Harbor Regional Center Audit Committee Meeting

December 8, 2022

Meeting Minutes

In attendance: Joe Czarske (Chair), Angie Rodriguez, Laurie Zaleski, Judy Wada, Ute

Czemmel, Tes Castillo, Kristel Maikranz, and Randal Burris

Minutes:

The Audit Committee held a meeting on December 8, 2022 at 12:00 pm via Zoom.

Fiscal Year 2021-22 Audit

Kristel Maikranz from AGT presented the committee with the draft financial statements and draft board report for the Fiscal Year 2021-22. The committee reviewed the board report and the schedule of findings and questioned costs of the draft financial statements. Kristel reported that AGT will be issuing an unmodified opinion on the financial statement audit. AGT will also be issuing an unmodified opinion on the compliance audit relating to the major federal program. There were no material weaknesses identified and no significant deficiencies reported. This is the highest level of assurance that can be given.

The committee reviewed a comparison of the statement of functional expenses for Fiscal Years 2020-21 and 2021-22.

Following a discussion among the committee members and AGT, the committee approved the draft financial statements as presented. After approval of the draft financial statements, the audit committee members went into executive session with AGT.

Judy Wada will present the financial statements to the Executive Committee on January 3, 2023, and AGT will present the financial statements to the Board on January 17, 2023. Preparation of the Form 990 will then take place for submission to the Executive Committee on May 2, 2023 and subsequent distribution to the full board. Filing deadline for the Form 990 is May 15, 2023.

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Torrance, California

REPORT TO THE BOARD OF TRUSTEES

June 30, 2022

To the Board of Trustees Harbor Developmental Disabilities Foundation, Inc. Torrance, California

We have audited the financial statements of Harbor Developmental Disabilities Foundation, Inc. dba Harbor Regional Center, a California nonprofit corporation (the Foundation), as of and for the year ended June 30, 2022, and have issued our report thereon dated DATE. Professional standards require that we advise you of the following matters relating to our audit.

Our Responsibility in Relation to the Financial Statement Audit

As communicated in our engagement letter dated July 1, 2022, our responsibility, as described by professional standards, is to form and express an opinion about whether the financial statements that have been prepared by management with your oversight are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America. Our audit of the financial statements does not relieve you or management of its respective responsibilities.

Our responsibility, as prescribed by professional standards, is to plan and perform our audit to obtain reasonable, rather than absolute, assurance about whether the financial statements are free of material misstatement. An audit of financial statements includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Foundation's internal control over financial reporting. Accordingly, as part of our audit, we considered the internal control of the Foundation solely for the purpose of determining our audit procedures and not to provide any assurance concerning such internal control.

We are also responsible for communicating significant matters related to the audit that are, in our professional judgment, relevant to your responsibilities in overseeing the financial reporting process. However, we are not required to design procedures for the purpose of identifying other matters to communicate to you.

Planned Scope and Timing of the Audit

We conducted our audit consistent with the planned scope and timing we previously communicated to you.

Compliance with All Ethics Requirements Regarding Independence

The engagement team, others in our firm, as appropriate, our firm, and our network firms have complied with all relevant ethical requirements regarding independence.

Safeguards have been implemented to reduce the threats on our independence. These safeguards include continuing education related to independence and ethics requirements; external peer review of our firm's quality control system; our firm's internal policies and procedures which are designed to monitor compliance with the independence requirements; and the involvement of another firm member who is responsible for completing an independent technical review of the financial statements.

Significant Risks Identified

We have identified the following significant risks identified by the audit team during the brainstorming meeting and addressed during the audit:

- Improper revenue recognition standard audit risk
- Management override of internal controls fraud risk
- Multiple grant years open at once audit risk
- Fictitious vendors fraud risk

Qualitative Aspects of the Foundation's Significant Accounting Practices

Significant Accounting Policies

Management has the responsibility to select and use appropriate accounting policies. A summary of the significant accounting policies adopted by the Foundation are included in Note 1 to the financial statements. There have been no initial selection of accounting policies and no changes in significant accounting policies or their application during the year.

Significant Accounting Estimates

Accounting estimates are an integral part of the financial statements prepared by management and are based on management's current judgments. Those judgments are normally based on knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the financial statements and because of the possibility that future events affecting them may differ markedly from management's current judgments.

The most sensitive accounting estimates affecting the financial statements are the estimates of receivable – state regional center contract and allocation of functional expenses.

Management's estimate of the receivable – state regional center contract is based on management's historical experience. Management's estimate of the functional expense allocation is based on the proportion of staff salaries applicable to each program. We evaluated the key factors and assumptions used to develop the estimates and determined that they are reasonable in relation to the basic financial statements taken as a whole.

Financial Statement Disclosures

Certain financial statement disclosures involve significant judgment and are particularly sensitive because of their significance to financial statement users. The most sensitive disclosures affecting the Foundation's financial statements relate to lease commitments.

Significant Unusual Transactions

For purposes of this communication, professional standards require us to communicate to you significant unusual transactions identified during our audit. During the year we did not note any significant unusual transactions that needed to be brought to the attention of management.

Significant Difficulties Encountered During the Audit

We encountered no significant difficulties in dealing with management relating to the performance of the audit.

Uncorrected and Corrected Misstatements

For purposes of this communication, professional standards require us to accumulate all known and likely misstatements identified during the audit, other than those that we believe are trivial, and communicate them to the appropriate level of management. Further, professional standards require us to also communicate the effect of uncorrected misstatements related to prior periods on the relevant classes of transactions, account balances or disclosures, and the financial statements as a whole. Management has corrected all identified misstatements.

In addition, professional standards require us to communicate to you all material, corrected misstatements that were brought to the attention of management as a result of our audit procedures. None of the misstatements identified by us as a result of our audit procedures and corrected by management were material, either individually or in the aggregate, to the financial statements taken as a whole.

Disagreements with Management

For purposes of this letter, professional standards define a disagreement with management as a matter, whether or not resolved to our satisfaction, concerning a financial accounting, reporting, or auditing matter, which could be significant to the Foundation's financial statements or the auditors' report. No such disagreements arose during the course of the audit.

Circumstances that Affect the Form and Content of the Auditor's Report

For purposes of this letter, professional standards require that we communicate any circumstances that affect the form and content of our auditor's report. There were no such circumstances to communicate.

Representations Requested from Management

We have requested certain representations from management that are included in the management representation letter dated DATE.

Management's Consultations with Other Accountants

In some cases, management may decide to consult with other accountants about auditing and accounting matters. Management informed us that, and to our knowledge, there were no consultations with other accountants regarding auditing and accounting matters.

Other Significant Matters, Findings, or Issues

In the normal course of our professional association with the Foundation, we generally discuss a variety of matters, including the application of accounting principles and auditing standards, significant events or transactions that occurred during the year, operating conditions affecting the Foundation, and operating plans and strategies that may affect the risks of material misstatement. None of the matters discussed resulted in a condition to our retention as the Foundation's auditors.

This report is intended solely for the information and use of the Board of Directors and management of Harbor Developmental Disabilities Foundation, Inc. and is not intended to be and should not be used by anyone other than these specified parties.

AGT CPAs & Advisors Redding, California DATE

Torrance, California

FINANCIAL STATEMENTS AND SUPPLEMENTARY INFORMATION WITH INDEPENDENT AUDITORS' REPORTS

June 30, 2022 and 2021

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June 30, 2022 and 2021

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INDEPENDENT AUDITORS' REPORT

To the Board of Trustees
Harbor Developmental Disabilities Foundation
Torrance, California

Report on the Financial Statements

Opinion

We have audited the financial statements of Harbor Developmental Disabilities Foundation dba Harbor Regional Center, a California nonprofit corporation (the Foundation), which comprise the statements of financial position as of June 30, 2022 and 2021, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Foundation as of June 30, 2022 and 2021, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Foundation and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibility of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Foundation's ability to continue as a going concern for one year after the date the financial statements are issued.

INDEPENDENT AUDITORS' REPORT

(Continued)

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS and Government Auditing Standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether
 due to fraud or error, and design and perform audit procedures responsive to those risks.
 Such procedures include examining, on a test basis, evidence regarding the amounts and
 disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Foundation's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Foundation's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

INDEPENDENT AUDITORS' REPORT

(Continued)

Other Matters

Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The Schedule of Expenditures of Federal Awards as required by Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the Schedule of Expenditures of Federal Awards is fairly stated in all material respects, in relation to the financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated DATE, on our consideration of the Foundation's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Foundation's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Foundation's internal control over financial reporting and compliance.

AGT CPAs & Advisors Redding, California DATE



Harbor Developmental Disabilities FoundationSTATEMENTS OF FINANCIAL POSITION

June 30,	2022	2021	
ASSETS			
Cash and cash equivalents	\$ 22,490,752	\$	26,709,473
Cash - client trust funds (Note 4)	709,102		694,905
Corporate bonds	98,070		100,342
Net receivable - State Regional Center contracts (Note 5)	6,140,202		561,760
Receivable - Intermediate Care Facility providers	850,943		1,361,647
Prepaid expenses	677,856		850,315
Other assets	88,217		118,784
Due from State - accrued vacation leave benefits	1,582,008		1,438,840
Due from State - deferred rent	13,022,109		12,989,087
TOTAL ASSETS	\$ 45,659,259	\$	44,825,153
LIABILITIES AND NET ASSETS			
Liabilities			
Accounts payable	\$ 27,848,045	\$	28,083,296
Accrued and other liabilities	2,292,932	·	1,383,812
Accrued vacation leave benefits	1,582,008		1,438,840
Deferred rent	13,022,109		12,989,087
Unexpended client trust funds (Note 4)	709,102		694,905
Total Liabilities	45,454,196		44,589,940
Net Assets			
Without donor restrictions	205,063		235,213
Total Net Assets	205,063		235,213
TOTAL LIABILITIES AND NET ASSETS	\$ 45,659,259	\$	44,825,153

STATEMENTS OF ACTIVITIES

Years Ended June 30		2021		
SUPPORT AND REVENUE				
State Regional Center contracts	\$	298,460,983	\$	279,661,012
Intermediate Care Facility				
supplemental services income		2,511,016		3,007,561
Intermediate Care Facility administrative fee		44,870		58,987
Interest income		29,603		76,063
Cares Act Provider Relief funds		-		552,273
Donations and other income		204,179		299,317
Total Support and Revenue		301,250,651		283,655,213
EXPENSES				
Program services:				
Client services		2 98,176,153		280,814,404
Supporting services:				
General and administrative		3,104,648		2,826,369
Total Expenses		301,280,801		283,640,773
Changes in Net Assets Without Donor Restrictions		(30,150)		14,440
Net Assets - Without Donor Restrictions - Beginning of Year		235,213		220,773
Net Assets - Without Donor Restrictions - End of Year	\$	205,063	\$	235,213

Harbor Developmental Disabilities FoundationSTATEMENTS OF FUNCTIONAL EXPENSES

		Program Services		Supporting Services		
	-	Client		General and	-	Total
Year Ended June 30, 2022		Services	Α	dministrative		Expenses
Purchase of Services						
Residential care facilities	\$	103,355,109	\$	-	\$	103,355,109
Day program		73,587,120		-		73,587,120
Other purchased services		83,225,592		-		83,225,592
Total Purchase of Services		260,167,821		-		260,167,821
Salaries and Related Expenses:						
Salaries		21,778,949		1,484,188		23,263,137
Employee health and retirement benefits		5,927,832		403,969		6,331,801
Payroll taxes		308,211		21,004		329,215
Facility rent		4,466,666		448,546		4,915,212
Equipment and facility maintenance		1,561,110		106,386		1,667,496
Equipment purchases		1,419,766		96,754		1,516,520
General expenses		908,597		61,919		970,516
Contract/consulting services		592,968		40,409		633,377
Communication		510,942		34,820		545,762
Insurance		176,596		82,227		258,823
Office expenses		234,215		15,961		250,176
Legal fees		-		235,896		235,896
Printing		114,808		7,824		122,632
Accounting fees		-		52,000		52,000
Board expenses		-		12,222		12,222
Travel		7,672		523		8,195
Total	\$	298,176,153	\$	3,104,648	\$	301,280,801

STATEMENTS OF FUNCTIONAL EXPENSES (Continued)

	Program Services		Supporting Services	
	Client	-	General and	Total
Year Ended June 30, 2021	Services	,	Administrative	Expenses
Purchase of Services				
Residential care facilities	\$ 100,210,065	\$	-	\$ 100,210,065
Day program	73,514,399		-	73,514,399
Other purchased services	74,408,649		-	74,408,649
Total Purchase of Services	248,133,113		-	248,133,113
Salaries and Related Expenses:				
Salaries	19,523,770		1,417,740	20,941,510
Employee health and retirement benefits	5,282,017		383,560	5,665,577
Payroll taxes	206,522		14,997	221,519
Facility rent	4,203,985		536,815	4,740,800
General expenses	1,319,861		95,844	1,415,705
Equipment and facility maintenance	800,596		58,138	858,734
Communication	400,034		29,048	429,082
Equipment purchases	377,292		27,398	404,690
Insurance	126,893		62,062	188,955
Office expenses	172,168		12,504	184,672
Printing	133,707		9,710	143,417
Contract/consulting services	132,378		9,612	141,990
Legal fees	-		115,537	115,537
Accounting fees	-		51,200	51,200
Travel	2,068		151	2,219
Board expenses	-		2,053	2,053
Total	\$ 280,814,404	\$	2,826,369	\$ 283,640,773

STATEMENTS OF CASH FLOWS

Years Ended June 30		2022	2021
CASH FLOWS FROM OPERATING ACTIVITIES			
Change in net assets	\$	(30,150) \$	14,440
Adjustments to reconcile change in net assets	•	(,,	, -
to net cash provided (used) by operating activities:			
(Increase) decrease in:			
Net receivable - State Regional Center contracts		(5,578,442)	5,047,722
Receivable - Intermediate Care Facility providers		510,704	886,694
Prepaid expenses		172,459	(253,212)
Other assets		30,567	15,786
Increase (decrease) in:			
Accounts payable		(235,251)	2,743,497
Accrued and other liabilities		909,120	346,872
Unexpended client trust funds		14,197	176,265
Net Cash Provided (Used) By Operating Activities		(4,206,796)	8,978,064
CASH FLOWS FROM INVESTING ACTIVITIES		(50,000)	(50,000)
Purchase of investments Proceeds from sale of investments		(50,000)	(50,000)
Proceeds from sale of investments		52,272	50,597
Net Cash Provided (Used) By Investing Activities		2,272	597
Net Increase (Decrease) in Cash and Cash Equivalents		(4,204,524)	8,978,661
Cash and Cash Equivalents - Beginning of Year		27,404,378	18,425,717
Cash and Cash Equivalents - End of Year	\$	23,199,854 \$	27,404,378
COMPONENTS OF CASH AND CASH EQUIVALENTS			
Cash and cash equivalents	\$	22,490,752 \$	26,709,473
Cash client trust funds	•	709,102	694,905
Total Cash and Cash Equivalents	\$	23,199,854 \$	27,404,378
SCHEDULE OF NONCASH			
Increase in due from state - accrued vacation leave benefits	\$	(143,168) \$	(119,832)
Increase in due from state - deferred rent		(33,022)	(120,651)
Increase in accrued vacation leave benefits		143,168	119,832
Increase in deferred rent		33,022	120,651
Total	\$	- \$	-

 $\label{thm:companying} \textit{The accompanying notes are an integral part of these financial statements}.$

NOTES TO THE FINANCIAL STATEMENTS

1. NATURE OF ACTIVITIES AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of Activities Harbor Developmental Disabilities Foundation (the Foundation), doing business as Harbor Regional Center, was incorporated on May 3, 1977, as a California nonprofit corporation for the purpose of operating Harbor Regional Center and related activities. Prior to incorporation, the Foundation was operated by a medical association. The Foundation was organized in accordance with the provisions of the Lanterman Developmental Disabilities Services Act (the Act) of the Welfare and Institutions Code of the State of California. In accordance with the Act, the Foundation provides diagnostic evaluations, client service coordination, and lifelong planning services for persons with developmental disabilities and their families. The areas served include the Los Angeles County Health Districts of Bellflower, Harbor, Long Beach, and Torrance.

The Act includes governance provisions regarding the composition of the Foundation's board of trustees. The Act states that the board shall be comprised of individuals with demonstrated interest in, or knowledge of, developmental disabilities, and other relevant characteristics, and requires that a minimum of 50% of the governing board be persons with developmental disabilities or their parents or legal guardians; and that no less than 25% of the members of the governing board shall be persons with developmental disabilities. In addition, a member of a required advisory committee, composed of persons representing the various categories of providers from which the Foundation purchases client services, shall serve as a member of the regional center board. To comply with the Act, the Foundation's board of trustees includes persons with developmental disabilities, or their parents or legal guardians, who receive services from the Foundation and a client service provider of the Foundation.

The Foundation contracts with the State of California Department of Developmental Services (DDS) to operate a regional center for individuals with developmental disabilities and their families. The maximum expenditures under the contract are limited to the contract amount plus interest earned and other income. The Foundation is required to maintain records in accordance with the Regional Center Master Contract.

In the event the DDS finds that any regional center, including the Foundation, is not fulfilling its contractual obligations, the DDS may make reasonable efforts to resolve the matter with the regional center or to renegotiate its contract with the Foundation. If the DDS determines that all efforts to resolve the matter have been unsuccessful it may initiate specified procedures pursuant to California Welfare & Institutions Code §4635 to terminate its contract with the regional center. If necessary, to avoid disruption of the service program, the DDS may, pursuant to California Welfare & Institutions Code §4636, directly operate a regional center during the interim period between the termination of its contract with one governing board and the assumption of operating responsibility by a regional center contract with another governing board.

NOTES TO THE FINANCIAL STATEMENTS (Continued)

Basis of Accounting The accompanying financial statements have been prepared on the accrual basis of accounting. Revenues are recognized when earned and expenses are recognized when the obligation is incurred. Reimbursements from the State are considered earned when a qualifying expense is incurred.

Financial Statement Presentation The Foundation's financial statements are presented in accordance with Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) Topic 958, Not-for-Profit Entities. Under FASB ASC Topic 958, the Foundation is required to report information regarding its financial position and activities according to two classes of net assets based upon the existence or absence of donor-imposed restrictions, as follows:

Net Assets Without Donor Restrictions: Net assets available for use in general operations and not subject to donor (or certain grantor) restrictions.

Net Assets With Donor Restrictions: Net assets subject to donor (or certain grantor) imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Other donor-imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. All other donor-restricted contributions are reported as increases in net assets with donor restrictions, depending on the nature of the restrictions. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of activities as net assets released from restrictions. As of June 30, 2022 and 2021, the Foundation has no net assets with donor restrictions.

Cash and Cash Equivalents For purposes of the statement of cash flows, the Foundation considers all highly liquid debt instruments with original maturities of three months or less to be cash equivalents. In accordance with the State Regional Center contracts, bank accounts are in the name of both DDS and the Foundation.

Significant Concentrations of Credit Risk The Foundation maintains substantially all of its cash and temporary cash investments at two financial institutions. Accounts at the financial institution are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000. At times the Foundation's cash balances may exceed federally insured limits. The Foundation began to utilize the Insured Cash Sweep (ICS) service provided through one of the financial institutions. The ICS service places excess funds into demand deposit accounts at various ICS Network member institutions in increments below the FDIC insurance maximum of \$250,000. The Foundation has not experienced any loss and management believes it is not exposed to any significant risk on such accounts.

NOTES TO THE FINANCIAL STATEMENTS (Continued)

Corporate Bonds The Foundation accounts for corporate bonds at fair value. Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Accounting standards have established a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to measurements involving significant unobservable inputs (level 3 measurements).

The three levels of the fair value hierarchy are as follows:

- Level 1 inputs are quoted prices (unadjusted) in active markets for identical assets or liabilities that the Foundation has the ability to access at the measurement date.
- Level 2 inputs are inputs other than quoted market prices included in level 1 that are observable for the asset or liability, either directly or indirectly.
- Level 3 inputs are unobservable inputs for the asset or liability.

Corporate bonds are financial instruments that are measured at fair value on a recurring basis in the accompanying statements of financial position. Corporate bonds are generally valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available to comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar bonds, those corporate bonds valued under a discounted cash flow approach that maximizes observable inputs, such as current yields or similar instruments, but includes adjustments for certain risks that may not be observable, such as credit or liquidity. Therefore, the corporate bonds are classified within level 2 of the fair value hierarchy.

The Foundation held \$98,070 and \$100,342 at June 30, 2022 and 2021, respectively, in corporate bonds.

State Regional Center Contract Receivables and Advances Contracts receivable represent amounts due from the State for reimbursement of expenditures made by the Foundation under the annual regional center contracts. The Foundation considers all amounts receivable under grant contracts to be collectible; accordingly, no allowance for doubtful accounts exists.

The contract advance balance represents cash advances received by the Foundation under the annual regional center contracts. Amounts receivable from the State are offset against advances payable when the State notifies the Foundation that a right of offset exists.

NOTES TO THE FINANCIAL STATEMENTS (Continued)

Receivable - Intermediate Care Facility Providers The Center for Medicare and Medicaid Services (CMS) approved federal financial participation in the funding of day and related transportation services purchased by the Foundation for clients who reside in Intermediate Care Facilities (ICFs). CMS agreed that the day and related transportation services are part of the ICF service. Accordingly, all the Medicaid funding for the ICF residents must go through the applicable ICF provider. The Foundation receives a 1.5% administrative fee based on the funds received to cover the additional workload.

DDS has directed the Foundation to prepare billings for these services on behalf of the ICF's and submit a separate state claim report for these services. The Foundation was directed to reduce the amount of its regular state claim to DDS by the dollar amount of these services. Reimbursement for these services will be received from ICFs. DDS advances the amount according to the state claim to the ICFs. The ICFs are then required to pass on the payments received, as well as the Foundation's administrative fee, to the Foundation within 30 days of receipt of funds from the State Controller's Office.

Prepaid Expenses Payments made to vendors for services that will benefit the Foundation for periods beyond the current fiscal year are recorded as prepaid expenses.

Equipment Purchases In accordance with the State Regional Center contracts, all equipment purchased with contract funds is the property of the State. The Foundation is required to maintain memorandum records of equipment purchases and dispositions. Equipment purchases are recorded as supporting or program service expenses when they are incurred. The cost basis of the property utilized by the Foundation and owned by the State was \$1,190,893 and \$1,427,037 at June 30, 2022 and 2021, respectively. These balances include only the equipment that is sensitive or exceeds \$5,000 as required by System Award Management (SAM) guidelines.

Accrued Vacation Leave Benefits The Foundation has accrued a liability for vacation leave benefits earned. However, such benefits are reimbursed under the state contract only when actually paid. The Foundation has also recorded a receivable from the state for the accrued leave benefits to reflect the future reimbursement of such benefits.

Deferred Rent The Foundation leases office facilities under lease agreements that are subject to scheduled acceleration of rental payments. The scheduled rent increases are amortized evenly over the life of the lease. The deferred rent liability represents the difference between the cash payments made and the amount expensed since inception of the lease. The Foundation has recorded a receivable from the state to offset the deferred rent liability.

Unexpended Client Trust Funds The Foundation assumes a fiduciary relationship with certain clients who receive funds from private and governmental sources, including the Social Security Administration and Veterans Administration. These funds are used primarily to offset clients' out-of-home placement and living costs. These funds are held in a separate bank account and interest earnings are credited to the clients' balances.

NOTES TO THE FINANCIAL STATEMENTS (Continued)

Revenue and Revenue Recognition The Foundation recognizes contributions when cash, securities or other assets; an unconditional promise to give; or a notification of a beneficial interest is received. Conditional promises to give - that is, those with a measurable performance or other barrier and a right of return - are not recognized until the conditions on which they depend have been met.

A significant portion of the Foundation's revenue is derived from cost-reimbursable federal and state contracts and grants, which are conditioned upon certain performance requirements and/or the incurrence of allowable qualifying expenses. Amounts received are recognized as revenue when the Foundation has incurred expenditures in compliance with specific contract or grant provisions. Amounts received prior to incurring qualifying expenditures are recorded as an advance and included with the Net receivable - State Regional Center contracts balance on the statement of financial position. The Foundation received cost-reimbursable grants of \$81,412,231 and \$63,632,346 that have not been recognized in revenue at June 30, 2022 and 2021, respectively, because qualifying expenditures have not yet been incurred. See Note 5 for detail on the Net receivable - State Regional Center contracts balance.

Federal Grants The Foundation received two federal grants as of June 30, 2022, as follows:

U.S. Department of Education: The Foundation is a sub-recipient to State of California DDS with regard to the Special Education Grants for Infants and Families, which provides funding for early intervention services for infants and toddlers, through age 3, as authorized by Public Law 102-119. Revenue received from this program was \$884,517 and \$882,940 for the years ended June 30, 2022 and 2021, respectively, and is included in State Regional Center contracts revenue on the statement of activities.

U.S Department of Health and Human Services: The Foundation is a recipient of the CARES Act Provider Relief Fund made available to providers of health care services and supports, including agencies serving people with developmental disabilities. Allowable expenses under the Provider Relief Fund must be used to prevent, prepare for and respond to coronavirus (COVID-19), and for related expenses or lost revenues attributable to COVID-19. Funding cannot be used where another source has reimbursed or is obligated to reimburse these expenses or losses. Revenue received from this program was \$0 and \$552,273 for the years ended June 30, 2022 and 2021, respectively, and is included on the statement of activities.

Revenue Concentration State Regional Center contract revenue is revenue received from the State in accordance with the Lanterman Act. 99% of the Foundation's revenue is derived from this source.

Allocation of Expenses The statement of functional expenses allocates expenses for all funds to the program and supporting service categories based on a direct cost basis for purchase of services and salaries and related expenses. Operating expenses are allocated based on a percentage of salaries and related expenses per category to total salaries and related expenses, except for certain expenses that are designated as program or supporting services.

NOTES TO THE FINANCIAL STATEMENTS (Continued)

Income Taxes The Foundation has received tax-exempt status under Section 501(c)(3) of the *Internal Revenue Code*, and Section 23701(d) of the *California Revenue and Taxation Code*, and has been classified as an organization that is not a private foundation under Section 509(a) of the *Internal Revenue Code*. Accordingly, no provision for income taxes is included in the financial statements.

The Foundation accounts for income taxes in accordance with FASB ASC 740, *Income Taxes*, which clarifies the accounting for uncertainty in income taxes and how an uncertain tax position is recognized in financial statements. The Foundation analyzes tax positions taken in previously filed returns and tax positions expected to be taken in future returns. Based on this analysis, a liability is recorded if uncertain tax benefits have been received. The Foundation's practice is to recognize interest and penalties, if any, related to uncertain tax positions in the tax expense. There were no uncertain tax positions identified or related interest and penalties recorded as of June 30, 2022 and 2021, and the Foundation does not expect this to change significantly over the next 12 months.

Concentration of Labor The Foundation retains approximately 80% of its labor force through Social Services Union, Local 721, Services Employees International Union (Union). This labor force is subject to a collective bargaining agreement and, as such, renegotiation of such agreement could expose the Foundation to an increase in hourly costs and work stoppages. In July 2022, negotiations concluded between the Foundation and the Union, extending the current agreement to June 30, 2025.

Use of Estimates and Assumptions The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from these estimates.

Recently Issued Accounting Pronouncements In February 2016, the FASB issued ASU No. 2016-02, *Leases* (Topic 842), which requires lessees to recognize leases on the balance sheet and disclose key information about leasing arrangements. The new standard establishes a right-of-use (ROU) model that requires a lessee to recognize a ROU asset and lease liability on the statement of financial position for most leases with a term longer than 12 months. Leases will be classified as finance or operating, with classification affecting the pattern and classification of the expense recognition in the consolidated statement of activities. In May 2020, the FASB issued ASU 2020-05, which delayed the effective date of the standard to annual reporting periods beginning after December 15, 2021. Management is currently evaluating the impact of this standard on its financial statements.

Subsequent Events Management has evaluated subsequent events through DATE, the date on which the financial statements were available to be issued.

NOTES TO THE FINANCIAL STATEMENTS (Continued)

2. LIQUIDITY AND AVAILABILITY

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the balance sheet date, comprise the following:

June 30	2022			
Cash and cash equivalents	\$ 22,490,752	\$	26,709,473	
Net Receivable - State Regional Center contracts	6,140,202		561,760	
Receivable - Intermediate Care Facilities	850,943		1,361,647	
Total	\$ 29,481,897	\$	28,632,880	

Each regional center submits a monthly purchase of service expenditure projection to DDS, beginning in December of each fiscal year. By February 1st of each year, DDS allocates to all regional centers no less than 100% of the enacted budget for Operations and 99% of the enacted budget for Purchase of Service. To do this, it may be necessary to amend the Foundation's contract in order to allocate funds made available from budget augmentations and to move funds among regional centers. In the event that DDS determines that a regional center has insufficient funds to meet its contractual obligations, DDS shall make best efforts to secure additional funds and/or provide the regional center with regulatory and statutory relief. The contract with DDS allows for adjustments to the Foundation's allocations and for the payment of claims up to two years after the close of each fiscal year.

In addition, the Foundation maintains a revolving note (Note 6) to manage cash flow requirements as needed should there be delays in reimbursement for expenditures from DDS.

3. FUNDING LIMITS

The Foundation contracts with DDS to operate a regional center to provide services and support for individuals with developmental disabilities and their families. Contracts are open for the current and two prior fiscal years as follows:

Fiscal Years Ended	Contract Amount			Cumulative Expenses	Unexpended Balance	
June 30, 2022	\$	329,106,392	\$	291,123,550	\$ 37,982,842	
June 30, 2021	\$	289,000,034	\$	279,342,653	\$ 9,657,381	
June 30, 2020	\$	261,736,418	\$	257,197,107	\$ 4,539,311	

Management monitors the unexpended balance annually to avoid overspending the contract limits. A majority of the unexpended balance is related to purchase of service for client services and this amount could change due to delinquent billings. Management believes that total expenditures for each open year will not exceed the final approved State contract amount.

NOTES TO THE FINANCIAL STATEMENTS (Continued)

4. UNEXPENDED CLIENT TRUST FUNDS

The Foundation functions as custodian for the receipt of certain governmental payments and resulting disbursements made on behalf of the Foundation's clients. These cash balances are segregated from the operating cash accounts of the Foundation and are restricted for client support. Since the Foundation is acting as an agent in processing these transactions, no revenue or expense is reflected on the accompanying statement of activities.

The following is a summary of operating cash activity for the year ended June 30, 2022 and 2021:

Years Ended June 30	2022	2021
Social security and other client support received	\$ 2,901,634 \$	2,753,942
Residential care and other disbursements	2,900,950	2,541,027
Support Over (Under) Disbursements	684	212,915
Changes to reconcile support under disbursements to net cash used in support and care activities:		(27.2.1)
(Decrease) increase in receivable from state and federal agencies Increase (decrease) in amounts due to the Foundation	25,346 (11,833)	(25,044) (11,606)
Subtotal	13,513	(36,650)
Net Cash Provided for (Used In) Support and Care Activities	14,197	176,265
Cash - Client Trust Funds - Beginning of Year	694,905	518,640
Cash - Client Trust Funds - End of Year	\$ 709,102 \$	694,905

5. NET RECEIVABLE - STATE REGIONAL CENTER CONTRACTS

Contracts receivable represent amounts due from the State for reimbursement of expenditures made by the Foundation under the annual Regional Center contracts. Advances represent cash advances received by the Foundation under the annual Regional Center contracts. Amounts receivable from the State are offset against advances payable when the State notifies the Foundation that a right of offset exists.

Years Ended June 30		2021	
Contracts receivable	\$	87,552,433 \$	64,194,106
Less: Contract advances		(81,412,231)	(63,632,346)
Net Receivable - State Regional Center Contracts	\$	6,140,202 \$	561,760

The Foundation considers all amounts receivable under grant contracts to be collectible; accordingly, no allowance for doubtful accounts exists.

NOTES TO THE FINANCIAL STATEMENTS (Continued)

6. SHORT-TERM BORROWINGS

The Foundation began the year with a \$43,000,000 line of credit with Opus Bank, secured by an interest in all personal property and assets of the Foundation. Interest on the outstanding balance is payable monthly at the one-month secure overnight financing rate (SOFR) plus an interest rate margin of 2.15%, adjusting daily, with a floor rate of 3.00%. On May 24, 2022, the Foundation extended their line of credit with Pacific Premier Bank to expire June 30, 2023. Effective July 1, 2022, the limit was increased to \$45,000,000. No amount was drawn during the fiscal years ended June 30, 2022 and 2021, nor was any amount outstanding on the line of credit as of June 30, 2022 and 2021.

7. LEASE COMMITMENTS

The Foundation is obligated under operating leases for facilities and equipment with expiration dates through November 30, 2039. The facility leases generally require the lessee to pay all maintenance, insurance, and other operating expenses, and are subject to periodic adjustment based on price indexes or contract stipulated annual rate increases.

Future minimum payments under these leases are as follows:

			Less: Expected		
			Sublease		
Years Ending June 30	Del Harbor	Other Lessor	Income	Equipment	Total
2023	\$ 3,374,643	\$ 1,405,393	\$ (88,099)	\$ 175,093 \$	4,867,030
2024	3,414,977	1,447,602	(55,133)	29,182	4,836,628
2025	3,456,231	1,491,000	(4,605)	-	4,942,626
2026	3,486,793	1,535,813	-	-	5,022,606
2027	3,518,272	1,581,747	-	-	5,100,019
Thereafter	45 ,316,039	24,073,110	-	-	69,389,149
Total	\$ 62,566,955	\$ 31,534,665	\$ (147,837)	\$ 204,275 \$	94,158,058

Total rental expense was \$5,151,722 and \$4,962,084 for the years ended June 30, 2022 and 2021, respectively.

Related Party

The Foundation is leasing its main office facilities from Del Harbor Foundation (Del Harbor). Del Harbor is a separately incorporated California nonprofit corporation formed to facilitate and augment the coordination of services and programs of the Foundation or those which benefit clients of the Foundation and shares common management with the Foundation. The Foundation paid rent and operating expense reimbursement to Del Harbor of \$3,368,989 and \$3,293,851 for the years ended June 30, 2022 and 2021, respectively.

NOTES TO THE FINANCIAL STATEMENTS (Continued)

8. CONTINGENCIES AND LITIGATION

Contingencies

The Foundation is dependent on continued funding provided by the DDS to operate and provide services for its clients. The Foundation's contract with the DDS provides funding for services under the Lanterman Act. In the event that the operations of the Foundation result in a deficit position at the end of any contract year, the DDS may reallocate surplus funds within the state of California system to supplement the Foundation's funding. Should a system-wide deficit occur, the DDS is required to report to the governor of California and the appropriate fiscal committee of the State Legislature and recommend actions to secure additional funds or reduce expenditures. The DDS's recommendations are subsequently reviewed by the governor and the Legislature and a decision is made with regard to specific actions.

In accordance with the terms of the DDS contract, an audit may be performed by an authorized state representative. Should such an audit disclose any unallowable costs, the Foundation may be liable to the state for reimbursement of such costs. In the opinion of the Foundation's management, the effect of any disallowed costs would be immaterial to the financial statements at June 30, 2022 and 2021.

The Foundation has elected to finance its unemployment insurance using the prorated cost-of-benefits method. Under this method, the Foundation is required to reimburse the state of California for benefits paid to its former employees.

Legal Proceedings

The Foundation is subject to various legal proceedings and claims arising in the ordinary course of its business. While the ultimate outcome of these matters is difficult to predict, management believes that the ultimate resolution of these matters will not have a material adverse effect on the Foundation's financial position or activities.

9. **COMMITMENTS**

The Foundation contracts with various providers of services for the developmentally disabled. Significant unpaid commitments under these contracts as of June 30, 2022 and 2021, were \$2,159,144 and \$2,109,486, respectively.

NOTES TO THE FINANCIAL STATEMENTS (Continued)

10. RETIREMENT PLAN

Effective July 1, 2004, the Foundation restated its retirement plan and adopted a prototype profitsharing plan with a 401(k) feature. All employees are eligible to enter the plan immediately upon employment. The Foundation makes non-elective contributions to the plan on behalf of participants. These contributions are based on a percentage of compensation earned by participants during the plan year. Employee contributions are not required and are entirely voluntary. Participants can contribute up to the federal maximum limit. Beginning November 2016 the Foundation matches 50% of a participant's contributions up to the first 6% of salary, or a maximum employer amount of 3% of salary. Loans are permitted, subject to the terms of the plan document and applicable contract.

The total employer retirement expense for the years ended June 30, 2022 and 2021, were \$3,113,008 and \$2,627,084, respectively.

In addition, effective June 1, 2005, the Foundation established a 457(b) deferred compensation plan. The Foundation does not contribute to this plan; however, employees can contribute to this plan in addition to the retirement plan. Loans are not permitted.



SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

Year Ended June 30, 2022

		Assistance		
Federal Grantor/Pass-Through	Contract	Listing	Pass-Through	Disbursements/
Grantor/Program Title	Year	Number	Number	Expenditures
U.S. DEPARTMENT OF EDUCATION				
Passed Through State of California				
Department of Developmental Services -				
Special Education - Grants for Infants and				
Families with Disabilities (Part C)	21/22	84.181A	H181A210037	\$ 884,517
Total U.S. Department of Education				884,517
U.S DEPARTMENT OF HEALTH AND HUMAN SERVICES				
Provider Relief Fund	20/21	93.498	N/A	552,273
Total U.S. Department of Health and Human Services				552,273
Total Expenditures of Federal Awards				\$ 1,436,790

Basis of Presentation

The accompanying schedule of expenditures of federal awards includes the federal award activity of the Foundation under programs of the federal government for the year ended June 30, 2022. The information in this schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because this schedule presents only a selected portion of the operations of the Foundation, it is not intended to, and does not, present the financial position, changes in net assets, or cash flows of the Foundation.

Summary of Significant Accounting Policies

Expenditures reported on the schedule are reported on the accrual basis of accounting. Such expenditures are recognized following cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Part C expenditures are based on state contract budget allocations.

Indirect Cost Rate

The Foundation has elected not to use the 10% de minimis indirect cost rate allowed under the Uniform Guidance.



INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

To the Board of Directors
Harbor Developmental Disabilities Foundation
Torrance, California

We have audited in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, the financial statements of Harbor Developmental Disabilities Foundation dba Harbor Regional Center, a California nonprofit corporation (the Foundation), which comprise the statement of financial position as of June 30, 2022, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated DATE.

Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Foundation's internal control over financial reporting (internal control) as a basis for designing procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Foundation's internal control. Accordingly, we do not express an opinion on the effectiveness of the Foundation's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the Foundation's financial statements will not be prevented, or detected and corrected on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit, we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS (Continued)

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Foundation's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of This Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Foundation's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Foundation's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

AGT CPAs & Advisors Redding, California DATE

INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE IN ACCORDANCE WITH THE UNIFORM GUIDANCE

To the Board of Directors

Harbor Developmental Disabilities Foundation

Torrance, California

Report on Compliance for Each Major Federal Program

We have audited Harbor Developmental Disabilities Foundation's, (the Foundation) compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on the Foundation's major federal programs for the year ended June 30, 2022. The Foundation's major federal programs are identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with the requirements of laws, regulations, contracts, and grants applicable to its federal programs.

Auditors' Responsibility

Our responsibility is to express an opinion on compliance for each of the Foundation's major federal program based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about the Foundation's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for the major federal program. However, our audit does not provide a legal determination of the Foundation's compliance.

INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE IN ACCORDANCE WITH THE UNIFORM GUIDANCE (Continued)

Opinion on Each Major Federal Program

In our opinion, the Foundation complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on its major federal program for the year ended June 30, 2022.

Report on Internal Control Over Compliance

Management of the Foundation is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered the Foundation's internal control over compliance with the types of requirements that could have a direct and material effect on the major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for the major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the Foundation's internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

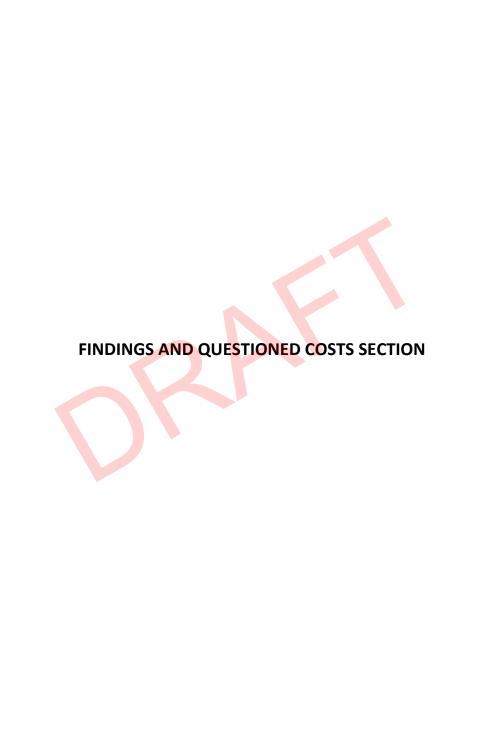
Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE IN ACCORDANCE WITH THE UNIFORM GUIDANCE (Continued)

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance, and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

AGT CPAs & Advisors Redding, California DATE





Harbor Developmental Disabilities Foundation

SCHEDULE OF FINDINGS AND QUESTIONED COSTS June 30, 2022

SECTION I
SUMMARY OF AUDITORS' RESULTS



Harbor Developmental Disabilities Foundation

SCHEDULE OF FINDINGS AND QUESTIONED COSTS

June 30, 2022

FINANCIAL STATEMENTS Type of auditors' report issued: Unmodified Internal control over financial reporting: Are any material weaknesses identified? Are any significant deficiencies identified? None reported Is any noncompliance material to financial statements noted? No FEDERAL AWARDS Internal control over major programs: Are any material weaknesses identified? Are any significant deficiencies identified? None reported Type of auditors' report issued on compliance for major program: Unmodified Any audit findings disclosed that are required to be reported in accordance with the Uniform Guidance?

Identification of major programs: Assistance Listing Number 84.181A Special Education – Grants for Infants and Families with Disabilities (Part C) 93.498 Provider Relief Fund

Assistance Listing Number

Threshold for distinguishing types A and B programs: \$750,000 Auditee qualified as low-risk auditee?



Harbor Developmental Disabilities Foundation

SCHEDULE OF FINDINGS AND QUESTIONED COSTS June 30, 2022

SECTION II FINDINGS FINANCIAL STATEMENTS AUDIT

None

SECTION III FINDINGS FEDERAL AWARDS AUDIT

None



Harbor Developmental Disabilities Foundation SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS June 30, 2022

None





HDDF BOARD DEVELOPMENT COMMITTEE December 14, 2022 MINUTES

ATTENDEES Present:	ATTENDESS Absent:
Ann Lee, Board Vice-President	Chris Patay, Board President
David Gauthier, Board Secretary	Dr. Jim Flores, Board Treasurer
Joe Czarske, Past President	
Patrick Ruppe, Executive Director	
Jennifer Lauro, Executive Assistant	

The Board Development Committee met via zoom on December 14, 2022 regarding the following items:

- 1. Board Development Committee meeting schedule for 2023
- 2. Trustee terms
- 3. Board Recruitment needs
- 4. Potential Candidate status
- 5. FY 2022-23 Officer Terms
- 6. FY 2023-24 Recruiting needs

The next meeting of the Board Development Committee is scheduled for 3:00 pm on January 11, 2023.

Harbor Regional Center <u>Client Advisory Committee</u> Noember 12, 2022 via ZOOM

Minutes

Members Present: Debbie Howard, Kelly Sutton,

HRC Staff Present: Judy Taimi

Other: Janelle Reyes (Lifesteps Foundation), Dee Prescott (Easter Seals)

Call to Order & Minutes Approved

Meeting was called to order and commenced at 1:10 p.m.

CAC Member Updates

We discussed our calendar for 2023. The committee would like to keep the schedule the same on a quarterly basis beginning in February. We will revisit the days that the committee can meet when more of the committee members are present. Kelly will put together the calendar for the meeting and will send it out to the members. We will continue our meetings via zoom until we are able to meet in person. The committee will also work on their efforts to recruit new members to the committee.

HRC Updates

Dee Prescott from Easter Seals provided a presentation on their agency's virtual community.

- This virtual community platform has the following tools that the individual's served by HRC can access all of their events online. This is a one-stop shop for social recreational activities, meet-up group, learning new skills by taking classes. Some of the tools or icons available are:
 - Live events
 - Chat Rooms
 - Classes offered during the day by the individuals we serve

- Create community to connect
- Person-centered creation and design
 - Create the content
 - Find what they are interested in so they can participate in what works for them
- Virtual archives are also available to the participants to access
- The committee members expressed that this would be something they will be interested in accessing for themselves as the pandemic continues to linger, they can participate with others online and it's a program that is geared towards their needs.

The team would like for a presentation for next CAC meeting: Vincente Miles, Emergency Preparedness.

Adjournment

Meeting adjourned at 2:00 PM.



Client Services Committee |

Meeting date | time November 22, 2022 | 6 PM | Meeting location ZOOM

ATTENDEES

Guadalupe Nolasco (Parent) Lucy Paz (Interpreter) Gordon Cardona (Individual) Fu-Tien Chiou (Parent)

Judy Taimi (HRC Staff)

AGENDA TOPICS

Time allotted | 6 PM to 7 PM | Agenda topic Review of New HRC Policies

- Socialization, Leisure/Recreational Services, Camping Services, Educational Services and Non-Medical Therapies Policy
 - o We reviewed the definitions of this policy and how it pertains to the individuals HRC serves
 - Promotes community integration and self-advocacy training
 - May include but not limited to: swimming, sports, clubs, dance lessons, tutoring services, martial arts, creative arts, music therapy, art therapy, equestrian therapy, day and overnight camp or community integration activities.
 - Educational services referring to those services typically provided by school districts for school aged children.
 - HRC's philosophy regarding these services that are available in typical social recreational community programs may not otherwise available to individuals with a disability. Services funded through the regional center should not replace or interfere with the time that families spend together in social activities. Funding for educational services should not be used for childcare.
 - Policy
 - Efforts were made to access typical programs but the program does not meet the individual's needs. The identified program is in an environment where typically developing individuals are present. The frequency/duration/cost of service is reasonable in comparison to typically developing individuals. Services are delivered within the boundaries of the State of California. Clear documentation that a publicly funded developmental/educational program for a child is unavailable.

- IPP team identified the social recreational need. The IPP team agrees to this additional support for the individual as services are intermittent/periodic and not continuous. Services are to be provided once per quarter during the IPP year.
- Personal Assistance/CARE Services Policy
 - We reviewed the definition of this policy and how it pertains to the individuals HRC serves
 - Providing an individual with appropriate and direct care or supervision in their preferred home and community settings. May also include 1:1 supervision/support in-home and community settings for an individual with significant safety, social deficits or behavioral challenges. May assist with community integration for adolescent and adult individuals.
 - O HRC's philosophy for this service is that personal assistance/care is not intended to meet the Respite need of a caregiver and is more appropriate to address the direct care and supervision needs of the individual regardless of a caregivers need for an intermittent break. For children, the need for personal assistance/care services is seen as a typical parental responsibility. Should not be authorized for the sole purpose of skill development.
 - Policy
 - Generic supports are to be accessed such as In-Home Support Services (IHSS). Interim funding may be considered while a plan to explore and pursue publicly funded resources is being implemented. The assessed need has been identified by the IPP team and the assessment tool was utilized to capture the need for the care and supervision required. May be used for community integration with specific time limited goals in an individual's IPP. Clear documentation in the individual's IPP that a family for a minor child is not able to meet all or part of the required specialized care and supervision due to the severity and intensity of the disability. Exceptions can be granted when the IPP team establishes a need to authorize services outside of the described criteria.
- The agenda for the meeting will be sent to the committee at least 1 week prior to the meeting.

Next Meeting: January 24, 2023 at 6 PM via ZOOM

Meeting Minutes November 2, 2022

Opening:

The regular meeting of HRC Self Determination Advisory Committee was called to order at 6:00PM on Wednesday, November 2, 2022 via Zoom. Quorum was not established.

Committee Member Present

Miriam Kang, Parent Deaka McClain, Client

HRC Staff Present

Antoinette Perez – Director of Children's Services Judy Taimi- Director of Adult Services Jessica Sanchez- Participant Choice Specialist Bryan Sanchez- Participant Choice Specialist Aurelio Lopez- Participant Choice Specialist Johnny Granados- Client Service Manager Patrick Ruppe, HRC Executive Director

SCDD Staff Present

Albert Feliciano

Abbreviations

HRC: Harbor Regional Center IF: Independent Facilitator PCP: Person-Centered Plan

SCDD: State Council on Developmental Disabilities

SDP: Self-Determination Program DVU: Disability Voices United FMS: Financial Management Service

DDS: Department of Developmental Services

RFP: Request for Proposal

SDAC: Self-Determination Local Advisory Committee

Visitors

Naomi Hagel, Phoenix Facilitation
Alex Garzon, Phoenix Facilitation
Abraham Flores Rojo, Phoenix Facilitation
Helen Reese, Phoenix Facilitation
Santiago Villalobos, Phoenix Facilitation
Jamie Van Dusen, Department of Developmental Services
Monserrat Palacios, Department of Developmental Services
Danielle Alvarado, Independent Facilitator
Carla Lehmann, Independent Facilitator
Reiko Umeda, Independent Facilitator

Meeting Minutes November 2, 2022

Tamara Pauly, Independent Facilitator Yolanda Gomez, Parent John Larsen, Parent Garret Ackermann, Homies Lucy Paz, Interpreter Wendy

Welcome:

Introductions of committee members and guests via the chat. Attendees informed the meeting would be short due to not meeting quorum. SDAC meeting is to be held on December 7th to vote on implementation funds, if quorum is confirmed ahead of time.

Approval of Minutes:

October 5, 2022 minutes were not posted for review due to not meeting quorum.

Harbor Regional Center Monthly Updates:

Jessica Sanchez briefly presented SDP data in a poster format called "Self-Determination Program Harbor Regional Center". Presentation shared via Zoom.

- o October 2022 Updates
 - Total PCPs: 21 Soft Rollout & 67 Open Enrollment
 - Certified Budgets: 34 Soft Rollout & 116 Open Enrollment
 - Spending Plan: 29 Soft Rollout & 84 Open Enrollment
 - Live Clients: 113
- O Questions/Comments:
 - No questions were asked.
- o Fair Hearings:
 - No updates with fair hearing at this time.
- o RFP update: Phoenix Facilitation
 - Owner of Phoenix, Naomi Hagel, provided overview of services provided. Introduced email (hrc@gophoenix.org) and website for accessing Phoenix. Self Advocate and SDP participant, Santiago Villalobos, shared his experience.

Partner Updates:

Office of Clients and Rights Advocacy – Johnanthony Alaimo

No updates were shared.

Meeting Minutes November 2, 2022

SCDD- Albert Feliciano

- Update regarding vacancy was shared, have received applications.
- Membership committee to meet in December, HHRC continues to share flyer regarding vacancy.
- SDP statewide orientations will resume in November. Can sign up via SCDD website.
- Trainings continue to be shared on Mondays. Next topic will cover bullying.

Statewide Updates:

No updates at this time.

Public Comments:

- IF asked if she could get paid via Option A if transition lasts past 2/1/23. HRC clarified that there is enough time now to be vendored for 099 services, as after 2/1/23 there will only be one payment method. IF will be paid out for work done up to 2/1/23.
- IF asked about vendorization issues. HRC clarified difference between Z codes and vendor codes.
- Another IF shared other RC's are holding trainings for IF's regarding 099 services. HRC shared they are open to conducting similar meetings.
- Chat in question asked about 099 services and transition support services.
 HRC provided clarification of services.

Next meeting: December 7, 2022 via Zoom 6PM – 8PM

Adjournment, Conclusion

Meeting was adjourned at 6:32 PM. Minutes submitted by Bryan Sanchez

Meeting Minutes December 7, 2022

Opening:

The special meeting of HRC Self Determination Advisory Committee was called to order at 6:00PM on Wednesday, December 7, 2022 via Zoom. Quorum was established.

Committee Member Present

Rosalinda Garcia, Parent
Miriam Kang, Parent
Deaka McClain, Client
David Oster, Client
Patricia Jones, Client
Sunghee Park, Parent, IF
Juliana Martinez, Parent
Johnanthony Alaimo, Office of Client Rights Advocacy

HRC Staff Present

Antoinette Perez – Director of Children's Services Judy Taimi- Director of Adult Services Jessica Sanchez- Participant Choice Specialist Bryan Sanchez- Participant Choice Specialist Aurelio Lopez- Participant Choice Specialist Johnny Granados- Client Service Manager

SCDD Staff Present

Albert Feliciano

Abbreviations

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RFP: Request for Proposal

SDAC: Self-Determination Local Advisory Committee

Visitors

Naomi Hagel, Phoenix Facilitation Alex Garzon, Phoenix Facilitation Abraham Flores Rojo, Phoenix Facilitation Helen Reese, Phoenix Facilitation

Meeting Minutes December 7, 2022

Santiago Villalobos, Phoenix Facilitation Jamie Van Dusen, Department of Developmental Services Reiko Umeda, Independent Facilitator Tamara Pauly, Independent Facilitator Shelia Jordan Jones, Independent Yolanda Gomez, Parent Aquilina Castellanos Ivon Muñiz, parent Tomasa Mendez Alex, Oxford Healthcare Miriam Olivia Maria Poblete Sue Gavin Gaby, parent Lucy Paz, Interpreter

Welcome:

Wendy

Introductions of committee members and guests via the chat. Attendees were informed the meeting would be short as the purpose of meeting was to approve minutes and vote on 2021-2022 implementation funds.

Approval of Minutes:

July 2022 – November 2022 minutes were posted for review and approval. Minutes were approved.

Voting on Implementations Funds:

Overview, updates, and information about Phoenix Facilitation was provided to the committee and attendees. Implementations were awarded to Phoenix Facilitation.

Public Comment:

• Phoenix Facilitation LLC will present more information next meeting.

Next meeting: January 4, 2023 via Zoom 6PM – 8PM

Adjournment, Conclusion

Meeting was adjourned at 6:32 PM. Minutes submitted by Bryan Sanchez

Harbor Regional Center Service Provider Advisory Committee (SPAC)

December 6, 2022 10:00 a.m. Virtual via Zoom Meeting

Committee Participants

Member Name	Organization
Angie Rodriguez	SVS
Paul Quiroz	Cambrian Homecare
Armand Garcia	Life Steps Foundation
Alex Saldana	Oxford Services
Amber Carey	Easter Seals
Angela Quaglia	Easter Seals Carson /Cota
Angelica Real	Easter Seals
April Stover	Ability First
Alyssa Reyes	24HR Homecare
Ariel Elizarraras	Dungarvin Norwalk
Ben Espitia	Goodwill Industries
Beverly	
Christine Grant	Dungarvin
Christine Andrade	Center for Learning Unlimited
Catherine B.	Integrated Life
Carol M	Canyon Verdc
Corina De Leon	Integrated Life
Dee Prescott	Easter Seals
Diane Sanka	Easter Seals
Darlene Williams	Ambitions CA
Elizabeth Ho	CBEM
Elsa Vasquez	Exceptional Children Foundation
Erin Welch	Cole Vocational Services Signal Hill
Heather Ives	Independent Focus
Jasmin Cortes	CVS Signal Hill
Joahna Torres	David's Place
Jordan Quenum	Ability First
Josephine Santos	Unlimited Quest
Kadie DiCarlo	
La Tasha Bellard	Easter Seals Bellflower
Lindsey Stone	ICAN CA
Lucy Tate	David's Place
Melvin Randolph	Westview Services
Maria Ortiz	Pathpoint
Marina Margaryan	Westview Services
Marleen Lopez	
Nancy Langdon	Canyon Verde
Pat Ball	Moneta Learning Center
Patty Solorzano	Oxford Services

Priscilla Lin	
Sharon Oh	Share Speech
Ryan Reager	CA. Mentor
Shea Matherly	ARC Long Beach
Veronica Mendoza	Arroyo Developmental Services
Verretta Boatner	CA. Mentor
Yael Bridge	
Jesse Cantlay	

HRC Staff Participating

Staff Name	Title
Heather Diaz	Director of Community Services
Patrick Ruppe	Executive Director
Mercedes Lowery	Community Services Manager
Steve Goclowski	Clinical Services Manager
Elizabeth Garcia-Moya	Community Services Manager
Leticia Mendoza	Dept. Assistant
Judy Taimi	Director of Adult Services
Thao Mailloux	Director of Information
Ute Czemmel	Controller
Tes Castillo	Assistant Controller
LaWanna Blair	Director of Early Childhood
Mary Hernandez	Director of Case Management Support Services
Brenda Bane	Provider Relations Specialist
Lisa Hobart	RN Consultant
Princess Njuguna	RN Consultant
Maria Elena Walsh	Manager Resource Center

Call to Order

Angie Rodriguez, Chair called the meeting at 10:05 a.m.

Sub-Committee Updates

Angie Rodriguez provided updates with the SPAC Chair Members. The groups recently hosted individual sub-committees meetings to discuss current issues and concerns. The challenges to hire and retain staff continues amongst providers. The job fair recently hosted at HRC site for the public did not have the best turn out they hoped. Lindsey from ICAN is working to collaborate with El Camino for future job fairs also.

- Darlene Williams –Residential service
- Diane Sanka- Day Program
- Lindsey Stone Supported Employment service
- Robert Turner- Supported Living service
- Paul Quiroz –Support Services
- Sharon Oh -Early Start service

HRC Family Resource Center Update

Maria Elena Walsh reminded providers that the resource center in Torrance and Long Beach office have many resource materials available to them to check out for their programs such as books, puzzles, videos etc. There is no longer a patron fee for providers. Maria Elena invites the committee to come take tour.

SPAC Job Fair Update

Brenda Bane provided update on last month SPAC Job Fair hosted at HRC site. Total of 15 provider agencies participated. It was a great opportunity to network and build partnerships. They had a lower attendance than what they hoped to have. SVS obtained a few applicant resumes. They hope for the next job fair they host will be a better visible location to the public and better outcome. Heather thanked the committee for all their efforts.

Torrance Business Fair

Lindsey from ICAN shared with the committee her current participation with the Torrance Business Fair, Torrance and Long Beach Chamber. Encouraged the group get contact and get involved with their local officials to network. ICAN recently received a grant through Janice Hahn office for a van lift to transport their coffee cart that clients run through SEP program.

Transportation Returning to Traditional Services

Brenda Bane provided update regarding Transportation and the recent provider meeting held. Transportation and day program providers looking forward to work together to get clients transported back to in person programs next year.

- Roundtrip and Day Programs December 1, 2022 at 10am
- Reliable and Day Programs December 6, 2022 at 2pm
- Ideal and Day Programs December 7, 2022 at 10am
- Comfort and Day Programs December 9, 2022 at 11am

Alternative Services Sunset 12/31/22

Heather reminded the group that Alternative services ends 12/31/22. As of 10/1/22 corresponding Traditional Services authorizations were created. Also reminded providers to contact service coordinators if they have not received new purchase of service authorizations.

Remote Services

Heather provided update on the recent DDS directive regarding remote services.

- Allows for continued access of services
- Individuals can choose remote delivery of services (telephone, video)
- Day Programs, Look-a-like day programs and Independent Living Services
- Providers must notify HRC Service Coordinator of the person's preference and document in ISP
- HRC Service Coordinator will confirm the person's preference within 90 days of notification
- Services are to be the same as what is described in the program design
- Remote Services may be offered through December 31, 2023

Tailored Day Services

Elizabeth provided update on Tailored Day Services designed to:

- Create or support competitive integrated employment, volunteer activities, and paid internships
- Assist in the pursuit of post-secondary education
 Provide opportunities for increased integration and inclusion within the community
 Services are to be provided in a 1:1 staffing ratio
- For service providers that are already vendor with HRC, it will require a program design addendum.
- HRC has developed writing guidelines for the TDS program design addendum.
- For existing day service or employment providers that are interested in providing Tailored Day Services, please email Provider Relations Specialist, Brenda Bane at <u>Brenda.Bane@harborrc.org</u> to obtain a copy of the writing guidelines.
- Information is posted on HRC website

Rates

Elizabeth Garcia Moya provided update on the current rate process:

- The next phase of the rate implementation process will be 01/01/2023 for eligible service providers.
- 50% of difference between March 31,2022 rate and applicable rate model/"benchmark rate"
- Service Providers will be receiving a letter from HRC with their new rate.
- Please submit rate questions to ratesquestions@harborrc.org

Quality Incentive Program (QIP)

Elizabeth Garcia Moya provided update on the recent QIP program:

- DDS released a Workforce Survey that required completion by eligible service providers by June 30, 2022.
- Service providers that completed the survey may be eligible for a one-time incentive payment of \$8,000.
- DDS is in the process of validating the surveys and is notifying regional center in batches with the names of the providers that are eligible for the one-time incentive.

HCBS Progress:

Elizabeth Garcia Moya provided update on the progress for HRC service providers.

- DDS issued guidance to regional for Non-Compliant Service Providers
- HCBS training and support for service providers from DDS for the use of the HCBS funding plan to help support compliance with HCBS Final Rule
- IntellectAbility-Person-Centered Thinking
- ALO Consultants-training, Remediation Clinics, & 1:1 Consultants
- Meeting HCBS Compliance by March 17, 2023
- Remediation Plans
- Validation
- Providers are encouraged to contact their Provider Relations Staff liaisons for any questions

Hospitalization and discharge planning When The Person from Your Home Has Been Hospitalized:

Lisa and Princess N, RN HRC Consultants shared the following information process and reminded service providers to keep service coordinators and HRC nurses informed anytime a client is hospitalized or discharged. They are seeing a trend that clients are sometimes are discharge without the proper care, medications or equipment needed prior.

Plan for the end at the beginning

- Medications at Admission and at Discharge
- Monitor Progress and Anticipate Transition

The critical importance of holding Discharge Planning Meetings

- Insuring Safe Returns Home
- Don't be Bullied We got your back
- Preventing Re-Hospitalization
- Changes in condition New care requirements or DME
- Facility and Staff Requirements RHCPs and Licensing Requirements

Mobile Dental Clinic

Steve shared with the group HRC's partnership with UCLA School of Dentistry to provide a mobile dental client for adult clients having challenges going to dental offices for care.

Whom should you refer?

- Those without access to dental care or a dentist
- Those who do not tolerate exams and cleaning well
- Those who haven't been to a dentist for a long time

NOTE: Individuals must have dental care insurance coverage and transportation to the mobile clinic site.

Next dental clinic is February 3, 2023 at HRC Long Beach office. HRC is exploring resources to host mobile dental clinic at other location site. Providers were encourage to send client referrals to the service coordinators.

Topics for ongoing trainings for 2023

Heather encouraged the committee to start brainstorming of what topics they would like to have for ingoing trainings in the new year 2023.

HRC encouraged providers to contact Vincente Miles at HRC to request PPE HRCPPERequest@harborrc.org

Meeting Adjourn 11:40 a.m.