

**EARLY START MONITORING REPORT SUMMARY
KERN REGIONAL CENTER**

DATE OF REVIEW: JUNE 10-13, 2019

FINAL REPORT DATE: SEPTEMBER 27, 2019

ITEMS AT 100% COMPLIANCE				
REQUIREMENT		RECORDS IN COMPLIANCE	TOTAL RECORDS REVIEWED	COMPLIANCE PERCENTAGE
R1	Obtained written parental consent for evaluation/assessment. 34 Code of Federal Regulations (CFR), §303.321(a) and 34 CFR, §303.420(a)(2)	30	30	100.00%
R2	Initial evaluation determined the infant's or toddler's level of functioning in all five developmental domains including hearing, vision, and health. 34 CFR, §303.21(a)(1) and 34 CFR, §303.321	30	30	100.00%
R4	Written notice of the Individualized Family Services Plan (IFSP) meeting. 34 CFR, §303.342(d)(2)	30	30	100.00%
R8	Early intervention services are provided in the natural environment or the IFSP contains an appropriate justification when services are not provided in a natural environment. 34 CFR, §303.344(d)(1)(ii)	30	30	100.00%

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CLEARED FINDINGS

Findings cleared prior to the issuance of the report. No further action is required.

REQUIREMENT		ORIGINAL RECORDS IN COMPLIANCE	TOTAL RECORDS REVIEWED	ORIGINAL COMPLIANCE PERCENTAGE	SUBSEQUENT RECORDS IN COMPLIANCE	TOTAL SUBSEQUENT RECORDS REVIEWED	SUBSEQUENT COMPLIANCE PERCENTAGE	PRONG 1 (CHILD-SPECIFIC)		PRONG 2 (SYSTEMIC)	
								CLEARED	OUTSTANDING	CLEARED	OUTSTANDING
T3	Transition Conference occurred in a timely manner. 34 CFR, §303.209(c)(1)	29	30	96.67%	3	3	100.00%	X		X	
T4	The Local Educational Agency (LEA) was invited to the transition conference. 34 CFR, §303.209(c)(1)	29	30	96.67%	3	3	100.00%	X		X	

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NONCOMPLIANCE

Kern Regional Center must clear findings on both the child-specific and systemic levels as soon as possible but no later than one year from the final report date.

REQUIREMENT		RECORDS IN COMPLIANCE	TOTAL RECORDS REVIEWED	COMPLIANCE PERCENTAGE	PRONG 1 (CHILD-SPECIFIC)		PRONG 2 (SYSTEMIC)	
					CLEARED	OUTSTANDING	CLEARED	OUTSTANDING
R3	Initial assessment for service planning identified unique strengths and service needs in all five developmental domains, including hearing, vision, and health, prior to the initial IFSP. 34 CFR, §303.21(a)(1) and 34 CFR, §303.321	29	30	96.67%	X			X
R5	Initial IFSP meeting must be conducted within the 45-day timeline. 34 CFR, §303.342(a)	12	30	40.00%	X			X
R6	Timely provision of services. (45 days of signed IFSP) 34 CFR, §303.344(f)(1)	28	30	93.33%	X			X
R7	The IFSP must include the frequency and length of each session for all early intervention services. 34 CFR, §303.344(d)	25	30	83.33%	X			X

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					CLEARED	OUTSTANDING	CLEARED	OUTSTANDING
T1	The IFSP must include transition steps and services. 34 CFR, §303.209(d) & (e), 34 CFR, §303.344(h)(1) & (2)	29	30	96.67%	X		X	
T2	Timely referral to LEA 34 CFR, §303.209(b) and 34 CFR, §303.401(d)	21	30	70.00%	X		X	
01	IFSP includes services necessary to meet needs of child & family. 34 CFR, §303.344(d)(1)	26	30	86.67%	X		X	
05	Periodic review completed when early intervention services added. 34 CFR, §303.342(b)(1)(ii)	29	30	96.67%	X		X	
10	Referral date documented correctly 17 CFR, §52060(a)	12	30	40.00%	X		X	

R- "Regular" corresponds to the Regular Review Tool item, followed by the number of the Regular Review Tool item (ex.- R1 refers to the Regular Review Tool item number 1).

T- "Transition" corresponds to the Transition Review Tool item, followed by the number of the Transition Review Tool item (ex.- T3 refers to the Transition Review Tool item number 3).

O- "Other" refers to an additional finding, not included in the Regular or Transition Review Tool item.

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RECOMMENDATIONS

1. During the monitoring review, the Department of Developmental Services (DDS) reviewed multiple transition plans which did not identify or address concerns relating to the transition process. Many plans were determined to contain generic or canned language in the area of transition steps and services. Several plans contained similar information with minimal individualized steps and services. DDS was able to gather enough information through reviewing the IFSP and Transition Plan together to meet compliance. However, DDS recommends KRC review the transition procedures and train staff to ensure steps and services are comprehensive, individualized and address concerns relating to the transition process.