of the consumers are met. Ms. Washington also stated that for those consumers that don't want to move, the DC should consider converting into smaller homes instead, so that the consumer can stay in familiar surroundings.

**Executive Director Report**

To accommodate the Vendor Forum, The Executive Director Report was tabled until the next board meeting

**G. Good of the Order**

There was no public input and SCLARC Board Meeting opened the floor for the Special Vendor Forum.

## **H. Special Vendor Forum**

The Executive Director welcomed the public and board to SCLARC Vendor Forum. The Vendor Forum was created to allow our service provider community to address SCLARC Board with issues and questions that are of great concern to the vendor community. Also it will allow our Board Members to hear directly from the vendor community and establish a dialogue to exchange ideas to address the challenges and difficulties that arise in our system. This same format will be used with our parent community to allow them to address the board of directors as well. Lastly, the Executive Director also addresses the issue that the forum was created to discuss systemic issues as a whole for the vendor community and not to discuss personal issues.

The VAC Chair addressed the board and the public. The VAC Chair thanked the board for creating this Forum. The VAC Chair also stated that she received many phone call and emails from the vendor community and from those communications realized that many of the vendors are frustrated and concerned about the system and what is occurring. The questions that will be addressed and presented are all questions identified by the vendor community. The following service providers below addressed the board in the following areas:

ADHC & Health Services – Faye Williams  
Day Services- Tim Lawson & Lara Okunubi  
Early Start- Stephanie Dinwiddie & Veronica Solano  
Employment- Davina Douthard  
ILS/SLS- Maria Peralta  
Residential- Illona Hendricks & Carol Bennett  
Respite Services- Dan Merrell & Victor Lira  
Social Recreation- Renee Lee & Jimmy Austin  
Transportation- Ken Richard & Jennifer Wiltz

### **ADHC & Health Services – Faye Williams**

Dr. Williams addressed the board and stated that one of the threats to the system and because residential services are so important to the community is what happens to the budget and the services? These services are still being provided to the consumers but it is the residential providers and families who are absorbing the cost of these services.

What is an ADHC? An ADHC is an Adult Day Health Center System. An ADHC is a system that looks at every benefit that Medicaid covers. At this point in time ADHC is being transferred to Medi-care, but how many of our consumers have Medi-care. The Board President asked Dr. Williams, that under the new health plan \$ 500 million would be cut from Medicare and put into the new health care system. Dr. Williams stated that ADHC is a saving system, for a day in an ADHC it cost \$ 76.27, which covers physical therapy, occupational therapy, speech therapy, a dietitian, a psychologist. If you were to receive any of these services separately it would cost more then at an ADHC. The ADHC bundles the services and reduce the cost.

Ms. Douthard asked what would happen if the ADHC would close, where would the consumers go? Dr. Williams stated that most consumers would go to specialized nursing facilities and/or hospital settings.

The Executive Director stated that ADHC programs are so important to the system because we the general fund dollars do not pay for the services from ADHC's.

***Ms. Douthard asked regional center staff, about the cost of eye glasses and dental services for consumers.*** Fezem Shabaf, Nurse Manager stated that service coordinators can refer consumers to Dr Rouintan, Dental Consultant, for dental screening and if needed she will refer if needed consumers to free dental clinics. On case by case bases, SCLARC would consider funding dental services based on recommendations from our Dental Consultant. Dental screening are held monthly. on Clinical has a list of vision care centers that will provide free eye exams and free glasses for SCLARC consumers. SCLARC must provide a referral letter and this letter will cover free eye exams, frames and glasses.

#### **Day Services- Tim Lawson & Lara Okunubi**

Mr. Lawson and Ms Okunubi addressed the board. The first question presented by Mr. Lawson is as follows:

***1. There has been a delay in POS's being submitted by Service Coordinators. This delay has caused problems especially with forensically involved clients. When we have a delay most of these clients fall back into the jail system. What can we do to decrease the time delay to get clients into a day program setting where they can succeed?*** If a consumer urgently requires the start up of a new program service that the service coordinator may utilize our emergency authorization procedure. If providers have issues they may speak to the service coordinators program manger or with Mr. Jesse Rocha, Assistant Director of Children and Adult Services or you could also contact Mr. Lee directly.

***2. With regards to the trailer bill and transportation. It has been mentioned that clients need to go to a program that is closer to their residence. What if the care provider and client are happy where they are currently going? Does this violate client rights?***

Mr. Lee states that it does not violate the client's rights and that it has to do with the program that is least costly and meets all the needs of the consumer and quality of service. The law does state the least costly service does need to be provided. Also we are mandated to first find a generic resource and if generic resource is not available the least costly service will be provided. Also with the transportation of minors, the family has the responsibility unless they can show that there is hardship and can not afford it. ***Ms. Okunubi addressed the issue of accountability and providing the best environment for consumers and also stated the emotional distress that consumers would go thru if they are removed from programs that they enjoy and are adjusted to. What if the client is happy, why should they be moved?*** Mr. Lee, again stated that by law we are mandated to

find the least costly service and we have to look at the least restrictive environment and ensure that our consumers are able to adapt to that type of environment.

**3. Implementing the Senior Option. A 1:8 ratio possess a dilemma for Behavior Management programs. How can we justify working in the community with a ratio of this disparity and maintain the care, welfare, safety and security for the clients in our care?** The Executive Director stated that this was just an option. Jimmy Williams of DDS also said that this is optional. If a day program feels that they can not provide this service there is no obligation to do so. According to Denyse Currigh of DDS, the trailer bill language is IPP driven, not vendor driven. So if a consumer requests the senior program, it is the RC who has to find a day program that can meet the consumer's need.

**4. Catchment area issues. It has been mentioned that Regional Centers will not be referring clients to programs outside of the catchment area. What if there are no programs to meet the client needs but there is a program that is located in an area that is close to the catchment area?** The Executive Director indicated that the center makes every effort to place SCLARC consumers within our service area first. However, if there are no programs within our area that meet the needs of the consumer outside area alternatives will be considered. Once the Center has indentified that certain program needs are not adequately being addressed within our own community the Center will also initiate our procedures to develop programs within the community.

#### ***Early Start – Stephanie Dinwiddie & Veronica Solano***

**1. Will the authorization system be streamlined to address concerns around the gap between clients being authorized for services and subsequently being assigned an actual start date?** Ms. Dinwiddie stated that it is very critical to start services for an early start client and the timeline for authorization seems to take a long time to proceed. Ms. Tollea Marshall, Early Start Program Manager answered that we have 45 days to complete the intake and the initial IHSP and another 30 days to implement the service. We are looking at 2 to 3 months from the initial visit with the child to complete ALL eligibility requirements established by our regulations. Unfortunately, because of workload and documentation requirements we are not able to start services much sooner than we are presently doing.

**2. With diminished resources will the ratio of 1:3 be revisited by DDS for center-based instruction?** Ms. Marshall stated, that we have no knowledge that DDS is looking into changing this. These are ratios set and required by DDS. We do not have the authority of changing this.

**3. Ms. Solano stated that when parents inquire for services, they only received verbal statement that regional center has no money for new services. She understands that they might not qualify for certain services but does not understand why this is being said to the parent community?** Ms. Marshall stated that this is not correct and to please inform her who is saying such things to parents as they deserve better information then what is being said to them. The Executive Director stated that we need to hear from our

vendors if this misinformation is being stated and that it is not about getting staff in trouble but it is more about retraining our staff correctly.

***ILS/SLS – Maria Peralta***

1. ***Why was Independent Living Services limited to 6 months as part of the cost containment measures when it was not part of the trailer bill language at the time?***  
Mr. Lee stated that during the time the trailer bill was coming out, SCLARC was in the process of redoing our POS manual, and that was part of the changes that was implemented in the manual. We have consumers who have been in the system for over 20 years, and are still receiving ILS services and still working on the same objectives.
2. ***ILS/SLS providers should require their employees to be put on the DMV Pull Notice Program to monitor their driving records if they transport consumers in their own vehicles.*** Dr. Bowie stated that this would have to be implemented through the program design on the individual program.
3. ***Regional Center should require that all providers receive “Subsequent Arrest Records” from the Dept. of Justice and FBI so that they are informed when their employees commit crimes during the time that they are employed with the provider.***  
Dr. Bowie stated that the regulation do not support this for unlicensed programs except adult family home agencies.
4. ***Since Medi-Cal does not cover a lot of the services for clients, what resources does the regional center have available to assist clients?*** Fezem Shabaf, Nurse Manager indicated that both service coordinators and service providers are welcome to all the resources available in the clinical services division at there convenience. A wealth of information about generic and low cost community based services are available relating to dental, vision, medical and psychological issues just to name a few.

***Residential – Illona Hendricks & Carol Bennett***

***1. I have a level 4I and would like a clear understanding of what is required for the additional weekly staffing hours.*** Dr. Bowie stated that 36 additional staffing hours per week are required when there is a second consumer living in the facility. With three or more consumers living in the home 54 additional hours per week per consumer are required.

***2. What is the proper protocol when a client is referred to a residential facility from another regional center as a result of the residential facilities work ( i.e. marketing, making phone calls seeking a consumer to fill the empty space), then the residential provider follows the proper procedures and notifies the SC from the other center to notify SCLARC. The consumer is designated to need a level 4I for example, but when SCLARC receives the referral packet, they reclassify the referral to let’s say a lower level facility. The referral gets sent to another service provider without regard to the***

*residential facility that has done the work to get the referral.* Mr. Lee stated that every regional center is responsible for making an independent assessment for determining a service level of any consumer being placed in a residential facility.

### **Respite Services – Dan Merrell & Victor Lira**

**1. *The 3% rate reduction runs up to 6/30/10. What are the chances of this rate reduction extending beyond that date?*** Staff answered that this rate reduction would be implemented for another year.

**2. *How does SCLARC interpret the trailer bill in regards to socialization training? WSRC is still funding specialized supervision hours for after school daycare needs. Why doesn't SCLARC authorize that?*** Mr. Lee stated that it depends on how it is vendored and how it is used.

**3. *What are the new barriers for families to receive respite hours since the trailer bill took effect?*** Mr. Lee stated that we have a 30 hour cap.

### **Social Recreation- Renee Lee**

**1. *I recently had a death of a consumer. (He died of natural causes) I thought and his family also, that there would be some type of burial or funeral, but there was nothing. The family did not have any funds to have a funeral. In the future is there something I could do (perhaps a life or burial insurance policy) or what is the protocol when these types of events take place?*** Dr Bowie stated that there is a burial insurance that can be purchased; the vendor can work with Ms. Ricks in our Fiscal Department to get more information.

**2. *I recently had a spend-down for a consumer and was later advised that cash can only be used for a spend-down. ( I used a debit card) Perhaps this would be something vendors should be aware of in advanced.*** Mr. Lee stated that in the form that a vendor signs, it clearly states that they will not use debit/credit cards.

**3. *What is the ultimate plight of Social Recreation programs for the consumers of SCLARC?*** Mr. Lee stated that community resources are provided to consumers and regional centers are required to follow social recreation program mandated trailer bill that went into effect in October 2009. We continue to encourage consumers and families to access low cost community and generic social recreation programs.

**4. *Have any consumers' that have been affected by the suspension of services been evaluated to see what the after affects have been?*** Mr. Lee stated that unfortunately we do not have an answer to when the suspension of services for this particular service area would be lifted by DDS. We are in limbo as much as our providers are with this service area. We suggest that are providers write and contact your legislators. Mr. Lee also stated that it would take about a year to fully assess the impact on our consumers.

***Transportation – Ken Richard & Jennifer Wiltz***

***1. Some transportation companies would like to know if there have been transportation companies that have gone out of business.*** The Executive Director did state that there are a few transportation companies as well as some social recreation companies that have gone out of business due to the trailer bill changes.

***2. Companies have not had new referrals in 6 months or more.***

Mr. Henderson and Mr. Lee indicated that there are a number of factors which may be contributing to the reduced transportation referrals including low growth of consumers in the Regional Center, least costly trailer bill language, generic mandates and the elimination of transportation for minors.

***3. Consumer can not have a choice in transportation.*** Mr. Lee stated again, this goes back to the least costly vendor that is closest to the consumer's home and meets their need and this includes transportation.

***Employment – Davina Douthard***

***Many of consumers that want to work do not have proper transportation and do not feel safe taking public transportation.*** Mr. Lee stated that if there are consumers who are working and do not feel safe taking public transportation, historically we have funded for transportation for these consumers.

***General Questions***

***1. The DDS Budget Stakeholder workgroup meetings that are taking place to develop and implement the “Individualized Choice Budget”; who is included in the development process? Are parents and/ or caregivers, or consumers involved or going to be involved?*** The Executive Director stated that yes parents, consumers, are involved in the DDS Budget stakeholder workgroup meetings that are taking place to develop and implement the “Individualized Choice Budget”.

***2. What outcome or follow up will we receive from the Board of Directors based on our questions or concerns?*** Some of the issues will be followed up through the VAC while others may require board or administrative input and approval.

***3. Do we receive 30 day notice when a service is cancelled? We have lost 2 clients without knowing except by receiving a cancellation by mail. This causes staffing hardships especially when we receive less than a few days notice.*** Mr. Lee stated that this depends on who is the agent/requesting the change. Generally, a 10 day notice is

given when the Regional Center is the moving party. However, if the consumer or a parent gives notice then no notice is given.

***\*\*\*\*\*A major concern for the vendor community is that they do not feel comfortable letting senior management or the leadership team know about those service coordinators who are informing them that they are not going to refer consumer to their programs because their rates are too high. They have a fear of being placed on a black list by the service coordinators. SCLARC Staff reassured the Vendor Community that if they provided the name of those service coordinators who in fact are doing the after mentioned, an action will be taken and the names of the vendors will not be divulged. In order for SCLARC staff to take action, they need to know who is making such remarks. The VAC will also facilitate with this process for the vendor community.***

The Executive Director thanked all those present for their participation at the board meeting/vendor forum. Mr. West adjourned the March 23, 2010 board of directors meeting. The next board meeting is scheduled for May 25, 2010.

**Submitted by:**

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MARIA FIGUEROA

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DATE

**Approved by:**

\_\_\_\_\_  
FRED WASHINGTON  
BOARD SECRETARY

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DATE

