



SCLARC'S PERFORMANCE MEASURES FISCAL YEAR 2026–2027 PUBLIC POLICY OUTCOMES AND COMPLIANCE

Regional Center: South Central Los Angeles Regional Center
Fiscal Year(s): 2026–2027

OPTIONAL LOCALLY DEVELOPED PUBLIC POLICY MEASURES

Measure	Measurement Methodology	SCLARC's Baseline	Planned Activities
Increase the number of child day care center resources for school-age individuals served by SCLARC.	San Diego Information System (SANDIS); Uniform Fiscal System (UFS)	2025 SCLARC currently has 3 child day care centers available.	• Reach out to local child day care providers in SCLARC's catchment area. • Connect with local agencies such as Connections for Children and Child Care Alliance Los Angeles. • Vendor local childcare providers to assist families in keeping their children at home. • Provide vendorization assistance to potential service providers.

ATTACHMENT A: PUBLIC POLICY AND COMPLIANCE MEASURES

ATTACHMENT A: POLICY- Community Integration

Measure	Measurement Methodology	State Average	SCLARC's Baseline	Planned Activities
1. Number and percent of adults living independently with or without supports.	Client Master File (CMF) residence codes (12,13,14,15) data for status 2 adults (18 years old and above) residing in independent living and supported living.	2026 (June) 28,211 12.97%	2026 (June) 970 SCLARC adults live independently with or without supports (203 independent living; 767 supported living). This is 10.05% of all SCLARC adults (status 2 and U, age 18+).	• Continue to provide independent living training to individuals interested in becoming more self-reliant in specific areas.

Measure	Measurement Methodology	State Average	SCLARC's Baseline	Planned Activities
		2024 18,237 8.89%	2024 291 SCLARC individuals receive independent living services. This is 3.21% of all adult individuals living in home settings.	
2. Number and percent of adults residing in adult Family Home Agency homes.	CMF residence code (79) data for Lanterman eligible (status 2) adults (18 years old and above) residing in Adult Family Home Agency homes.	2026 (June) 1,497 0.69% 2025 (December) 1,434 0.67% 2024 1,481 0.72%	2026 (June) 21 SCLARC adults reside in adult Family Home Agency homes. This is 0.22% of all SCLARC adults (status 2 and U, age 18+). 2024 23 individuals reside in FHA-certified homes. This is 0.25% of all adult individuals living in home settings.	• Encourage existing FHAs to recruit additional family homes. • Increase the number of individuals placed in FHA-certified family homes.
3. Number and percent of adults residing in family homes (home of parent or guardian). Ages: • 18 to 35 years • 36 to 50 years • 51+ years	CMF residence code (11) data for status 2 adults (18 years old and above) residing in family homes (home of parent or guardian).	2026 (June) 155,011 71.27% 2025 (December) 150,577 70.79% 2024 143,730 70.03%	2026 (June) 7,372 adults reside in family homes (home of parent or guardian). This is 76.41% of all SCLARC adults (status 2 and U, age 18+). 2025 (December) 7,213 adults reside in family homes (home of parent or guardian). This is 76.09% of all SCLARC adults. 2024 6,836 adult individuals reside in family homes (home of parent or guardian). This is 75.30% of all adult individuals living in home settings.	• Advocate for the increased use of In-Home Supportive Services (IHSS) for individuals and families. • Assist families in securing SSI benefits as soon as possible when an individual becomes an adult. • Continue to contract with agencies that provide after-hours crisis response services. • Provide families with information regarding caregiver support, in-home support services, hospice care, and senior resources.
4. Number and percent of adults residing in home settings.	CMF residence code data for status 2 (18 years old and above) residing in: • Independent living • Supported living • Adult Family Home Agency homes • Family homes	2026 (June) 184,719 84.93% 2025 (December) 180,062 84.65%	2026 (June) 8,363 adults reside in home settings. This is 86.68% of all SCLARC adults (status 2 and U, age 18+). 2025 (December) 8,169 adults reside in home settings. This is 86.17% of all SCLARC adults.	• Continue to carry out activities specified in outcomes 1 through 3.

Measure	Measurement Methodology	State Average	SCLARC's Baseline	Planned Activities
		2024 172,962 84.28%	2024 7,577 adults reside in home settings. This is 85.79% of all adults served.	
5. Number and percent of minors living in facilities serving > 6.	Client Master File (CMF) residence code data for status 1, 2, and U minors residing in following facilities serving > 6: • Intermediate Care Facility/Developmentally Disabled (ICF/DD) • Skilled Nursing Facility (SNF) • Community Care Facility (CCF)	2026 (June) 107 0.04% 2025 (December) 88 0.03% 2024 52 0.02%	2026 (June) 6 minors live in facilities serving > 6. This is 0.04% of all SCLARC minors (status 1, 2, and U). 2025 (December) 4 minors live in facilities serving > 6. This is 0.02% of all SCLARC minors. 2024 3 minors reside in facilities with 6 or more beds. This is 0.02% of all children served.	• Develop new residential resources that serve four or fewer individuals and/or reduce the number of shared rooms. • Identify children at risk of institutional placement and develop local community resources to meet their identified needs.
6. Number and percent of adults living in facilities serving > 6.	CMF residence code data for status 2 adults residing in following facilities serving > 6: • ICF/DD • SNF • CCF (Residential Care Facilities for the Elderly not included)	2026 (June) 2,926 1.35% 2025 (December) 2,950 1.39% 2024 3,012 1.53%	2026 (June) 153 adults live in facilities serving > 6. This is 1.59% of all SCLARC adults (status 2 and U, age 18+). 2025 (December) 152 adults live in facilities serving > 6. This is 1.60% of all SCLARC adults. 2024 147 adults reside in facilities with 6 or more beds. This is 1.62% of all adults served.	• Continue to develop new residential resources that serve four or fewer individuals and/or reduce the number of shared rooms. • Increase development of 4-bed residential facilities that can meet the service needs of non-ambulatory individuals with chronic, yet stable medical issues. • Continue to disseminate, educate, and actively discuss living options for adults such as FHA, SLS, and small residential facilities as alternatives to large group living arrangements with individuals and their families. • Develop 4- to 6-bed ICFs for individuals with ongoing nursing needs. • Develop 5-bed ARFPSHNs for individuals with ongoing nursing needs.

ATTACHMENT A: COMPLIANCE- Early Start / Childhood

Measure	Measurement Methodology	State Average	SCLARC's Baseline	Planned Activities
1. Timely Access to Early Start Services • Percent of Individualized Family Service Plans (IFSP) completed within the federally required 45-day timeframe from receipt	Early Start Report (ESR) and Biennial DDS Monitoring data: • Date referral was first received, until the date the IFSP is signed and completed, including allowance of exceptional family circumstances.	TBD	2025 TBD 2024 100%	• Monitor Early Start intake, assessment, and IFSP timelines. • Provide supervisory review of cases approaching timeline deadlines. • Provide ongoing training to Early Start staff. • Implement corrective action when timelines are not met.

Measure	Measurement Methodology	State Average	SCLARC's Baseline	Planned Activities
of referral for all children under the age of three.	• Number of children under the age of three with completed IFSP within timelines compared to total number of children under the age of three with completed IFSP.			
2. Provisional Eligibility • Number of children who turn age 5 and continue regional center services through provisional eligibility.	Client Master File (CMF), Provisional eligibility (status U) and number of children with status code U beyond age 5.	TBD	2025 129	• Monitor children approaching age 5 under provisional eligibility. • Ensure timely review and documentation of eligibility status. • Provide families with information regarding provisional eligibility and next steps.

ATTACHMENT A: POLICY- Employment

Measure	Measurement Methodology	SCLARC's Baseline	Planned Activities
1. Number and percentage of individuals, age 16-64 with earned income.	Employment Development Department (EDD) and Client Master File (CMF) data • Number and percentage of status 2 individuals ages 16-64 with earned income as reported to EDD.	2023 SCLARC: 1,309 (13.43%) CA: 32,132 (15.20%) 2024 SCLARC: 1,340 (13.21%) CA: 32,936 (15.60%) 2025 SCLARC: 1,177 (11.10%) CA: Not yet available	SCLARC will collaborate with vendors and local businesses to increase the number of competitive, integrated employment opportunities for individuals. SCLARC will conduct an employment fair with service providers, community partners, job seekers, and employers.
2. Average annual wages for individuals ages 16-64.	EDD data • Average annual wages as reported to EDD for status 2 individuals ages 16-64.	2023 SCLARC: \$13,408 CA: \$14,251 2024 SCLARC: \$14,085 CA: \$14,902 2025 SCLARC: \$16,180 CA: Not yet available	SCLARC will collaborate with vendors and local businesses to increase the number of competitive, integrated employment opportunities that pay wages that are at minimum wage or above. SCLARC will conduct an employment fair with service providers, community partners, job seekers, and employers.

Measure	Measurement Methodology	SCLARC's Baseline	Planned Activities
3. Number of adults who entered competitive integrated employment following participation in a Paid Internship Program.	Data collected through Department survey (Welfare & Institutions Code (WIC) Section 4870(e)) of regional centers.	2024 SCLARC: 8 2025 SCLARC: 11	- SCLARC will work to increase the number of vendored resources that will work to secure paid internship opportunities for individuals that lead to CIE. - SCLARC will encourage employment and day program vendors to seek paid internship opportunities that will most likely lead to competitive, integrated employment.
4. Percentage of adults who entered competitive integrated employment following participation in a Paid Internship Program.	Data collected through Department survey (WIC Section 4870(e)) of regional centers.	2024 SCLARC: 1% 2025 SCLARC: 1%	SCLARC will collaborate with vendors and local businesses to increase the number of competitive, integrated employment opportunities that pay wages that are at minimum wage or above. SCLARC will conduct an outreach campaign to promote the value, talent, and skills that people with intellectual disabilities bring to the workforce. SCLARC hosted three (3) employment fairs to promote competitive integrated employment.
5. Average hourly or salaried wages and hours worked per week for adults who participated in a Paid Internship Program during the prior fiscal year.	Data collected through Department survey (WIC Section 4870(e)) of regional centers.	2024 SCLARC: \$16.50 (20 hours) CA: \$16.00 2025 SCLARC: \$16.90–\$17.28 (12 hours) CA: \$16.90	SCLARC will encourage vendored resources to seek paid internship opportunities for individuals that pay above minimum wage and allow individuals to work as many hours per week as possible.
6. Average wages and hours worked for adults engaged in competitive integrated employment on behalf of whom incentive payments have been made.	Data collected through Department survey (WIC Section 4870(e)) of regional centers.	2024 SCLARC: \$17.28 (20 hours) 2025 SCLARC: \$18.00 (20 hours)	SCLARC will promote incentive payment opportunities to vendors and encourage employment and day program vendors to work to secure competitive, integrated employment for individuals. SCLARC will increase the number of vendored resources that will work to secure competitive, integrated employment opportunities.
7. Total number of 30-day, 6-month and 12-month incentive payments made for the fiscal year.	Data collected through Department survey (WIC Section 4870(e)) of regional centers.	12-month \$1,500/\$3,000 2023-2024 SCLARC: 10 2024-2025 SCLARC: 3 6-month \$1,250/\$2,500 2023-2024 SCLARC: 16 2024-2025 SCLARC: 14 30-day \$1,000/\$2,000 2023-2024SCLARC: 31 2024-2025 SCLARC: 25	SCLARC will promote the incentive program and encourage all types of vendors to assist individuals with finding integrated employment and maintaining the job once hired.

ATTACHMENT A: POLICY—Equity and Cultural Competency

Measure	Measurement Methodology	SCLARC's Baseline	Planned Activities
1. Expenditures: In-Home Purchase of Services (POS) Comparison of the POS expenditure amounts for individuals living at home to identify any differences across race, ethnicity and/or language when compared to the per capita average. Per capita Purchase of Service expenditures by individual's primary language.	Data source: Age-adjusted per-capita POS expenditures by FY from CMF and POS records. Population: Individuals living in family homes (residence codes 11, 78, 80) Definition: How much average spending differs between racial groups and language groups compared to the regional center's overall average.	Fiscal Year 2024/2025 Per Capita Authorized Services – All Ages: • English — 15,498 • Spanish — 20,507 Fiscal Year 2023/2024 Per Capita Authorized Services – All Ages: • English — 29,599 • Spanish — 21,135	• Continue to work with the Parent Advisory Committee to build stronger relationships with Spanish-speaking parents and increase communication regarding service needs. • Continue language-focused support groups that provide training and information to Spanish-speaking families. • Continue language-focused individual and family orientations for stakeholders new to the regional center system, thereby making them aware of regional center services and generic resources.
2. Expenditures: In-Home Respite POS. Comparison of POS expenditure amounts for all respite services delivered to people living in family homes, across race, ethnicity, and language, when compared to the per capita average. Note: \$0* In accordance with DDS Data De-Identification Guidelines, counts of 1 through 10 have been suppressed.	Data source: Age-adjusted per-capita POS expenditures by FY from CMF and POS records. Population: Individuals living in family homes (residence codes 11, 78, 80) who use respite services Definition: How much average spending differs between racial groups and language groups compared to the regional center's overall average.	Birth to age 2: • American Indian or Alaska Native: 2024/2025 – * (87.8% utilized) 2023/2024 – \$0* (0% utilized) • Asian: 2024/2025 – \$196,764 (68.7% utilized) 2023/2024 – ** (71.8% utilized) • African American: 2024/2025 – \$4,756,306 (67.2% utilized) 2023/2024 – \$4,356,611 (62.6% utilized) • Hispanic: 2024/2025 – \$33,132,362 (72.8% utilized) 2023/2024 – \$29,658,275 (68.4% utilized) • Native Hawaiian or Other Pacific Islander: 2024/2025 – * (73.7% utilized) 2023/2024 – * (40.8% utilized) • Other Ethnicity: 2024/2025 – \$2,241,320 (68.9% utilized) 2023/2024 – \$2,654,449 (63.4% utilized) • White: 2024/2025 – \$348,541 (68.2% utilized) 2023/2024 – \$219,871 (58.2% utilized) Age 3 to 21: • American Indian or Alaska Native: 2024/2025 – \$174,056 (63.8% utilized) 2023/2024 – ** (87.2% utilized) • Asian: 2024/2025 – \$944,856 (75.3% utilized) 2023/2024 – ** (70.7% utilized)	• Continue to work with the Parent Advisory Committee to build stronger relationships with monolingual parents and increase communication regarding service needs. • Continue language-focused support groups that provide training and information to monolingual families. • Continue language-focused individual and family orientations for stakeholders new to the regional center system, thereby making them aware of regional center services and generic resources.

Measure	Measurement Methodology	SCLARC's Baseline	Planned Activities
		• African American: 2024/2025 – \$24,068,476 (75.4% utilized) 2023/2024 – \$19,919,744 (71.1% utilized) • Hispanic: 2024/2025 – \$116,390,577 (79.0% utilized) 2023/2024 – \$87,868,676 (77.1% utilized) • Native Hawaiian or Other Pacific Islander: 2024/2025 – \$109,648 (58.9% utilized) 2023/2024 – ** (58.5% utilized) • Other Ethnicity: 2024/2025 – \$5,126,850 (72.9% utilized) 2023/2024 – \$3,887,257 (71.8% utilized) • White: 2024/2025 – \$1,251,920 (75.4% utilized) 2023/2024 – \$2,126,535 (83.5% utilized) <u>Age 22 and older:</u> • American Indian or Alaska Native: 2024/2025 – * (56.8% utilized) 2023/2024 – * (87.3% utilized) • Asian: 2024/2025 – \$2,100,467 (69.2% utilized) 2023/2024 – \$7,463,977 (76.6% utilized) • African American: 2024/2025 – \$44,385,255 (68.9% utilized) 2023/2024 – \$182,930,362 (71.9% utilized) • Hispanic: 2024/2025 – \$115,937,269 (67.2% utilized) 2023/2024 – \$162,922,830 (69.1% utilized) • Native Hawaiian or Other Pacific Islander: 2024/2025 – * (67.0% utilized) 2023/2024 – * (75.8% utilized) • Other Ethnicity: 2024/2025 – \$2,880,052 (58.4% utilized)	

Measure	Measurement Methodology	SCLARC's Baseline	Planned Activities
		2023/2024 – \$10,287,897 (73.9% utilized) • White: 2024/2025 – \$2,564,608 (68.4% utilized) 2023/2024 – \$31,395,068 (74.8% utilized)	
3. Service Utilization: Early Start. Per capita Early Start expenditures, separated and compared by race, ethnicity, and language preference.	Data source: POS expenditures and authorization amount by FY from CMF and POS records. Population: Early Start participants age 0 to 36 months Definition: How much utilization differs between racial groups and language groups, compared to the regional center's overall average.	TBD	• Continue reviewing POS expenditure data by race, ethnicity, language, and residence type. • Continue outreach to underserved and monolingual communities. • Use public feedback to identify barriers to service access and utilization.

ATTACHMENT A: POLICY—Individual Family Experience and Satisfaction

Measure	Measurement Methodology	State Average	SCLARC's Baseline	Planned Activities
1. Number and percent of individuals, by race/ethnicity, who are satisfied with the services and supports received by the family and family member.	Most recent National Core Indicator (NCI) data available: • Child Family Survey (CFS) • Adult Family Survey (AFS) • Family Guardian Survey (FGS)	CFS Hispanic/Latino Number suppressed. 65% Black/African American Number suppressed. 67% White Number suppressed. 68% Asian Number suppressed. 68% Native Hawaiian/Pacific Islander Number suppressed. 87% American Indian/Alaska Native	CFS Hispanic/Latino Number suppressed. 56% Black/African American Number suppressed. 66% White Number suppressed. 64% Asian Number suppressed. * Native Hawaiian/Pacific Islander N/A N/A American Indian/Alaska Native N/A	• Review NCI survey results by race/ethnicity. • Identify areas of concern and develop responsive action steps. • Increase family engagement and survey participation.

Measure	Measurement Methodology	State Average	SCLARC's Baseline	Planned Activities
		Number suppressed. 87% Other Number suppressed. 67% <u>AFS</u> Hispanic/Latino Number suppressed. 72% Black/African American Number suppressed. 78% White Number suppressed. 77% Asian Number suppressed. 78% Native Hawaiian/Pacific Islander Number suppressed. 74% American Indian/Alaska Native Number suppressed. 76% Other Number suppressed. 82% <u>FGS</u> Hispanic/Latino Number suppressed. 81% Black/African American Number suppressed. 81% White	N/A Other Number suppressed. * <u>AFS</u> Hispanic/Latino Number suppressed. 56% Black/African American Number suppressed. 73% White Number suppressed. 72% Asian Number suppressed. * Native Hawaiian/Pacific Islander Number suppressed. * American Indian/Alaska Native Number suppressed. * Other Number suppressed. 76% <u>FGS</u> Hispanic/Latino N/A N/A Black/African American Number suppressed. 93% White	

Measure	Measurement Methodology	State Average	SCLARC's Baseline	Planned Activities
		Number suppressed. 80% Asian Number suppressed. 87% Native Hawaiian/Pacific Islander Number suppressed. 88% American Indian/Alaska Native Number suppressed. 87% Other Number suppressed. 86%	Number suppressed. * Asian Number suppressed. * Native Hawaiian/Pacific Islander N/A N/A American Indian/Alaska Native N/A N/A Other Number suppressed. *	
2. Number and percent of individuals, by race/ethnicity, whose IPP/IFSP includes all of the services and supports needed.	Most recent National Core Indicator (NCI) data available • Child Family Survey (CFS) • Adult Family Survey (AFS) • Family Guardian Survey (FGS)	2023-2024 CFS 4,220 79% AFS 7,805 82% FGS TBD	2023-2024 CFS 217 77% AFS 236 83% FGS TBD Results by race/ethnicity: TBD	• Continue person-centered planning training. • Review feedback related to IPP/IFSP service needs. • Strengthen Service Coordinator follow-up and family engagement. • Increase family input in IPP development (AFS: 62% felt they had enough say vs. 81% CA).
3. Number and percent of individuals who feel that services and supports have made a positive difference in the life of their family member.	Most recent National Core Indicator (NCI) data available • Child Family Survey (CFS) • Adult Family Survey (AFS) • Family Guardian Survey (FGS)	2023-2024 CFS 7,923 81% AFS 13,494 84% FGS 5,062 88%	2023-2024 CFS 450 76% AFS 532 79% FGS 26 88%	• Review survey results and identify trends. • Continue improving service coordination and access to services. • Use survey feedback to guide quality improvement activities.

ATTACHMENT A: POLICY—Service Coordination and Regional Center Operations

Measure	Measurement Methodology	State Average	SCLARC's Baseline	Planned Activities
1. Vendorization - Percentage of vendorizations that met the regulatory 45-day timeline in the Decision Stage. - Average number of days from application submissions to final decision on vendorization approval.	Provider Directory and Vendorization Portal. Total number of vendorizations completed divided by the total number completed in 45 days or less. Average number of days from application submission to approval by the regional center.	TBD	TBD	- Monitor vendorization timelines. - Provide technical assistance to applicants. - Streamline internal review processes. - Improve communication regarding application requirements.
2. Medicaid Waiver Enrollment Of the total number of regional center individuals who meet 1915c eligibility, the percentage of those who are enrolled in a federal waiver, separated by waiver type.	CMF Status 2 and U; Department data on Medicaid 1915c waiver enrollment for both traditional and SDP waivers.	TBD	TBD	- Review waiver eligibility and enrollment data. - Provide staff training regarding waiver enrollment. - Monitor waiver enrollment trends.
3. Special Incident Reports (SIRs) are submitted within the required timeframes.	Department Special Incident Reports (SIR) reports – annual percentage of SIRs reported on time under Title 17 requirements. - Regional center timeliness - Vendor timeliness	N/A	N/A	- Provide ongoing SIR training to staff and vendors. - Monitor SIR reporting timelines. - Follow up on late reports. - Review SIR trends and corrective actions.

ATTACHMENT A: COMPLIANCE—Service Coordination and Regional Center Operations

Measure	Measurement Methodology	Achievements	Planned Activities
1. The regional center achieves an unqualified independent audit with no material finding(s).	Yes/No—based on regional center independent audit findings submitted to the Department by April 1.	Yes, based on regional center independent audit findings submitted to the Department by April 1.	Achieve unqualified independent audits with no material finding(s).
2. The regional center achieves substantial compliance with the Department fiscal audit.	Yes/No—based on the Department internal document criteria.	Yes, based on the Department internal document criteria.	Achieve substantial compliance with DDS fiscal audits.
3. The regional center operates within operations budget.	Yes/No—actual expenditures plus late bills do not exceed operations budget. Operations and Purchase of Service Claims Data	Yes, actual expenditures plus late bills do not exceed operations budget. Operations and Purchase of Service Claims Data	Continue to operate within OPS budget.

Measure	Measurement Methodology	Achievements	Planned Activities
4. Compliance with Vendor Audit Requirements per contract, Article III, Section 9. The number of vendor audits completed compared to the number of vendor audits required per Article III, Section 9 of the Regional Center/Department Contract.	Yes/No - met or did not meet the required number of vendor audits per the contract, based on documentation regional center reports to the Department.	Yes, met the required number of vendor audits per the contract, based on documentation regional center reports to the Department.	Continue compliance with vendor audit requirements per contract, Article III, Section 9.
5. Percentage of status 2 and U clients who have a Client Development Evaluation Report (CDER) updated or reviewed within the past 365 days.	Client Master File (CMF) and CDER Percentage of status 2 and U individuals with current (within 1 year) CDER for ages 3 and above.	22,136 individuals have current CDERs. This is 97.94% of the 22,602 individuals with status 2 and U. The statewide average is 94.34%. The baseline for this objective is June 2026 data.	Continue to produce current CDER/ESR reports.
6. Intake/assessment timelines for individuals ages 3 and older. The percentage of Intake/assessments completed on time compared to the total number of intake and assessments completed by the regional center within the reporting period.	CMF Calculated by first identifying the date of each status 2 (Lanterman Eligible) determination in FY 26-27, compared to the CMF date for intake/assessment (status 0).	1,254 individuals completed the intake process within 142 days. This is 92.55% of all 1,355 individuals participating in the intake process. 88 individuals (6.49%) completed intake between 143 and 240 days, and 13 individuals (0.96%) took more than 240 days. The statewide average for completion within 142 days is 69.31%. The baseline for this objective is June 2026 data.	Complete intake/assessment timelines for individuals ages 3 and above within 142 days.
7. Percentage of Individual Program Plans for individuals enrolled in a federal waiver that meet requirements outlined in WIC 4646 and 4646.5.	Department Monitoring: Home and Community Based Services (HCBS) Biennial Department review per WIC Section 4646.5 (c)(3). During biennial monitoring reviews, a random sample of IPPs is reviewed for those on the HCBS waiver (HCBS 1915c and 1915i SPA) to ensure compliance with requirements outlined in WIC 4646 and 4646.5. The percentage is the number of IPPs reviewed that meet compliance compared to the total sample.	100% based on the 2022 year-end data.	Continue to comply with WIC requirements when completing IPPs for waiver individuals.
8. Substantial compliance with HCBS Final Settings Rule: Community Settings requirements. The number of HCBS settings vendor audits completed compared to the number of HCBS vendors required to demonstrate compliance with the settings rules.	Regional center survey: Percentage of HCBS settings reviewed for compliance with final settings rules.	Number of settings requiring review: 323 Number of settings reviewed: 173 Percentage reviewed: 53.6% (173 of 323) Total CAPs issued: 0 SCLARC is utilizing a combination of individual interviews, provider/staff interviews, records reviews, IPP reviews and onsite reviews to determine HCBS Compliance.	- Continue HCBS compliance reviews. - Provide technical assistance to vendors. - Monitor corrective action plans. - Support providers in achieving compliance.



Attachment B

STATEMENT OF ASSURANCES

This is to assure that **South Central Los Angeles Regional Center (SCLARC)** Fiscal Year (FY) 2026-2027 Performance Measures activities were developed in accordance with the requirements specified in Welfare & Institutions Code (WIC) Section 4629 and the Department of Developmental Services' (Department) FY 2026-2027 Performance Measures Guidelines.

The performance measures activities were developed through a public process which included:

- The regional center's governing board conducted one or more public meetings regarding its prior period contract performance measures and outcomes.
- This meeting(s) included notification to the Department, individuals served, families and individual community members at least 30 days prior to the meeting.
- Providing meeting and meeting materials with language access and scheduled meetings at times and locations that promoted attendance by the public.
- Considering strategies to promote opportunities for public comment by diverse language, racial and ethnic communities [WIC Section 4629 (f)(1)].
- Providing information, in an understandable form, to the community about regional center services and supports, including budget information and baseline data on services and supports and regional center operations [WIC Section 4629(c)(B)(i)].
- Conducting a public meeting where participants provided input on performance measures and using focus groups or surveys to collect information from the community [WIC Section 4629(c)(B)(ii)]; and,
- Circulating a draft of the performance measures to the community for input prior to presentation at a regional center board meeting where additional public input was taken and considered before adopting measures [WIC Section 4629(c)(B)(iii)].

SCLARC Regional Center Executive Director: _____ *Dexter Henderson* (TB) _____

Dexter Henderson

Date: _____ 9/30/2026 _____