KERN REGIONAL CENTER

Board of Directors Meeting Agenda
Tuesday, October 28, 2025
6:00 – 7:30 p.m.

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

General Business		
1. Call to Order and Introductions		Tracey Miller, Board President
2. Review and Approve Agenda of October 28, 2025	Action	Tracey Miller, Board President
3. Review and Approve Board Minutes of September 23, 2025 (Attachment 1)	Action	Tracey Miller, Board President
4. Nominate and Vote to Appoint Kevin Johnson to First Term on the Board of Directors	Action	Tracey Miller, Board President
5. Waive Request for RFP Requirement for Development of an Infant Development Program (Attachment 2)	Action	Alejandra Chavez, Assistant Director for Community Services
6. KRC Conflict of Interest Policy (Attachment 3)	Action	Enrique Roman, Executive Director
7. KRC Policies, • Transparency and Access to Public Information/KRC California Public Records Act Policy • Electronic Communications Policy • Records and Information Management Program Policy (Attachment 4)	Action	Tomas Cubias, Chief Equity Officer
8. National Core Indicator (NCI) Survey presentation (Attachment 5 - Pending)	Info.	Tomas Cubias, Chief Equity Officer
9. Public Input	Info.	
Reports		
10. Board President's Report	Info	Tracey Miller, President
11. Consumer Advisory Committee Report	Info.	Tracey Miller, President and CAC Chairperson
12. Executive Director's Report	Info.	Enrique Roman, Executive Director
13. Financial Reports *a.* POS Report through July 2025 (Attachment 6) *b.* Operations Report through July 2025 (Attachment 7)	Info.	Tom Wolfgram, CFO
14. Vendor Advisory Committee Report	Info.	Tamerla Prince, VAC Representative

Please click the link or QR code below to join the webinar:

https://tinyurl.com/mrxde7d2

https://us02web.zoom.us/j/89479232052?pwd=S6IzbfvHAPwdl56adobKR6DCDjIIN0.1

Webinar ID: 894 7923 2052 Passcode: 426077

Dial-In Number: (213) 338-8477

The next KRC Board of Directors meeting is

October 28, 2025, 6:00 – 7:30 PM

Attachment 1

Kern Regional Center
Board of Directors Meeting Minutes
September 23, 2025
6:00 – 7:30 p.m.

This was a hybrid meeting conducted in-person at Kern Regional Center, 3200 N. Sillect Ave., Bakersfield, CA 93308, in the Malibu Conference Room and online via Zoom. Spanish interpretation was provided by Nidya Madrigal-Navia, an Independent Contractor, and ASL interpretation was provided by Kimberly Cantwell and Miguel Saldivar of LifeSigns, Inc.

1. Call to Order and Introductions

Tracey Miller, President, called the meeting to order at 6:05 PM.
Roll call of board members was done and a quorum established.

Board Members Present:
Ana Alonso, Vice President
Fernando Fermin, Treasurer
Carlos Isidoro, Board Member
Tracey Miller, Board President
Tamerla Prince, VAC Representative
Donald Tobias, Board Member
Martin Vasquez, Secretary

Board Members Absent:
Ruth Watterson, Board Member

KRC Staff Present
Tomàs Cubias, Chief Equity Officer
Jennifer Da Palma, Executive Assistant
Sarah Fechner, Asst. Director of Client Services
Ana Guerra, Asst. Director of Client Services, Early Childhood
Kristine Khuu
- Asst. Director of Client Services, Intake
Yesenia Mackie,
- Asst. Director of Client Services, Adult
Cindy Martinez, Service Coordinator
Darlene Pankey, Executive Assistant
Ana Peña
– Asst. Director of Client Services, Early Start
Isis Rasmussen
- Program Manager/Cultural Specialist
Gabriela Rodriguez,
- Asst. Director of Client Services, Transition
Enrique Roman, KRC Executive Director
Julio Romero,
- Program Manager, SDP

KRC Staff Present (continued)
Tom Thai, IT Manager
Ky Tran, IT Technician
Omelia Trigueros, Director of Client Services
Tom Wolfgram, Chief Financial Officer

Guest Attendees:
Joselyne Cabuto
Socorro Carrillo
Cindy Cox
Adriana Gutierrez
Daniela Hernandez
Karina Landeros
Susana Lopez
Ingrid Mares
Erika Sanchez Medrano
Suzana Montoya
Sandra Palomo
Edwin Pineda, DDS
Deborah Rico
Teresa Villanueva Rojas
Norma Tulasosopo
Sandra Van Scotter
2 unidentified online public attendees

2. **Review and Approval of Agenda**
   Presenter: Tracey Miller, President
   Action: Approval of the agenda for September 23, 2025
   Outcome: The agenda for September 23, 2025, was approved as presented.
   Motion made by: Ana Alonso **Second by:** Tamerla Prince
   In Favor: 7 **Nays:** 0 **Abstentions:** 0

3. **Review and Approval of Board Minutes (Attachment 1)**
   Presenter: Tracey Miller, Board President
   Action: Approval of the board minutes from the meetings held on May 27, 2025 and August 26, 2025. The minutes of May 27, 2025, were not approved during the August meeting because there was not a quorum present. Both minutes were provided to board members one week before this meeting for review.
   Outcome: Approved board minutes from the meetings held on May 27, 2025, and August 26, 2025.
   Motion made by: Ana Alonso **Second by:** Tamerla Prince
   In Favor: 7 **Nays:** 0 **Abstentions:** 0

4. **Appoint Board Member, Tamerla Prince, to a Third Term on the Board of Directors**
   Presenter: Tracey Miller, Board President
   Outcome: Tamerla Prince was appointed to a Third Term on the Board of Directors
   Motion made by: Martin Vasquez **Second by:** Donald Tobias
   In Favor: 6 **Nays:** 0 **Abstentions:** 1

5. **Appoint Board Nominee, Socorro Carrillo, to a First Term on the Board of Directors**
   Presenter: Tracey Miller, Board President
   Outcome: Socorro was highly recommended by the Nominating Committee and the Board of Directors appointed and welcomed Socorro Carrillo to her first term on the KRC Board of Directors.
   Motion made by: Ana Alonso **Second by:** Donald Tobias
   In Favor: 7 **Nays:** 0 **Abstentions:** 0

6. **Intake and Assessment: Department Overview, Timelines, Assessments, etc. (Attachment 2)**
   Presenter: Kristine Khuu, Assistant Director Clinical Services, Intake and Assessment

   Kristine Khuu provided a presentation to the Board of Directors about the Intake and Assessment process at Kern Regional Center and answered questions after the presentation.

7. Public Input

Tamerla Prince: Special Friends Day at the Kern County Fair. Thrive will be serving a special lunch.

Ana Alonso: Padres Unidos provided information about the new Toyland Library. The program is accepting donations.

8. Consumer Activity Committee (CAC)

Presenter: Tracey Miller, Interim CAC Committee Chair
Discussion: CAC Meeting Activities

- The CAC Advisory Committee met on September 16. Approximately 10 people attended. Good discussion and a Jeopardy game.
- Tracey encouraged people to get the word out to increase attendance. Some offered suggestions

9. Executive Director's Report

Presenter: Enrique Roman, KRC Executive Director

Rate Reform

- Getting closer to completion, but significant work remains through end of 2025 and early 2026.
- DDS collaborating with regional centers to finalize.

Trailer Bill Implementation

- Working on the extensive bill language to make it operational.
- Significant process changes; SDP program impacted.

Federal Budget Impact

- Statewide financial changes expected
- Anticipated Medicaid cuts will affect regional centers.

Vendor Advisory Committee (VAC)

- Appreciation for partnership and the efforts led by Tamerla Prince.
- Town Hall was held to improve collaboration.
- Rotating vendors to present at NEO (first session successful).
- More town halls planned.

Quality Improvement Training

- Year-long training completed; ~100 staff trained.
- Focus: enhancing service quality for vendors, clients, and community.

Service Coordination Staff Development

- Coaching on customer service, person-centered practices, accountability, and collaboration.
- Emphasis on objectivity and learning from complaints.

Programs & Services Manual

- Update in progress with consultant and field experts.

Board Engagement

- The Board will be working on updating board policies, beginning with Purchase of Services standards.
- Strategic Planning will be a main focus of the Board this next year.

Community Resource Development Plan (CPP/CRDP)

- **Housing Initiatives**
  - Residential placement (community crisis home + 2 enhanced behavioral support homes). Properties acquired; provider selection is next. Properties acquired; provider selection is next.
  - Investing in multi-family housing with Housing Authority (2 potential projects).
- **New Service Types**
  - Developing housing access service provider for affordable housing and deaf/hard-of-hearing community.
  - Planning group homes specifically for deaf/hard-of-hearing and for children.
  - RCs to pair roommates.
  - Caregiver ASL training for deaf/hard-of-hearing.
- **Emergency Preparedness**
  - Developing emergency evacuation center; funding requested for supplies.
  - Details will be finalized by Emergency Service Coordinator.

10. Financial Reports

Presenter: Tom Wolfgram, CFO
Discussion: Purchase of Service and Operations Reports for July 31, 2025

- **POS Report (Attachment 3)**
  - **July 2025 Spending:** $27,909,321
  - **YTD Spending:** $27,909,321

Purchases for the month of July were up $8 Million from July 2024.

- **Operations Report (Attachment 4)**
  - **July 2025 Expenses:** $3,685,381
  - **YTD Expenses:** $3,685,381

There are 440 employees presently working at KRC; KRC projects this will grow to over 500 employees.

11. Vendor Advisory Committee Report

Presenter: Tamerla Prince, VAC Representative

- The Vendor Luncheon is scheduled for November 7.
  The theme for this year is: Rooted in Partnership, Powered by Purpose
- Trunk or Treat event planned for October 28.

12. Adjournment

Time: 7:35 PM
Next Meeting: October 28, 2025, 6:00 – 7:30 PM at Kern Regional Center, Malibu Room

Attachment 2

MEMORANDUM

TO: BOARD OF DIRECTORS, KERN REGIONAL CENTER

FROM: LYNN CLARK, DIRECTOR OF COMMUNITY SERVICES

SUBJECT: WAIVE REQUEST FOR PROPOSAL (RFP) REQUIREMENT FOR DEVELOPMENT OF AN 805 INFANT DEVELOPMENT PROGRAM.

APPLICABLE BOARD OF DIRECTOR'S POLICY: USE OF RFPS TO ADDRESS SERVICE NEEDS

DATE: OCTOBER 8, 2025

Board of Directors,

I am writing to respectfully request consideration for waiving the Request for Proposal (RFP) requirement in order to maintain continuity of services for an Infant Development Program currently operated by Great Steps Ahead in Bishop CA.

The owner of Great Steps Ahead is retiring and Strive Behavioral Intervention, Inc. is prepared to assume ownership and continue operating the Infant Development Program without interruption. Strive is a longstanding vendor with Kern Regional Center providing behavioral intervention services to individuals and families for many years. They currently share the same building with Great Steps Ahead which will make this transition seamless and efficient for the individuals we serve.

This continuity is especially important because there are no other Infant Development Programs in the Bishop area. Great Steps Ahead currently serves approximately 29 infants and families all of whom would be able to continue receiving services without interruption under Strive's leadership.

In addition, Strive brings a strong foundation in person centered practices and breadth of knowledge in providing individualized family focused support. Their experience in behavior intervention compliments the Infant Development Program model and will further strengthen the range of services available to families in Bishop.

It is important to note that Strive is not requesting startup funds for this transition. The priority is to preserve the existing program, maintain staff, and ensure families have availability to services.

KRC requests your approval to waive the RFP requirement to assist Strive to assume ownership for Great Steps Ahead.

Respectfully,

Lynn Clark
Director of Community Services

KERN REGIONAL CENTER **BOARD OF DIRECTORS**

POLICY

TITLE: Use of RFPs to Address Service Needs **POLICY NO. C-9**

DATE APPROVED: 09/28/21

PURPOSE: To provide guidelines under which RFP procedures shall be used.

POLICY: Kern Regional Center (KRC) has maintained procedures on the use of Request for Proposals (RFPs) for resource development purposes since 1999. This Board Policy provides guidelines under which KRC shall implement RFP procedures.

1. KRC shall use the RFP process for identified resource development needs under each of the following circumstances (subject to Sections 5 and 6 below):

    a. Any development where Start Up funds are available;
    b. When KRC determines that the billings from a vendor are expected to exceed $500,000 during the first 12 months after the vendor commences providing services; and
    c. The development of residential facilities.

2. If an applicant delivers an unsolicited proposal for services to KRC, then KRC may vendorize such applicant as long as it meets all applicable Title 17 vendorization requirements. However, per Title 17, KRC has no legal obligation to enter into contracts with any vendor, since vendorization alone does not guarantee utilization of such vendor's services. However, if KRC desires to enter into a contract with a new applicant who has submitted an unsolicited proposal for services, KRC may do so without complying with the RFP process, as long as KRC determines that the billings from such applicant during the first 12 months of service are expected to be less than $500,000.

3. RFPs shall be posted on the KRC website, shared with other Regional Centers for distribution, sent out to all interest lists via email and circulated using the KRC all provider email lists. The RFP provides specific details on proposal requirements and review processes.

4. This Board Policy and any current RFPs shall be posted and maintained on the KRC website.

5. Under unusual circumstances, when the RFP process has been implemented but has not been successful in adequately identifying vendor resources to meet the need, KRC may contract with a vendor on a case-by-case basis to secure needed resources through direct procurement. KRC may use direct procurement in any of the following circumstances:

    a. KRC has not identified a qualified vendor through the completion of the RFP process;
    b. The service need may be for consumer populations considered difficult to serve, which may include but not be limited to consumers exiting from or at risk of entering a State Developmental Center, or for services where resources are scarce; or
    c. The services to be procured are based on specific KRC contract requirements.

6. If KRC identifies an emergency need for services, such as emergency vendorization under Title 17 Section 54324, KRC may authorize the service without following the RFP process, provided the vendor contract is approved by KRC's Executive Director.

Attachment 3

Purpose:

To protect the integrity and credibility of Kern Regional Center (KRC) and to ensure compliance with Welfare and Institution Code sections 44626 and 4626.5 and Title 17, California Code of Regulations, sections 54500 through 54535.

This policy ensures that Board members, all employees including the Executive Director and those acting on KRC's behalf avoid situations where their personal, professional, or financial interests conflict, could conflict, or appear to conflict with the interests of served individuals and their support system or with the mission of KRC.

Scope:

This policy applies to:

- Board of Director members
- Executive Director
- All KRC employees
- Contractors, consultants and agents and volunteers who perform Decision or Policy-Making functions (as defined below) on behalf of KRC

Definitions:

Conflict-of-Interest – any activity, event, transaction, action or financial interest, professional or personal position or relationship that does or may influence or benefit a Board member, employee or Family Member (as defined below) of a Board member or employee. Additionally, as it relates to members of the KRC Board of Directors, Executive Director or Family Member (as defined below), a conflict-of-interest exists when a member of the KRC Board of Directors, Executive Director or Family Member of such person is any of the following for a Business Entity, Entity, or Provider, unless an exception applies: (1) a governing board member; (2) a board committee member; (3) a director; (4) an officer; (5) an owner; (6) a partner; (7) a shareholder; (8) a trustee; (9) an agent; (10) an employee; (11) a contractor; (12) a consultant; (13) a person who holds any position of management; or (14) a person who has decision or policy making authority.

Business Entity, Entity or Provider – any individual, business venture, or state or local governmental entity from whom or from which the regional center purchases, obtains or secures good or services to conduct its operations. These entities or providers include, but are not limited to, residential facilities, intermediate care facilities, skilled nursing facilities, support and independent living services, hospitals, medical groups, activity centers, housing providers, entities formed in support of the regional center, infant programs, clinics, laboratories, pharmacies, drug stores, ambulance services, furniture stores, equipment and supply stores, physicians, psychologists, nurses, therapists, teachers, social workers, and contract case managers. For purposes of this Policy, Business Entity,

Entity or Provider" does not include an individual served or Family Member of an individual served who receives vouchers for services.

Family Member – includes spouse, domestic partner, parents, stepparents, stepsiblings, children, stepchildren, grandparent, grandchild, parents-in-law, siblings-in-law, son-in-law and daughter-in-law, or any relative living in the same household. This definition should also be considered to include such associations by blood, marriage, adoption, and in *loco parentis* (referring to someone who assumes the duties and responsibilities of a parent to a child without being the biological or legal parent).

Financial Interest – any direct or indirect ownership, employment, partnership, board membership, investment, or compensation relationship with a Business Entity, Entity or Provider that provides services, supports, or goods to served individuals or their support system, or contracts with KRC.

Potential Conflict-of-Interest – a situation which, based upon circumstances reasonably expected to occur at a point in the future, may result in a conflict of interest, as specified in this Policy.

Provider/Contractor – any person or entity that provides services or supports to individuals or has a contract, vendorization, or funding relationship with KRC.

Regional Center Employee – any person who performs services for wages, salary or a fee under a contract of employment, with the regional center. For purposes of this policy, a Business Entity, Entity or Provider defined in this Policy is not a regional center employee.

Decision or Policy-Making Authority – any power to approve, disapprove, recommend, or otherwise influence a decision regarding the purchase of services; negotiation of contracts; hiring or appointment of any employee, member of the Board of Directors, officer, agent, contractor or consultant; or funding decisions.

Policy:

All persons covered by this policy must act solely in the interests of served individuals, their support system and KRC's mission. Personal or financial interests must not interfere with independent judgement, objectivity or loyalty. No person shall make, participate in making or influence any decision of KRC in which they have a conflict-of-interest as defined in this Policy of applicable law.

Obligations of Board of Directors and Employees:

All employees with Decision or Policy-Making Authority and all members of the Board of Directors are required to review Welfare and Institutions Code sections 4626 and 4626.5, and Title 17 California Code of Regulations sections 54500 through 54535 at least annually.

Board of Directors and Executive Director:

Reporting: All candidates for nomination, election, or appointments to KRC Board of Directors, as well as applicants for the position of Executive Director of KRC, must complete a Conflict of Interest Disclosure Statement (Disclosure Statement) and must disclose any real, perceived or potential conflict-of-interest: (1) prior to being appointed, elected or confirmed by KRC or the KRC Board of Directors; (2) within 30 days of being selected, appointed or elected; (3) within 30 days of any change in status that creates a potential or present conflict-of-interest. These status changes include but are not limited to changes in financial interests, legal commitment, outside position or duties, etc.; and (4) by August 1 of each year.

Submission to DDS: The Board shall submit copies of the completed Disclosure Statement for each Board member and Executive Director to the Department of Developmental Services (DDS) within 10 days of receipt of the Disclosure Statements.

Review: DDS and the Board of Directors shall review the Disclosure Statement of each Board member and the Executive Director to ensure that there is no existing conflict-of-interest. If a present or potential conflict is identified that cannot be eliminated, the Board shall, within 30 days, submit to DDS, local Area Board and to the State Council a copy of the Disclosure Statement and a plan that proposes mitigation measures, including timeframes and actions of the individual and/or Board to be taken to mitigate the conflict.

KRC Employees and Contractors:

Reporting: All KRC employees and contractors must complete the Disclosure Statement: (1) within 30 days from the date of hire; (2) upon any changes in employment status (such as promotion, transfer, etc.); (3) any change that creates a potential or present conflict-of-interest (such as changes in financial interest, legal commitment, outside duties, volunteer duties, etc.); and (4) by August 1 of each year.

Review: The Director of Human Resources will review the Disclosure Statement of each regional center employee within 10 days of receipt of the Disclosure Statement.

Submission to DDS: If, upon review, it is found there is a potential or present conflict-of-interest, a determination will be made by the Human Resources Director on whether: (1) the nature of the conflict requires that it be removed; or (2) the nature of the conflict is able to be mitigated; therefore, requiring submission of a waiver to DDS. This includes submitting a copy of the Disclosure Statement to DDS, together with a Conflict Resolution Plan (Plan) that proposes mitigation measures, including timeframes and actions to be taken by KRC and/or the employee to mitigate the conflict-of-interest.

Transparency and Public Posting:

If a conflict-of-interest cannot be eliminated within 30 days and a Plan has been submitted to DDS, KRC shall post the completed Disclosure Statement on its public website and keep it posted until the conflict is resolved, the Plan is approved, or the individual resigns.

Gifts and Gratuities and Benefits:

No Board member or employee shall solicit or accept gifts, favors, entertainment, travel or other items of value from a service provider, individual served or their Family Member valued over fifteen dollars ($15.00) per calendar year. Any gift above this threshold must be reported to your director and returned.

Employment of Relatives/Nepotism:

Members of KRC Executive Team are prohibited from hiring relatives at KRC. KRC's Executive Team includes the following: Executive Director, Chief Financial Officer, Director of Community Services, Director of Client Services, Director of Clinical Services, Director of Human Resources, and Chief Equity Officer or the highest-ranking individual in the respective department.

No person can be employed by KRC if a Family Member is also employed by KRC and the KRC employee and Family Member either report to the same supervisor or are in a direct supervisory relationship with each other. This rule applies to any other arrangement that may create a similar real, perceived, or potential conflict-of-interest.

No individual serving on the KRC Board of Directors, and no Family Member of a Director and no employee of DDS can be employed by KRC.

Other Employment:

Employees must disclose and obtain prior written approval for any outside employment or business activity that could conflict or appear in conflict with their KRC duties. Outside activities may not interfere with KRC responsibilities or involve use of confidential information.

Individuals Served:

No individual served by KRC will be assigned to work with an employee who is a Family Member of the individual served. For instance, an individual served will not be assigned to work with a Family Member who is their KRC Service Coordinator.

Political Activity:

KRC employees and Board members cannot engage in partisan political activities while on agency time or where actually, or apparently, acting in capacity of an employee or representative of KRC. Engagement in partisan activities can cause KRC to risk losing its tax-exempt status and the ability to receive tax-deductible donations. Specifically, individuals in their role as KRC employees and Board members are prohibited from directly or indirectly participating or intervening in any political campaign on behalf of or in opposition to any public office. This includes any verbal or written statements made on behalf of the organization.

Penalties for False Information:

Any individual who violates the provisions of KRC's Conflict-of-Interest Policy will be subject to corrective measures, including disciplinary action up to and including discharge from employment with KRC.

If a KRC Board member, Executive Director, employee, contractor, agent or consultant violates any provision of this Policy and the violation has not been cured within 30 calendar days DDS issues a notice of violation, DDS may take immediate action to begin the process for termination or nonrenewal of the regional center contract.

Attachment 4

KERN REGIONAL CENTER
BOARD OF DIRECTORS POLICY

SUBJECT: CALIFORNIA PUBLIC RECORDS ACT POLICY
POLICY NO.: TBD
DATE: Anticipated Board Approval Date: 10/28/2025

ARTICLE I. INTRODUCTION

Effective January 1, 2026, the Kern Regional Center ("Center") is subject to the California Public Records Act ("CPRA")[1] pursuant to Welfare and Institutions Code section 4639.76, as enacted by Assembly Bill 1147 (Disability Equity, Transparency, and Accountability Act of 2024)[2]. This policy establishes the procedures for responding to public records requests in compliance with CPRA requirements, ensuring transparency, accountability, and timely access to public records. As a publicly funded entity, this agency recognizes the public's right to access records related to its operations, decision-making, and use of resources. This policy applies to public records maintained by the agency, including electronic, written, and stored communications that qualify as public records. All agency employees, contractors, and representatives must adhere to these procedures to ensure compliance with the law and to maintain public trust.

ARTICLE II. PURPOSE

The purpose of this policy is to provide direction on how to receive, process, and respond to requests to inspect or receive copies of Center records. All requests for Center records will be handled pursuant to the provisions of the CPRA.[3]

ARTICLE III. DEFINITIONS

Section 3.1 Definitions

A. **Center personnel** shall collectively refer to all Center employees, board members[4], appointed officials, and anyone who prepares, owns, uses, or retains public records on behalf of the Center.

B. **CPRA Analyst** Chief Equity Officer or his/her designee.

C. **CPRA Portal** is a web-based system where members of the public may submit CPRA requests to the Center and the Center may respond, including the production of records.

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[1] Gov. Code, § 7920.000 *et seq.*
[2] Welf. & Inst. Code, § 4639.76
[3] Gov. Code, § 7920.000 *et seq.*
[4] Welf. & Inst. Code, § 4622

D. **CPRA Request** is a request by a Person[5] to inspect and/or to receive a copy of Center records. Commonly requested records include emails related to a particular subject matter and Center contracts.

E. **Person** a "Person" includes any natural person, corporation, partnership, limited liability company, firm, or association.[6]

F. **Public Record** is defined by the CPRA and includes any writing that contains information relating to the conduct of the public's business prepared, owned, used, or retained by the Center regardless of physical form or characteristics, and regardless of whether created or transmitted on or by a Center-owned device.[7]

G. **Writing** shall mean any typewriting, printing, photostating, photographing, photocopying, transmitting by electronic mail or facsimile, and every other means of recording upon any tangible thing any form of communication or representation, including letters, words, pictures, sounds, or symbols, or combination thereof, and any record thereby created, regardless of the manner in which the record has been stored.[8]

Section 3.2 General Scope

This policy applies to all Center personnel and shall be interpreted to be consistent with other Center-wide policies.

ARTICLE IV. POLICY & PROCEDURES

Section 4.1 Policy and Procedures

Every Person[9] has a fundamental right to copy and inspect public records.[10] It is important for the Center to properly gather potentially responsive records, review the records for privileged or exempt information, and produce responsive, nonexempt documents in a timely manner. The CPRA Analyst is responsible for gathering responsive records, making the appropriate redactions, and responding to the requester. However, it is the responsibility of all Center personnel to assist in identifying responsive records and prioritizing CPRA requests as reasonably permitted by their job duties.

This policy shall be interpreted to be consistent with CPRA statutes, case law, and other governing authority.

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[5] Gov. Code, § 7920.520
[6] Gov. Code, § 7920.520
[7] Gov. Code, § 7920.530
[8] Gov. Code, § 7920.545
[9] Gov. Code, § 7920.520
[10] Gov. Code, § 7921.000

Section 4.2 The CPRA Request

A. Any Person may make a records request. The Center cannot require that the requester provide their name or other identifying information or the purpose of the request.[11] Anonymous requests or fictitious names are permitted. If the requester refuses to give his/her contact information, Center personnel shall set a date within 10 calendar days for the requester to check on the status of the request.

B. Any request (verbal or written) to review a record qualifies as a CPRA request. The requester is not required to cite to the CPRA, file a request with a specific office, or use the Center's CPRA Portal.

i. If Center personnel receives a request outside of the CPRA Portal, they may ask but not require the person to use the CPRA Portal. If the person refuses, Center personnel shall receive the request and then submit the request to the CPRA Portal and process consistent with the rest of these guidelines.

ii. Center personnel should consider whether the requester has a right to the records that is outside of the CPRA (e.g., employee's request to review their personnel file; a request for copies of certified payroll records; a union's Request for Information, etc.).

C. All CPRA requests shall be forwarded to the CPRA Portal. Any CPRA request involving members of the Board should be brought to the attention of the Center's General Counsel and Executive Director.

D. The CPRA Portal shall document the date of the CPRA request and assign a reference number.

E. If the request does not reasonably identify a Center record, the CPRA Analyst shall make every effort to assist the requester in making a focused and effective request.[12] The CPRA Analyst shall document their efforts to:

i. Assist the member of the public to identify records and information that are responsive to the request or to the purpose of the request, if stated.

ii. Describe the information technology and physical location in which the records exist.

iii. Provide suggestions for overcoming any practical basis for denying access to the records or information sought.

F. Modified requests should be documented in response letters to the requester.

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[11] Gov. Code, § 7921.300
[12] Gov. Code, § 7922.600

Section 4.3 Gathering Responsive Records

A. The CPRA Analyst shall immediately notify the Center personnel most likely to have responsive records.

i. It is the responsibility of all Center personnel to assist in identifying responsive records. After learning of a relevant CPRA request, Center personnel shall produce potentially responsive records to the CPRA Analyst as expeditiously as possible.

ii. When determining whether a record is potentially responsive, Center personnel shall consider if a reasonable person would interpret the request to include a particular document.

iii. Center personnel shall gather responsive records held on private devices or accounts in accordance with the Electronic Communication Policy.

B. Request for emails shall be handled in compliance with the Electronic Communications Policy. The CPRA Analyst shall work with the IT Department to identify responsive emails including developing a list of key words to include in the search and identifying relevant email addresses.

C. The CPRA Analyst shall gather all potentially responsive records, including confidential documents and documents potentially subject to privilege. Center personnel shall not create a record in response to a CPRA request that does not otherwise exist, without supervisor approval. The General Counsel shall be consulted in these instances.

Section 4.4 Response Timelines

A. The Center is required to respond to records requests promptly, but no later than 10 calendar days after receipt of the request.[13] If the tenth day falls on a weekend or a holiday, the due date is the next business day. For example, if the Center receives a request on February 1, then the tenth day is February 11. If February 11 is a Saturday, then the response is due on Monday, February 13.

B. The Center is not required to produce documents within 10 calendar days, but the CPRA Analyst must respond to the requester in writing with most applicable option below:

i. Inform the requester that the Center has no responsive records.

[13] Gov. Code, § 7922.535

ii. Produce non-exempt, responsive records, citing the appropriate exemptions for any redacted or withheld records and identifying the name and title of person responsible for the claim of exemption.

iii. Inform the requester that the Center has responsive records and set a reasonable date in the future for production. The documents may be produced at one time or on a rolling basis. Consult your supervisor about the timing of the production depending on the complexity of the response.

a. If the records need to be produced on a rolling basis, establish a production schedule and share the schedule with the requester.

b. Production should include non-exempt, responsive records, citing the appropriate exemptions for any redacted or withheld records and identifying the name and title of person responsible for the claim of exemption.

iv. Inform the requester that the Center is taking an extension of 14 calendar days to determine whether it has potentially responsive records. The Center does not need to request the extension, but may take the extension as matter of right.

a. This extension must be made pursuant to Government Code section 7922.535, subdivision (c)(1)-(5), citing one or more of the following reasons:

(i) The need to search for and collect the requested records from field facilities or other establishments that are separate from the office processing the request.

(ii) The need to search for, collect, and appropriately examine a voluminous amount of separate and distinct records that are demanded in a single request.

(iii) The need for consultation, which shall be conducted with all practicable speed, with another agency having substantial interest in the determination of the request or among two or more components of the agency having substantial subject matter interest therein.

(iv) The need to compile data, to write programming language or a computer program, or to construct a computer report to extract data.

(v) The need to search for, collect, and appropriately examine records during a state of emergency proclaimed by the

Governor in the jurisdiction where the agency is located when the state of emergency currently affects, due to the state of emergency, the agency's ability to timely respond to requests due to staffing shortages or closure of facilities where the requested records are located. This shall not apply to a request for records created during and related to the state of emergency proclaimed by the Governor.

b. After the 14 day deadline, the Center must respond pursuant to Sections 4.4.B.i-iii above.

Section 4.5 Producing the Records

A. If amenable to the requester, the CPRA Analyst shall make responsive records available via the CPRA Portal. The requester shall not be charged for production pursuant to this subdivision.

B. The CPRA Analyst may also email responsive records to the requester, if preferred by the requester.

C. When producing hard copies, the Center may charge $0.10 per page or $5.00 per CD or flash drive.

i. Center personnel shall receive payment before making copies that would cost $20 or more. Center personnel shall estimate the charge for the copies and inform the requester that the Center will refund any overages.

ii. Center staff may not charge the requester for the time collecting or processing the records and may only charge for the direct cost of duplicating the records.

a. Exceptions may be made when the request requires data compilation, extraction, or programming or the Center would be required to produce a copy of an electronic record and the record is one that is produced only at otherwise regularly scheduled intervals. Consult with the General Counsel in these instances.[14]

Section 4.6 Exemptions

A. Center personnel shall only redact the specific portion of the record that is exempt. Redactions should not only black out the information but also delete any embedded data, such as hyperlinks.

[14] Gov. Code, § 7922.575

B. Information contained in a record that is non-responsive to the CPRA request shall not be redacted. Only information that is subject to an exemption may be redacted.

C. Potentially responsive records shall be reviewed to confirm that the records are public records and to assess whether an exemption applies. Non-public records are records that are primarily personal, containing no more than incidental mentions of agency business. Non-public records are not subject to the CPRA and are not required to be disclosed for a CPRA request.

D. Common exemptions:

i. The "catch-all" exemption. Information or documents may be withheld if the Center can demonstrate that on the facts of the particular case the public interest served by non-disclosure clearly outweighs the public interest served by disclosure.[15]

ii. Personnel, medical or similar files of center employees, the disclosure of which would constitute an unwarranted invasion of person privacy.[16]

iii. Center employee home addresses, home telephone numbers, personal cell phone numbers, and birth dates.[17]

iv. Documents specifically prepared by, or at the direction of, the Center for use in existing or anticipated litigation.[18]

v. Attorney-Client Privileged Communications or Attorney Work Product.[19]

vi. Trade Secrets[20]

vii. Records deemed confidential pursuant to state or federal law (e.g., Welfare and Institutions Code, CMIA, HIPAA.[21]

Section 4.7 Violations

Violation of this policy may result in disciplinary action, up to and including termination.

[15] Gov. Code, § 7922.000
[16] Gov. Code, § 7927.700
[17] Gov. Code, § 7928.300
[18] Gov. Code, § 7927.200
[19] Gov. Code, § 7927.700; Evid. Code, § 954 et seq.; Code Civ. Proc., § 2018.030
[20] Civ. Code, § 3426.1(d)
[21] Gov. Code, § 7927.705

KERN REGIONAL CENTER
BOARD OF DIRECTORS POLICY

SUBJECT: ELECTRONIC COMMUNICATIONS POLICY
POLICY NO.: TBD
DATE: Anticipated Board of Director's approval date: 10/28/2025

ARTICLE I. PURPOSE

The purpose of this Policy is to establish standard operating procedures, guidelines, and clear and concise direction regarding the retention of emails, including their attachments, in the possession of the Kern Regional Center ("Center"). The intent of this Policy is to prevent the unauthorized access to or disclosure of sensitive information prepared, owned, used, or retained by the Center and to comply with the California Electronic Communications Privacy Act[1], California Public Records Act ("CPRA")[2] and all other state and federal regulatory requirements.

ARTICLE II. DEFINITIONS

Section 2.1 Definitions

A. **Account** shall mean any private or Center email account used for Center Business.

B. **Center Business** center business shall be construed broadly to mean information relating to the conduct of the public's business or communications concerning matters that support the Center's mission.

C. **Center Network** any Internet access, computer server, computer network, intranet, local area network, wireless network, e-mail system, cloud storage system, or file-sharing system owned or made available by the Center.

D. **Center Personnel** shall collectively refer to all Center employees, board members[3], appointed officials, and anyone who prepares, owns, uses, or retains public records on behalf of the Center.

E. **Center Staff** any employee of the Center and any other non-employee in lawful possession of electronic communications related to Center Business.

F. **CPRA Analyst** Chief Equity Officer or his/her designee.

G. **CPRA Portal** is a web-based system where members of the public may submit CPRA requests to the Center and the Center may respond, including the production of records.

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[1] Pen. Code, § 1546
[2] Gov. Code, § 7920.000 *et seq*
[3] Welf. & Inst. Code, § 4622

H. **CPRA Request** is a request by a member of the public to inspect and/or to receive a copy of Center records. Commonly requested records include emails related to a particular subject matter, and Center contracts.

I. **Deletion** complete destruction of email without permitting duplicates, either electronic or hard copies.

J. **Electronic Communications** any and all electronic transmissions, and every other means of recording upon any tangible thing in any form of communication or representation, including letters, words, pictures, sounds, or symbols, or combinations thereof, and any record thereby created, regardless of the manner in which the record has been stored. Without limiting the nature of the foregoing, "electronic communications" include e-mails, texts, voicemails, and include communications on or within commercial applications ("Apps") such as Facebook Messenger, Twitter, WhatsApp, etc.

K. **Electronic Device** a device depending on the principles of electronics and using the manipulation of electron flow for its operation, including but not limited to cellular telephones, laptops and desktop computers, hotspots, tablets, pagers, cameras, televisions, and DVD/CD players.

L. **Electronic Mail** or ("Email") messages sent within the Center's Electronic Messaging application.

M. **Electronic Messaging Account** any account that creates, sends, receives, or stores electronic communications, such as email messages or text messages, or voicemail messages.

N. **Excessive Use** is defined as "Excessive" if it interferes with normal job functions, impacts responsiveness, and/or the ability to perform daily job activities.

O. **Exchange Email Server** the server used to store the Center's electronic messages.

P. **Listservs** a messaging function hosted by server computers that automatically mails messages to subscribers and can be referred to as "electronic bulletin boards."

Q. **Public Record** shall mean "Public Record" as defined in the California Public Records Act ("CPRA").[4] The CPRA defines "public records" as "any writing containing information relating to the conduct of the public's business prepared, owned, used, or retained by any state or local agency regardless of physical form or characteristics" and further defines a "writing" as "any handwriting, typewriting, printing, photostating, photographing, photocopying, transmitting by electronic mail or facsimile, and every other means of recording upon any tangible thing any form of communication or representation, including letters, words, pictures,

[4] Gov. Code, § 7920.000 et seq.

sounds, or symbols, or combinations thereof, and any record thereby created, regardless of the manner in which the record has been stored."[5]

R. **Retention** preservation of an email in such a way that does not permit additions, deletions, or changes to the original document, without creating a duplicate of the record.

S. **Writing** shall mean any typewriting, printing, photostating, photographing, photocopying, transmitting by electronic mail or facsimile, and every other means of recording upon any tangible thing any form of communication or representation, including letters, words, pictures, sounds, or symbols, or combination thereof, and any record thereby created, regardless of the manner in which the record has been stored.

Section 2.2 General Scope

This Policy shall apply to all Center Personnel who may have access to or use of the Center Network and shall be interpreted to be consistent with other Center-wide policies. This includes all who may have been issued Center-owned technology or a Center-issued electronic messaging account, including all Center Personnel and Center Staff. Furthermore, this Policy applies when Center-issued technology is used on or off Center property and when non-Center devices access the Center Network or private information prepared, used, or retained by the Center.

Hardware and software issued to Center Personnel is the property of the Center and may only be used for approved purposes.

Personal use of the Center Network, that is deemed to be excessive, interferes with performance by Center Personnel, or that is intended for personal monetary gain, is strictly prohibited.

Those in violation of this Policy could be subject to disciplinary action up to and including dismissal and/or termination of contract, as described in further detail under the "Violations" Section of this Policy.

All questions regarding the interpretation or applicability of this Policy should be directed to the Chief Equity Officer or his/her designee for clarification.

ARTICLE III. POLICY & PROCEDURES

Section 3.1 Policy and Procedures

1. All Center Personnel shall be assigned a Center issued Electronic Messaging Account.

2. Center accounts shall be used to conduct Center Business.

[5] Gov. Code, § 7920.530

3. All Center Personnel shall, within [15 days] following the adoption of this Policy, search all private, non-Center issued electronic messaging accounts to which they have user access and locate any electronic communications that might constitute a Public Record, because it involves Center Business, as set forth above. All such communications shall be forwarded to the Center Personnel's Center provided account. To the extent the Center Personnel believes that any part of such communications contain personal matters not related to the conduct of the public's business, the Center Personnel shall provide a declaration, as set forth in paragraphs 10 and 11, below.

4. The Center account, along with the access to the Center's account server, are solely for the Center and Center Personnel's use to conduct Center Business and shall not be used for personal business or political activities. Incidental use of Center electronic messaging accounts for personal use by Center Personnel is permissible, though not encouraged.

5. If a Center Personnel receives an electronic message regarding Center Business on their non-Center electronic messaging account, or circumstances require such person to conduct Center business on a non-Center account, the Center Personnel shall either: (a) copy ("cc") any communication from a Center Personnel's personal electronic messaging account to their Center electronic messaging account; or (b) forward the associated electronic communication to their Center account no later than [10 days] after the original creation or transmission of the electronic communication.

6. Center Personnel shall endeavor to ask persons sending electronic communications regarding Center Business to a personal account to instead utilize the Center Personnel's account, and likewise shall endeavor to ask a person sending an electronic communication regarding non-Center Business to use the Center Personnel's personal or non-Center electronic messaging account.

7. Center Personnel understand they have no expectation of privacy in the content of any electronic communication sent or received on a Center account or communication utilizing Center servers. Center-provided electronic devices, including devices for which the Center pays a stipend or reimburses the Center Personnel, are subject to Center review and disclosure of electronic communications regarding Center Business. Center Personnel understand that electronic communications regarding Center Business that are created, sent, received or stored on an electronic messaging account, may be subject to the CPRA, even if created, sent, received, or stored on a personal account or personal device.

8. In the event a CPRA request is received by the Center seeking electronic communications of Center Personnel, the Chief Equity Officer or his/her designee shall promptly transmit the request to the applicable Center Personnel whose electronic communications are sought. The Chief Equity Officer or his/her designee shall communicate the scope of the information requested to the applicable Center Personnel, and an estimate of the time within which the Chief Equity Officer or his/her designee intends to provide any responsive electronic communications to the requesting party.

9. It shall be the duty of each Center Personnel receiving such a request from the Chief Equity Officer or his/her designee to promptly conduct a good faith and diligent search of their personal electronic messaging accounts and devices for responsive electronic communications. The Center Personnel shall then promptly transmit any potentially responsive electronic communications to the Chief Equity Officer or his/her designee. Such transmission shall be provided in sufficient time to enable the Chief Equity Officer or his/her designee to adequately review and provide the nonexempt electronic communications to the requesting party.

10. In the event a Center Personnel does not possess, or cannot with reasonable diligence recover, responsive electronic communications from the Center Personnel's electronic messaging account, the Center Personnel shall so notify the Chief Equity Officer or his/her designee by way of a written declaration, signed under penalty of perjury. In addition, a Center Personnel who withholds any electronic communication identified as potentially responsive must submit a declaration, signed under penalty of perjury with facts sufficient to show the information is "personal business" and not "public business" under the CPRA. The form of the declaration is attached hereto as Attachment A.

11. It shall be the duty of the Chief Equity Officer or his/her designee, in consultation with the Center's General Counsel, to determine whether a particular electronic communication, or any portion of that electronic communication, is exempt from disclosure. To that end, the responding Center Personnel shall provide the Chief Equity Officer or his/her designee with all potentially responsive electronic communications, and, if in doubt, shall err on the side of caution and should "over produce.". If an electronic communication involved both "public business" and a personal communication, the responding Center Personnel may redact the personal communication portion of the electronic communication prior to transmitting the electronic communication to the Chief Equity Officer or his/her designee. The responding Center Personnel shall provide facts sufficient to show that the information is "personal business" and not "public business" by declaration. In the event a question arises as to whether or not a particular communication, or any portion of it, is a public record or purely a personal communication, the Center Personnel should consult with the Chief Equity Officer or his/her designee or the Center General Counsel. The responding Center Personnel shall be required to sign a declaration, in a form acceptable to the Center General Counsel, attesting under penalty of perjury, that a good faith and diligent search was conducted and that any electronic communication, or portion thereof, not provided in response to the CPRA request is not Center Business.

12. Center Personnel understand that electronic communications regarding Center Business are subject to the Center's approved Records Retention Schedule, even if those electronic communications are or were created, sent, received or stored on a Center Personnel's personal electronic messaging account. As such, unless the Center Personnel has cc'd/transmitted electronic communications in accordance with paragraph 5 above, that Center Personnel must retain all electronic communications regarding Center Business, in accordance with the Center's adopted Records Retention Schedule, regardless of whether such electronic communication is originally sent or received on a personal electronic messaging account.

13. This Policy does not waive any exemption to disclosure that may apply under the CPRA.

Section 3.2 Retention

All Center emails shall be maintained in accordance with the Center's approved Records Retention Schedule, except as provided below.

Emails may be subject to longer retention periods as determined by the content of the email.

A. Applicable Retention Period

i. Center Personnel may be required to retain emails subject to a longer retention period. This is determined by applicable laws, regulations, Center policies, and/or Records Retention Schedules. Specifically, emails subject to a legal hold, subpoena, CPRA request, claim against the Center, administrative charge or investigation, or similar proceeding, which is in progress or which can reasonably be anticipated, shall also be retained.

ii. Center personnel shall consider an email's attachments when determining whether the email needs to be retained.

iii. It is the responsibility of the sender of an internal email to determine the retention period of an email based on the subject matter of the email.

iv. It is the responsibility of the recipient of an email received from outside the Center to determine the retention period of an email based on the subject matter of the email.

v. Center personnel may extend the retention period of an email if it has significant or continuing business or historical value.

B. Storing Emails

i. Center personnel may store emails in subfolders on their Exchange Email Server. Emails in a subfolder shall not be subject to automatic deletion.

ii. Center personnel may also store emails in locations other than subfolders that appropriately retain the email, including metadata.

iii. Center personnel **shall not** use PST files to store emails outside of the Exchange Email Server. Any existing PST files shall be provided to the Information Technology Department for inclusion into an email archive solution accessible by the employee providing such data.

iv. Upon separation of an employee, a copy of that individual's email account shall be created and maintained for a period of [two years] following a review of the emails that may need to be retained longer.

v. Emails shall be deleted, when permitted by law and policy, in a timely and cost-efficient manner so as to destroy the writing without permitting duplicates, either electronic or hard copies.

Section 3.3 Legal

If any paragraph, sentence, clause, or phrase of this Policy is held unlawful or invalid for any reason, said unlawfulness or invalidity shall not affect the remaining portions of this Policy. Additionally, due to the ever changing facets of the realm of Information Technology and its related areas, this Policy shall not be construed to be all inclusive. Revisions to this Policy shall be made periodically in an effort to keep up with changing technology.

HISTORY

Approved on

_____
Board of Directors

Attachment A

DECLARATION

[Attached on following page]

In the matter of:	Declaration of:
California Public Records Act Request Pursuant to Gov. Code § 7920.000 *et seq.* Re: _____ _____ Insert shorthand name of record request, including request number, if applicable Requester: _____ Print or type name of requester	_____ Print or type name of Personnel **Re: Search of Personal Electronic Messaging Account**

STATE OF CALIFORNIA
COUNTY OF [INSERT COUNTY]
KERN REGIONAL CENTER

I, _____ declare:
Print name

1. I received notice of a California Public Records Act ("CPRA") request regarding a search of my personal electronic messaging account(s).

2. I understand that the CPRA request seeks:

   _____.

   I am the owner or authorized user of the following personal electronic messaging account and have the authority to certify the records.

3. I have made a good faith, diligent, thorough, and complete search of the above mentioned personal electronic messaging account(s) for all electronic communications potentially responsive to the above mentioned CPRA request.

4. Any responsive electronic communications discovered, and referenced below, were prepared or used by me in the ordinary course of business at or near the time of the act, condition, or event.

5. Any responsive electronic communications discovered, and referenced below, are true copies of all records described in the above mentioned CPRA request.

Check the applicable box:

☐ I certify that I do not possess responsive electronic communications.

☐ I certify that I cannot reasonably recover responsive electronic communications.
_____
_____
_____
_____

(Explain efforts to retrieve responsive electronic communications and why you were unable to recover responsive electronic communications.)

☐ I certify that I discovered potentially responsive electronic communications from my personal electronic messaging account, but I am withholding that information because the information is "personal" business. This is for the following reasons:

_____
_____
_____
_____
_____(Describe with sufficient facts why the contested information is personal business and not subject to the CPRA. Attach additional pages, if necessary.)

☐ I certify that I discovered potentially responsive electronic communications from my personal electronic messaging account. I am providing all responsive information. However, some information is nonresponsive and I am withholding that information, because the information is personal business. This is for the following reasons:

_____
_____
_____
_____
_____Describe with sufficient facts why the contested information is personal business and not subject to the CPRA. Attach additional pages, if necessary.

I declare under the laws of the State of California that the foregoing is true and correct and that I have personal knowledge of the facts set forth above.

Executed this ___ day of _____ 20___ , in _____, California.

By:_____
Print Name:_____

ATTACHMENT B

Email Retention Policy Acknowledgment

I hereby acknowledge that I have received a copy of the Kern Regional Center's Electronic Communications Policy and that I understand that I am to read and comply with its contents. I am aware that failure to comply with this Policy will lead to disciplinary action, up to and including termination. I further understand that if I have any questions about this Policy or its contents, I am to discuss them with my supervisor or Chief Equity Officer or his/her designee.

_____
Print Employee Name

_____
Employee Signature

KERN REGIONAL CENTER
BOARD OF DIRECTORS POLICY

SUBJECT:	RECORDS AND INFORMATION MANAGEMENT PROGRAM POLICY
POLICY NO.:	TBD
DATE:	Anticipated Board of Director's approval date: 10/28/2025

I. PURPOSE

The purpose of this Records and Information Management Program Policy ("Policy") is to establish comprehensive and uniform methods for cost effective and efficient management of Kern Regional Center ("Center") records in accordance with legal and professional standards. This policy ensures that all records necessary for operational, legal, and regulatory purposes are preserved for a period sufficient to meet business and compliance requirements, but not retained longer than is reasonably necessary.

II. AUTHORIZATION

The Equity Department is authorized by the Kern Regional Center Board of Directors to interpret and implement this Policy and shall be responsible for the administration of this Policy. The Chief Equity Officer or designee is authorized to perform any and all acts necessary to comply with the terms and intent of this Policy. The Chief Equity Officer is responsible for the retention of Center records and the destruction of any obsolete records that meet the qualifications governing the retention and disposal of records as specified below.

II. POLICY

Policies and procedures, under the supervision and administration of the Chief Equity Officer are hereby established for the coordination, administration and implementation of the Records and Information Management Program, under which Center records are retained for administrative, operational, legal, fiscal, historical or research purposes.

III. GENERAL GUIDELINES

A. Definitions. As used in this Policy, the following terms shall have the following meanings:

(1) "Records" shall mean any writing containing information relating to the conduct of the Center's business that is prepared, owned, used, or retained by the Center regardless of physical form or characteristics.[1]

[1] Gov. Code § 7920.530

(2) "Writing" means handwriting, typewriting, printing, photographing, photocopying, electronic mail ("email"), facsimile ("fax"), and every other means of recording upon any tangible thing any form of communication or representation, including letters, words, pictures, sounds, or symbols, or combination thereof, and any record thereby created, regardless of the manner in which the record has been stored.[2]

B. The Chief Equity Officer shall be responsible for the administration of this Policy and shall assist all Center personnel to comply with the provisions of this Policy and with the Records Retention Schedule, set forth in Attachment "A". Each Center Department shall also be responsible for assisting the Chief Equity Officer in the performance of the duties required by this Policy. The Chief Equity Officer or their designee will distribute this Policy to all Center personnel. Each Department Director is responsible for ensuring that the records under their control are maintained and destroyed in accordance with this Policy. The policy shall be revised as necessary to meet legal and administrative requirements.

To perform this function, the Chief Equity Officer shall on an on-going and periodic basis:

(a) Create, maintain and distribute the necessary forms to implement the Records and Information Management Program.

(b) Develop and maintain a retention and disposition schedule for all Center records, including the preparation of any amendments as dictated by statute or administrative policy.

(c) Maintain a current inventory and index of Center records.

(d) Establish guidelines and coordinate periodic reviews of Center records to determine which records are eligible for destruction in accordance with the Records Retention Schedule and subject to the approval of the Department Director, and Center Counsel.

(e) Coordinate with all Center Departments, on a routine basis, the timely destruction of obsolete records according to the procedures herein. Certify and document that records have been destroyed. Certificates of Destruction shall be permanently kept on file with the office of the Chief Equity Officer.

(f) Oversee the special handling of confidential, historical, and essential records, and ensure the safety of Vital Records in the event of a disaster.

(g) Maintain accurate and timely electronic databases and a uniform filing system of all legislative actions affecting the creation, utilization, maintenance, retention,

[2] Gov. Code § 7920.545

preservation and disposition of Center records, in order to efficiently track and retrieve Center records.

Center Departments have the following responsibilities:

(a) Each Department Director is responsible for designating a qualified Department Records Coordinator, who shall serve on the Records and Information Management Committee once established.

(b) Each Department Director or designee is responsible for maintaining a reliable and accurate filing system to ensure the efficient maintenance, retrieval and disposition of the records under their control.

(c) Each Department Director or designee is responsible for ensuring that obsolete records under their control are destroyed in a timely manner, and authorizing the destruction, in accordance with the policies and procedures stated herein.

(d) Each Department Director or designee is responsible for submitting a request for any necessary revisions to its Records Retention Schedule, to the Chief Equity Officer who will review the request and submit a recommendation to the Center Counsel and Center Board of Directors for official approval.

(e) Each Department Director or designee is responsible for maintaining and controlling the disposition of records.

C. The following general guidelines apply to all Center records.

(a) The Chief Equity Officer may authorize at any time the destruction of any duplicate records if they are no longer required.

(b) Unless otherwise provided by State or federal law, the Chief Equity Officer may authorize the destruction of any original document, with written consent from the Center Counsel, without retaining a copy of the document as long as the retention and destruction of the document complies with the retention schedule as set forth in this Policy.

(c) In addition to the retention periods required under this Policy, the Center shall retain original administrative, legal, and fiscal records with continued value (i.e., records related to long-term transactions and/or special projects) until all matters pertaining to such records are completed or otherwise resolved.

(g) Ensure all records required to be retained due to pending or threatened litigation or investigation shall be retained for so long as the litigation or investigation is active, plus any additional period as may be provided for in this Policy and the Records Retention Schedule.

D. Duplicate Records. The Chief Equity Officer is authorized to destroy at any time any duplicate record of the Center, including duplicate records, if the duplicate is no longer required for Center business.

E. Exceptions to Scheduled Destruction of Obsolete Records. Scheduled destruction of records that have met or exceeded their retention periods must be postponed if the records are responsive to, subject to, or relate in some way to any of the following:

(a) A pending California Public Records Act[3] request received by the Center;

(b) A subpoena served on the Center;

(c) A Request for Production received by the Center from an opposing party in litigation;

(d) A court order; or

(e) A litigation hold or request for preservation of evidence received by the Center

The above exceptions apply to both hard copy and electronic records.

IV. REQUIRED FORMS

The following forms are to be utilized by all Center Department Directors or their designees in order to efficiently and accurately identify, inventory, transfer to storage, retrieve, and destroy records under their control: (Each form, including instructions, is attached hereto.)

A. Records Retention Schedule Form (Attachment A), incorporated by reference herein.

This form governs the mandatory disposition of Center records by indicating the minimum length of time records shall be maintained in the office and in storage, and the time period after which they may be destroyed.

The "Records Retention Schedule" is attached to this Policy as Attachment A and is incorporated herein by reference. This Policy and the Records Retention Schedule comply with State and federal law. The Records Retention Schedule may be updated from time to time by the Chief Equity Officer, as authorized by this Policy. The Retention Schedule was created based on a detailed examination of the Records Inventory & Identification Forms, and Interviews with each department to determine the legal, vital, administrative, or historical value of the records. Applicable codes and statues are referenced to determine the required retention period. Retention schedules and amendments thereto are approved by the Center Counsel, Chief Equity Officer and Department Head.

[3] Gov. Code §7920.000 *et seq.*

V. PROCEDURE

Upon the request of the Department Head and with the written consent of the Center General Counsel and the Chief Equity Officer or designee, the records identified in the Records Retention Schedule are authorized to be destroyed on an on-going basis in accordance with the retention periods described therein without the necessity of a specific resolution of the Center Board of Directors.

The Office of the Chief Equity Officer or designee shall be responsible for scheduling and coordinating with all Center Departments the destruction of records on an annual basis. The appropriate forms will be distributed to all Center Departments in order to document the records to be destroyed.

It shall be required that the Department Head, Center Counsel, and Chief Equity Officer or designee authorize and sign each "Authority to Destroy Obsolete Record" form (Attachment B), incorporated by reference herein, prior to the records being destroyed.

NOTE: It is critical that the requests for Authority to Destroy Obsolete Records be reviewed carefully by all signatory staff in order to determine whether records listed are involved in litigation, or if there is an administrative and/or operational requirement which may require a temporary extension of the retention period.

Records deemed to be confidential in nature shall be shredded. All other records shall be removed from their locations and taken off site for a secure destruction.

VI. CALIFORNIA PUBLIC RECORDS ACT REQUESTS:

Each department head is responsible for ensuring that a request to inspect or obtain copies of public records is processed according to the procedures pursuant to the California Public Records Act (Gov. Code § 7920.000 *et. seq.*). See the California Public Records Act Policy for specific procedures.

VII. VITAL RECORDS PROTECTION:

Vital Records contain information necessary for the Center to resume operations after a disaster. Each Department Director is responsible for identifying the Vital Records under his/her control and ensuring that the Vital Records are maintained according to the following procedures:

A. All Vital Records shall be stored in a secure, safe and controlled environment, to protect the records from theft or damage.

B. Vital Records that are in use but are required to be kept in a secured area, should be returned to said area at the end of each workday. Vital Records should not be allowed to accumulate on desks or in unprotected areas.

ATTACHMENTS

Attachment "B"

Kern Regional Center
Authority to Destroy Obsolete Record and Certificate

Department: Location:	Department Director: Date:

Records listed below are now eligible for destruction in accordance with the approved records retention schedule. Please indicate your approval for the destruction unless a reason to delay exists. Your signature below attests that no unresolved (1) audit questions, (2) investigations, (3) civil suits or criminal prosecutions, or (4) other reasons for delaying destruction exist. If the destruction is to be delayed, please give the reason in the space indicated and provide a revised destruction date.

Records Disposed (*see attached list if applicable):

Records Series Title	Records Description	Scheduled Destruction Date	Revised Destruction Date

Reason(s) for Continued Retention:

Confidential Destruction ☐ Yes ☐ No	Department Director (signature)	Date

Certificate of Destruction

This completed and signed form certifies that the records listed above have been destroyed on the date shown below.

Total # of Boxes Destroyed: _____
Total # of Files Destroyed: _____

Date:

If Confidential Destruction, Witnessed By (signature)

Chief Equity Officer (Signature):

Date:

Attachment 5 – Pending

Will be provided on or before the meeting of October 28

Attachment 6

KERN REGIONAL CENTER
PURCHASE OF SERVICE
FY 2025-2026
AS OF AUGUST 31, 2025

PURCHASE OF SERVICES	07/31/25	08/31/25	2025-2026 Total
OUT-OF-HOME			
Community Care Facility	7,332,423	7,024,435	14,356,858
ICF/SNF Facility	217,126	226,819	443,945
TOTAL OUT OF HOME	7,549,549	7,251,254	14,800,803
DAY PROGRAMS			
Day Care	102,244	62,033	164,277
Day Training	6,086,265	5,311,484	11,397,749
Supported Employment	501,150	421,061	922,211
Work Activity Program			-
SUBTOTAL DAY PROGRAMS	6,689,659	5,794,578	12,484,237
OTHER SERVICES			
Non Medical Services Prof	1,494,012	1,299,089	2,793,101
Non Medical Services Prog	2,116,448	1,797,241	3,913,689
Home Care Services Prog			-
Transportation	660,932	586,825	1,247,757
Transportation Contracts	730,475	715,060	1,445,535
Prevention Services	796,108	235,825	1,031,933
Other Authorized Services	5,207,154	4,429,200	9,636,354
P & I Expense	11,617	11,259	22,876
Hospital Care			-
Medical Equipment	18,117	5,373	23,490
Medical Services Prof	279,042	177,243	456,285
Medical Servces Prog	29,340	21,389	50,729
Respite Care - In Home	4,740,707	2,472,246	7,212,953
Respite Care - Out of Home	48,388	47,698	96,086
Camps	17,083		17,083
			-
TOTAL OTHER SERVICES	16,149,423	11,798,448	27,947,871
TOTAL PURCHASE OF SERVICES	30,388,631	24,844,280	55,232,911
COMMUNITY PLACEMENT PLAN			
Community Care Facility	107,711	107,711	215,422
ICF/SNF Facility			-
Day Training			-
Non-Medical Services			-
Non-Medical Services-Programs		1,725	1,725
Transportation			
Other Authorized Services			-
Other Services			-
Medical Care - Prof			-
			-
TOTAL COMMUNITY PLACEMENT P	107,711	109,436	217,147
TOTAL PURCHASE OF SERVICE	30,496,342	24,953,716	55,450,058
Clients	14,061	9,885	

Attachment 7

KERN REGIONAL CENTER
OPERATIONS
FY 2025/2026
AS OF AUGUST 31, 2025

	PROPOSED EXPENDITURES	YEAR TO DATE BUDGET	07/31/25	08/31/25	TOTAL	(OVER)/UNDER
OPERATIONS						
Salaries & Benefits		-	2,291,102	2,862,628	5,153,730	(5,153,730)
Operating Expenses		-	1,382,040	763,064	2,145,104	(2,145,104)
SUBTOTAL OPS	-	-	3,673,142	3,625,693	7,298,834	(7,298,834)
COMMUNITY PLACEMENT PLAN						
Salaries & Benefits		-				-
Operating Expenses		-				-
SUBTOTAL CPP	-	-	-	-	-	-
FOSTER GRANDPARENT PROGRAM						
Salaries & Benefits		-	497	(497)	-	-
Operating Expenses		-	45	(45)	-	-
SUBTOTAL FGP	-	-	541	(541)	-	-
SENIOR COMMPANION PROGRAM						
Salaries & Benefits		-	4,803	4,516	9,319	(9,319)
Operating Expenses		-	4,973	4,523	9,496	(9,496)
SUBTOTAL SCP	-	-	9,776	9,039	18,815	(18,815)
TOTAL OPERATIONS	-	-	3,683,459	3,634,190	7,317,649	(7,317,649)