“Promoting Excellence In Early Start”

April 17, 2020
10:00 a.m.—12:00 p.m.
The Interagency Coordinating Council is an open public meeting that may be recorded, provided it does not cause a disruption to the proceedings.
Interagency Coordinating Council
On Early Intervention (ICC)

ICC Mission Statement

The mission of the ICC is to promote and enhance a coordinated family service system for infants and toddlers, ages birth to three years, who have, or are at risk for having, a disability, and their families, utilizing and encouraging a family-centered approach, family-professional partnerships, and interagency collaboration.

The History of the ICC

California has a long history of providing early intervention services to infants and toddlers, ages birth to three years, and their families. In the 1960s and 1970s, special education services for infants and toddlers were provided in public schools and funded through various local, state and federal sources. With the advent of the Lanterman Developmental Disabilities Services Act (Lanterman Act) in 1969, California demonstrated its support of young children with prevention and early intervention services for infants with developmental disabilities through the regional center system. This was a huge effort and viewed as a major investment in California’s children.

In 1988, the first ICC convened to provide advice and assistance to the Department of Developmental Services (DDS) regarding implementation of a coordinated early intervention system in California. In 1993, after five years of state and local planning activities in preparation for full implementation of Part C of the Individuals with Disabilities Education Act (IDEA), the Governor signed the California Early Intervention Services Act (CEISA: Title 14, Government Code section 95000 et seq.) CEISA established state authority to enhance California’s early intervention service system to meet the new federal requirements under Part C. CEISA assigned DDS as lead agency in collaboration with California Department of Education (CDE). Other collaborative partners involved in the ICC include Department of Social Services (DSS), Department of Managed Health Care (DMHC), and First 5 California.

Although the early intervention landscape has changed over the years in California, the ICC has continued to follow, advise, and assist DDS on the state of the early intervention community. The changes have included amendments to CEISA that brought the addition of provision of family support services by Early Start Family Resource Centers (FRC). FRCs provide services such as parent-to-parent support, information dissemination and referral, public awareness, family-professional collaboration activities, and transition for families. CEISA also clarified state coordination and collaboration with families and communities, service coordinator competencies and caseload size, evaluation and assessment, parent rights, referral to local FRCs and monitoring efforts. Lastly, CEISA was amended to clarify that the Part C program is based on existing systems and how regional centers must comply with the Lanterman Act. This includes regulations related to vendorization and rate setting as long as the application of state law does not conflict with early intervention statutes.
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2020 Interagency Coordinating Council Meeting Dates

The following is information regarding the 2020 Interagency Coordinating Council on Early Intervention (ICC) Meetings. **Unless otherwise noted, meetings will be held at Alta California Regional Center. Directions, parking, and airport shuttle information to Alta (2241 Harvard Street, Suite 100, Sacramento, CA 95815) are included in the meeting packet. Remote connection information available upon request.

Individuals who require accommodations in order to attend the meeting (i.e., assistive listening devices, interpreting services, materials in alternative format) should notify Jessica Dailey-Keithline at (916) 654-2767 or jessica.dailey@dds.ca.gov ten days in advance of the meeting. The meeting location is accessible to individuals with disabilities. Visit our website to view previous ICC meeting minutes and for additional information about California Early Start.

2020 Quarterly Meeting Dates

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<tr>
<th>January</th>
<th>April</th>
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<tr>
<td>Thursday-16th</td>
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<tr>
<td>Friday-17th</td>
<td>10am-12pm</td>
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<td><strong>Zoom Meeting</strong></td>
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<tr>
<th>July</th>
<th>October</th>
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<td>Thursday-16th</td>
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PROPOSED AGENDA (EXAMPLE)

**Day One Meeting**

The meeting will include:
- Review of previous Meeting Minutes
- Review of Agenda
- Review of previous meetings’ tasks
- Announcements
- State Systemic Improvement Plan (SSIP) updates
- Improving State Systems and Communication & Outreach Committees

**Day Two Meeting**

The meeting will include:
- Review of Agenda
- Committee reports
- Action items (as applicable)
- Reports from the State Department Representatives
- Public and parent input
  
  **15 minutes reserved from 10-10:15 a.m.**
  - Early Intervention presentation
Instructions for joining remotely for the ICC Meeting

The ICC Meeting will be offered in a webinar format. You are invited to attend a Zoom meeting. Participants need to call into the teleconference line AND login with a computer to view any online materials.

To Connect with Audio:

Dial Toll-Free Number (in USA). Dial in #: 1 (877) 369-0926
Meeting ID: 224 469 332

To Connect with Web:

Join Zoom Meeting
https://wested.zoom.us/j/224469332
Meeting ID: 224 469 332

The best way to join a scheduled meeting is by clicking the link you were provided when you either scheduled it or were invited to it (from email, calendar invitation, etc.)

The link will launch Zoom and place you in the conference. This is true for all staff, as well as non-staff.

If you do not have the app, your browser will download the installer and prompt you to run it. Once the installer has run, it will ask for your name and then take you into the meeting.

A download should start automatically in a few seconds.
If not, download here.
Connect audio

Choose the **Join Audio Conference by Phone Call tab** and dial in using the provided information.

![Join Audio Conference by Phone Call](image)
Easy Tips for Successful Web Conferencing and Conference Calls*

**Participant Courtesies**

1. Use a landline if possible for the least static interference.
2. Avoid cellular and cordless phones. The potential static and poor or broken connections reduce the sound quality for all conference call participants. If you must use a cell phone, find a quiet location with excellent reception and limit moving around during the call.
3. Know your phone features and how to use them. Do not wait until the call to figure them out.
4. Turn off call waiting. It is very disruptive to the call. Most call waiting features can be deactivated by pressing 70# or *70 before dialing the conference number. (Check with your carrier.)
5. Use the speaker feature on your phone only if the room is quiet and others in the room are participating on the call with you. Speakerphones can add to the overall noise of the teleconference and create a hollow sound on the call.
6. Choose a quiet location. Avoid background noises such as a radio, TV, pets, or side conversations with others.
7. Stay focused and participate on the call. Avoid using this time to answer email, eat, clear off your desk, file papers, or talk to others.
8. Be on time.
9. Introduce yourself when you join the call. If you join the call late, wait for a break in the conversation to announce that you have joined or until the moderator asks who joined.
10. Introduce yourself each time you speak. Not everyone will be familiar with your voice.
11. Mute your phone (*6) if you are not participating at the time, need to talk to someone else, or need to leave the call for any reason. Unmute your phone (#6) when you are able to return to the call.
12. Never put the call on hold. Either mute your phone (*6) and unmute your phone (#6) to rejoin, or hang up and call in again if you must leave the call.

**Facilitator/Chairperson Courtesies**

1. Be familiar with the audio controls.
2. Start—and end—at the scheduled time.
3. Have an agenda—preferably one that has been distributed prior to the conference.
4. Identify yourself when you first connect to the conference call.
5. Identify yourself each time you speak. Others may not know your voice. Speak clearly and at a moderate speed.
6. Take roll call at the conference start so that everyone knows who is involved and listening.
7. Review the rules of etiquette and ask that each participant identify him or herself before speaking.
8. Allow only one individual to speak at any given time during the conference.
9. As much as possible, when appropriate, address questions to individuals by name.
10. Mute the microphone or speakerphone (*6) if you must speak to others in the room with you during the conference. Unmute by pressing #6.
11. Address agenda items in their specified order.

*Thank you to the Family Resource Center Network of California, the source for many of these tips, for sharing its teleconference etiquette.
April 17, 2020

AGENDA
# April ICC Meeting Agenda

**Date:** Friday, April 17, 2020  
**Time:** 10:00 a.m.—12:00 p.m.  
**Place:** Zoom Conference Call  
See Outlook Invite for link and meeting ID

<table>
<thead>
<tr>
<th>AGENDA ITEMS</th>
<th>RESPONSIBILITY</th>
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</thead>
</table>
| **10:00—10:15 Opening**  
  - Welcome  
  - Introductions/Roll Call  
  - Approval of January Meeting Minutes  
  - Chair’s Report and Review of Agenda  
    - Letter to Nancy Bargmann  
    - Letter to Kris Perry  
    - Letter to Nadine Burke Harris  
  - Update on Strategic Plan (Doug Erber)  
  - Part C literacy:  
    - *Department Directive on Requirements waived due to COVID-19*  
    - *Colorado’s Development of Statewide policies and Procedures to implement Telehealth for Part C Service Delivery*  
    - *Use of telehealth in early intervention* |  |
  - Provider Voices From the Field | DDS Providers |
| **10:45—10:55 Department of Early Childhood**  
  - Clarification of the role of DDS/Part C | Teresa Anderson  
  Marty Omoto |
| **10:55—11:15 Voices from the Field**  
  - Zero to Three  
  - Statewide Screening Task Force  
  - Infant Development Association of California  
  - First 5 Association  
  - The Arc  
  - California Disability Community Action Network | Christina Nigrelli  
  Karen Moran Finello  
  Fran Chasen  
  Heather Little  
  Teresa Anderson  
  Marty Omoto |
<p>| <strong>11:15—11:25 Family Resource Center Network of California (FRCNA)—Report</strong> | Yvette Baptiste |</p>
<table>
<thead>
<tr>
<th>Time</th>
<th>Description</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:25—12:00</td>
<td>Department and Council Member Reports&lt;br&gt;Representatives will provide a summary and allow for discussion, questions and answers</td>
<td>Jim Knight, Dept. of Developmental Services&lt;br&gt;Kristin Wright, California Dept. of Education (CDE), Special Education&lt;br&gt;Leanne Wheeler, CDE, Homeless Education&lt;br&gt;Shanice Orum, Dept. of Social Services&lt;br&gt;Lisa Witchey, Dept. of Social Services&lt;br&gt;Suzanne Sherinian, Dept. of Managed Health Care&lt;br&gt;Richard Olney, Dept. of Public Health&lt;br&gt;Julie A. Taylor Souliere, CHHS Child Mental Health&lt;br&gt;Michelle Dove, Head Start Agency</td>
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January 16–17, 2020
Past Meeting Minutes
State Interagency Coordinating Council (ICC) on Early Intervention
Day One Meeting
Thursday, January 16, 2020
Location: Alta California Regional Center
10:00 a.m. - 4:00 p.m.

Opening

Welcome: Due to her unexpected flight cancellation, Dr. Marie Kanne Poulsen, Chair, requested that ICC Member Matt Chesnut, call the meeting to order on her behalf. The meeting was called to order at 10:07 a.m.

Introductions/Roll Call were conducted with a request from Dr. Poulsen to provide an early intervention themed New Year’s resolution for 2020. Themes presented included improving parent/family support, increasing collaboration, enhancing personnel development, and turning dreams into realities.

Dr. Poulsen arrived and resumed her role as Chair following Introductions/Roll Call.

Approval of October 17-18, 2019 Minutes
• Suzanne Sherinian was noted as excused; however, she was present. This will be corrected.
• Matt Chesnut made a motion to approve the Minutes as corrected and the motion was passed.

Review of Agenda
The following Agenda items were moved to Day 2 (January 17): Announcements, Part C Literacy – Preventing Adverse Childhood Experiences (ACEs), and the DDS Update on the Budget and reimbursement rates.

Annual Performance Review, Sharon DeRegio, California Part C State Coordinator, Sharon explained that DDS submits its Annual Performance Report (APR) to the Office of Special Education Programs (OSEP) to on both performance and compliance indicators. The APR is due to OSEP February 3, 2020. The APR and disaggregated data will be available on the DDS website this summer. Emily Woolford then provided an overview of the data to be reported on the 2018/19 APR.

Group discussion followed, and the following items were clarified by DDS:
• Transition is an area that has been identified as needing improvement. As a result, DDS:
  o will continue to provide one-on-one technical assistance to regional centers and will create a feedback loop about the technical assistance provided.
  o is collaborating with the California Department of Education on enhancing data quality and addressing program challenges; and
  o is developing training for the field addressing transition.
• DDS is changing the Early Start monitoring process for more frequent and improved data. DDS is hoping to capture data from all 21 regional centers next year.
• DDS received positive overall feedback about the State Systemic Improvement Plan. DDS wants to address fidelity to evidence-based practices moving forward, i.e., how well practices are being implemented as intended.

Voices from the Field
IDA Policy Update, Fran Chasen IDA Public Policy Liaison, Co-Chair Public Policy Committee
• Fran Chasen reviewed the purpose, mission, and values of the Infant Development Association (IDA) as well the history and evolution of the organization. IDA’s South Chapter began in 1974 by a group of interdisciplinary professionals and parents; the River Valley/North Chapter began in 1984.
• There are two chapters: one in the north and one in the south.
• The early intervention system is a result of families expressing their concerns, the lack of acknowledgement of brain development, and no recognition that children who were different could learn. IDA brought professionals together to focus on training and support.
• The Public Policy Committee keeps the organization informed about and involved in the public policies affecting the Early Intervention community, analyzes pressing policy issues related to laws and regulations, communicates key findings and program performance results, and makes recommendations to the organization for appropriate actions in the form of strategies to ensure quality outcomes. Policy committee members paticipate on public and private advisory councils and groups.
• Building relationship with legislators are key. Legislators do not understand Early Start. They don’t recognize the economic benefits of Early Start in their community, number of services provided, or the benefits that are enriching their communities. The Governor is interested in early education and has put money into achieving different goals, but legislators do not understand a focus on children under 5. Parents need to be in the room to describe their experiences.
• 2020 Early Start/Early Childhood Education (ECE) Policy Update:
  o Southern California, January 27, 2020
  o Northern California, February 6, 2020
• The current pressing issue being addressed by IDA is implementation of a new rate model for programs in California. The Governor’s proposed budget now includes an 8.2% increase for specific service codes that were left out, but these won’t take effect 2021 and they will sunset in 2023.
• January 22, 2020: Senator Richard Pan is having a hearing on the Rate Model (9:00 a.m. in Room 4203). The Rate Model is done, but pieces still need to be addressed, such as the Personnel Model from 2010 that is being put forward as the current model. These recommendations were relevant in 2010, but the early intervention community is not recommending that model today.
**Strategic Plan Update, Ardith Ferguson, WestEd**

Ardith Ferguson reviewed the strategic planning process that will create a strategic plan for the next three years.

- **July 2019:** Pre-work was completed to identify priorities.

- **October 2019 ICC Meeting:**
  - Analysis of Strengths, Weaknesses, Opportunities, and Threats (SWOT); prioritized key issues; and began Committee work to plan goals, objectives, and next steps.
  - Ardith presented strengths and weaknesses/challenges, and opportunities and threats from the SWOT analysis.
  - October Day 2: Committees met and began developing goals, objectives, and timelines.

- **January 2020:**
  - January 16: Changes to ensure objectives are Specific, Measurable, Achievable, Realistic, and Timely (SMART).
  - January 17: Committees will report on which product(s) the Committee will complete by the end of June 2021.

- **April 2020:** Each Committee should have their 2020-2021 details finalized and ready to present to the full ICC.
MEMBERS PRESENT
Matt Chesnut
Michelle Dove
Susan Ducore
Marie Kanne Poulsen
Richard Olney (on phone)
Sheila Self
Suzanne Sherinian
Leanne Wheeler

MEMBERS ABSENT
Sally Grevemberg
Alma Martinez*
Julie A Taylor Souliere

MEMBERS EXCUSED
Norayma Cabot
Doug Erber*
Lucero Irizarry

LEAD AGENCY
Andrew Cavagnaro
Sharon DeRego
Jessica Dailey-Keithline
Mai Moua
Townley Saye
Cathy Schulze
Shay Willis
Emily Woolford

WESTED
Elissa Einhorn
Ardith Ferguson
Angela McGuire
Virginia Reynolds
Jennifer Teykaerts

COMMUNITY REPRESENTATIVES PRESENT
Teresa Anderson
Tony Anderson
Kathy Angkustsiri
Yvette O. Baptiste*
Karen Bohall-Ortega
Florence Bracy*
Shan Chan (on phone)
Fran Chasen
Edyth Gallardo
Samantha Hebermehl
Leah Howley
Laurie Jordan*
Heather Little
Gayatri Mahajan
Christina Nigrelli
Michelle Oliver (on phone)
Marty Omoto
Julie Rems-Smario
Sheri Rosen
Nancy Sager
Patricia Salcedo*
Debbie Sarmento*
Tara Sisemore-Hester
Pablo Velez
Diane Williams

COMMUNITY REPRESENTATIVES ABSENT
Brigitte Ammons
Maurine Ballard-Rosa
Wanda Davis
Rachel Hagans
Amy Hansen
Jordan Lindsey

COMMUNITY REPRESENTATIVES EXCUSED
Linda Landry
Robin Millar
Karen Moran Finello
Scott Turner

OTHERS PRESENT
Ali Barclay
Jazmine Blackman (application pending)
Karmina Barrales
Julian Garcia
Sara Leff
Charna Martin
Ellen Michael
Patty Moore
Shanice Orum (pending appointment)
Lisa Witchey (pending appointment)
Sharon Zone

*Parent
Opening

Dr. Marie Kanne Poulsen, ICC Chair, called the meeting to order at 9:02 a.m.

Introductions/Roll Call were conducted.

DDS Update – Budget and Reimbursement Rates with Jim Knight, Department of Developmental Services (DDS) (moved from Day 1)

Jim Knight reported that the Governor’s Budget was released on January 10, 2020. Hearings will be conducted with the Senate and Assembly in February and a revised budget will be released in May. The budget is implemented by June 15, 2020 for the next fiscal year.

- Rates Increases:
  - The budget proposes to include additional services in the rate increase, including Early Start specialized therapeutic services, which is proposed to increase by 5.0%, and infant development programs, which is proposed to increase 8.2%. This is targeted to begin January 2021.
  - The budget needs to be approved first, followed by federal approval for reimbursements.
  - The budget does not envision retroactive payments.

- Performance Incentive Program:
  - The Governor’s proposed budget includes $78 million to implement a Performance Incentive Program that would build on current performance contracts with Regional Centers.
  - The intention is to work through the Developmental Services Task Force and other stakeholders to get recommendations on performance measures and outcomes that help move the system forward.
  - The program would go into effect July 2020 if approved in the budget.
  - The ICC meets in April. This is a good time to get further feedback from the ICC and an update on discussions with other stakeholders.

- Developmental Centers:
  - Closures were announced in 2014. It was anticipated that all remaining consumers in Developmental Centers would be in new residences by the end of December; very few remain.
  - This doesn’t include consumers who reside in the portion of Porterville that is forensically based.
  - Some developmental centers will be sold, and others will be repurposed.
Rate Study:
- The study was published March 2019 and included models and suggestions to recategorize services. Changes were made in response to public comments. Information is available at www.dds.ca.gov.
- Updated estimates about the fiscal impact of the rate study as implemented in January allow comparisons to March.
- All rates were updated based on updated information regarding salaries. Bureau of Labor statistics information was applied to the model.
- The rate for infant development services is proposed to be based on the individual who is providing each hour of service and considers the expanded qualifications of some providers, while building in support costs of others providing services.
- DDS will continue the discussion with the Developmental Task Force to see how DDS can use the incentive program and other strategies to invest in the system and to determine outcomes.
- In response to questions about increases and communications with DDS, Jim apologized for the lack of response to a letter sent by the ICC and announced that a formal response to the letter is on its way.
- The rate study has been discussed in conjunction with the current system and fiscal reform groups to determine how to move forward and incentivize outcomes. The budget does not assume implementation now. The study suggests a way to update rates automatically, but it still needs to undergo the approval process.

Video- Teaching Over Time (provided by Michelle Oliver)

Part C Literacy – Preventing Adverse Childhood Experiences (ACEs) (moved from Day 1)
- Marie reported in the last two years, the Governor supported a $50 million investment in public awareness of training and screening to understand the impact of diverse childhood experiences, i.e., domestic violence, food insecurity, and others.
- Beginning January 1, 2020, physicians have been given incentives for children served by Medi-Cal to be interviewed about their experiences and to determine supports needed by children and families.
- The Pediatric ACEs and Related Life-events Screener (PEARLS) assessment tool: there is one for children and one for adolescents. This has been built up in our community thanks to community Mental Health Services Act (MHSA) funding.
- Children birth-5 that have medical necessity will be referred to mental health services.
- Information from the Centers for Disease Control and Prevention (CDC) and the National Center for Injury Prevention and Control will be promoted on the Early Start Neighborhood.
Public Input

Cindy Rubin, parent, shared the emotional story about her family’s journey with their daughter, Darby Jean who was born in August 2017 with a rare chromosomal disorder, and who passed away in 2019. She is committed to informing the ICC so others might have an easier path.

- Ms. Rubin described that missed opportunities caused delays in receiving services and the emotional trauma she and her husband experienced, which began during the pregnancy.
- While given information about regional centers, she was told that the hospital had never met a regional center representative.
- The impression she had from doctors is that they had given up on the family and their baby. There was no discussion about helping her daughter live; they only discussed waiting for her to die.
- Darby was released to her home with no equipment, and the family found that each entity designed to help just pointed fingers at each other to help. The family had to purchase equipment on Amazon and submit receipts for reimbursement.
- She felt as though the Service Coordinator treated their case as ordinary and was only concerned with paperwork.
- Following 6 months of pediatric home hospice, the family was told the service was no longer needed because Darby continued to live.
- At every level, the family was met with resistance. Ms. Rubin wrote letters to managed health care, politicians, and agencies, and faxed medical reports, completed consents, etc., but everything was an uphill battle to get people to care.
- “My belief is that agencies must do a better job at collaborating especially when the lives of medically fragile children are on the line.”
- Marie requested a meeting with the family within the next month to obtain further information.

After Ms. Rubin shared her story, members of the group responded by thanking her for speaking out, apologizing on behalf of the system, and expressing a renewed commitment to families with medically fragile infants and toddlers.

Samantha Hebermill, parent, commented about the Annual Performance Report and the need for data, specifically as it relates to children who are deaf and hard of hearing. She emphasized the importance of data serving as a benchmark and a starting point.

Patty Moore made two comments:
- She requested clarification about determination for Status 2 for infants and toddlers in Early Start. This seems to vary around the state. It has been reported that the only way they are becoming eligible for services through a waiver is when they are listed under palliative or hospice care. She requested language about how “substantial disability” is being interpreted.
- Local areas need direct technical assistance about regulations, most immediately, how they relate to transition at age 3. She would like to learn how to
access data related to children leaving Early Start who no longer need specialized services and supports and who do not need Part B services, those who are eligible for Part B services, and those who are eligible for regional center services.

Nancy Sager announced a training with Family Voices, on February 8 in Sacramento.

Committee Reports

Improving State Systems Committee

- Foster Care Subgroup: An Early Start discipline group was formed to share information and to collaborate on a memorandum of understanding. The Department of Social Services is getting ready to disseminate a memorandum. The Subgroup requests information be linked to the Early Start Neighborhood as we continue to work toward improving entry of children in foster care into Early Start.
- Insurance Subgroup: TBP.
- Family Navigation of Systems Subgroup: An infographic was presented to the ICC for feedback. It needs to be readied for reproduction in various formats for different venues in the community, i.e., posters in a pediatrician’s office. The subgroup will also need to make sure the document is accessible.

Communication & Outreach Committee: The Committee is focusing on outreach for eligible consumers. They will be looking at the Early Start website, Central Directory, and the Early Start Neighborhood to review language to see how different groups can be helped to understand Early Start.

Identification of autism spectrum disorder (ASD) in Toddlers & Evidence-Based Early Intervention for Part C Programs, Sarah Dufek, Ph.D., Assistant Professor, Department of Psychiatry and Behavior Sciences, UC Davis MIND Institute

Dr. Dufek presented on three areas:

1. What do we know about identification in children younger than 3?
   - Signs usually emerge in the 1st or 2nd year of life. We can now look for predictors. Diagnosing ASD is challenging because symptoms are different depending on age, language level, and nonverbal and cognitive ability. What makes you meet criteria for ASD at 3 is different than at 18 months or older. Early red flags can be subtle – parents may not be aware, and symptoms can be easily dismissed. Assessment implementation requires different strategies and flexibility and comfort with both toddlers and their parents. Diagnosticians need to listen to parents and prioritize time with them to get a sense of child’s skills while also looking at child.
   - Later onset group is 20-30% of cases. Children look to be typically developing, but then around 2 years old, we see a regression and loss of skills. Some children may plateau or fail to progress like their peers.
• Challenges Assessing ASD in Toddlers: Diagnoses are less stable in young toddlers with delays who are not given an ASD diagnosis. If a toddler does not meet the criteria for ASD during the first assessment, it does not mean they are cleared for an ASD diagnosis. Some toddlers can mask symptoms, i.e., often those with verbal skills and an average/above average IQ. Now we recommend close monitoring and repeat assessments. Conducting assessments requires a lot of training in the use of standardized measures and knowledge about ASD as well as typical development.

• It is important to catch kids early because diagnoses are stable through school age. Some children move off the spectrum with intervention, but still have residual effects that they need help with.

• Early detection with subsequent early intervention can lead to substantially better outcomes, such as improved nonverbal problem solving and fewer maladaptive behaviors, that would require of services later in life.

2. What interventions are available? Many strategies are available for ASD that target different ages. There are evolving strategies; an evidence-based practice approach must consider research and context, i.e., the home. Those involved in behavioral treatment and developmental strategies realized their strategies were similar and fused them into Naturalistic Developmental Behavioral Interventions. This approach contributes to teaching skills and how interventions are being delivered.

3. Current research projects: Dr. Dufek spoke about numerous research projects being conducted via the UC Davis MIND Institute. Additional information is available at https://health.ucdavis.edu/mindinstitute/.

Voices from the Field
• First 5 Association, Heather Little: The new Interim Director is John Simms, former Executive Director from Stanislaus. The Association is supporting a house bill to restore funding to Part C.
• The Arc, Teresa Anderson: The Arc is working with IDA on advocacy for early intervention. a policy conference is scheduled for April.
• California Disability Community Action Network, Marty Omoto: An update was provided about budget hearings regarding early childhood services. Marty emphasized the need to keep track of all of information regarding the Master Plan to see how the ICC can contribute. and to educate that the needs of early intervention are unique. He also proposed that the ICC invite Dr. Nadine Burke Harris, California’s Surgeon General, to discuss the Master Plan. Marty also requested an update from DDS about the $11 million to reduce disparity. He encouraged continued efforts to have legislative representation at the ICC. Marty also suggested a work group be developed to report to the Developmental Services Task Force.
Family Resource Center Network of California (FRCNA)—Report, Yvette Baptiste

- Challenges regarding access are based on density and geography. This is important as we think about how we interact across California. It’s through our local connections that we can support families regardless of where they live.
- We continue to have families reporting about transition to Part B and status of determination.
- The primary source of funding for the FRCNCA is the Part C contract that supports training and technical assistance as well as capacity building. The FRCNCA has provided several webinars on topics such as grant writing and skills for family support. They also have a robust communications system for directors and staff, including social media.
- The FRCNCA has a very good partnership with CAPTAIN to ensure families have access to information about evidence-based practices for autism. They also have a strong relationship with Family Voices. The Family Voices Health Summit is March 15-17, 2020. Yvette and Linda Landry serve on the USC UCEDD Consumer Advisory Committee and share ICC minutes. The FRCNCA is also working on increasing their partnership with Indian Health Services.
- Yvette has been helping First 5 LA with Help Me Grow LA, to increase screening and identification with respect to high caseloads and staff support.
- The FRCNCA is working on the Child Abuse and Neglect review panel and creating recommendations.

Department and Council Member Reports

Representatives will provide a summary and allow for discussion, questions and answers

Jim Knight, Dept. of Developmental Services

- Funding in the Governor’s budget proposes to enhance the caseload ratio for children under 5.
- CDE trailer bill language aims to improve transition from Early Start to local education agencies and includes working with stakeholders from schools, county offices of education, regional centers, and others.

Sheila Self, California Dept. of Education (CDE), Special Education

- A new State department focused on early child development has been proposed to form under the California Health & Human Services Agency (CHHSA) in July 2021. Sheila recommends inviting someone from CHHSA to speak to the ICC with updates.
- A Special Education project called Supporting Inclusive Practices has a bill going through to provide technical assistance to Local Educational Agencies (LEAs) regarding improving and establishing inclusive practices through high school. The goal is to have children with different learning styles educated with typically developing peers.
- The Inclusive Early Education Expansion Program is scheduled for additional funding. Current awards are expected at the end of January, and 104 LEAs and County Offices of Education applied. The program ensures that children served through Early Start are going into classrooms with same-age peers.
• The child care/preschool landscape is a patchwork and the Governor is working towards greater access and more options.
• The Newborn Hearing Screening Program has the goal of identifying children who are deaf or hard of hearing by 3 months and to provide services by 6 months of age.
• CDE receives $230,000 per year to provide a learning community that advises developmental screening programs; operate the Parent Links program for newly identified deaf and hard of hearing babies; and to establish and promote a deaf coaching program.

Leanne Wheeler, CDE, Homeless Education
• The Office is working with Head Start on a series about how to identify homeless children.
• An audit was recently completed that found that California is under-identifying children who are homeless. The office works with communities to raise awareness. Many families are doubling and tripling up on housing. As rents go up, will see more homeless due to loss of housing. Leanne provided the definition of homelessness: An individual who lacks safe, regular, and adequate housing.

Shanice Orum, Dept. of Social Services (DSS)
• DSS is working on a “cradle to career” data system and consumer website system.
• The Child Development Block Grant requires a one-stop portal to help families make decisions about their children. “My Child Care Plan” is an example.
• The new data system is working toward integrating data into one source to better collect and display child outcomes.
• Former appointee to the ICC, Kim Johnson, is working on the Master Plan for Child Care.

Suzanne Sherinian, Dept. of Managed Health Care
• The Help Center addresses consumer complaints. The Department regulates public health plans, but county organized health system plans are not required to be regulated, although they can do so voluntarily.
• An important resource is our Consumer Health System Alliance that provides legal services regardless of income.
• The Department also handles whistleblower complaints.

Michelle Dove, Head Start Agency
• The Regional Program Director has retired.
• Head Start is focusing on working with the census to advocate and partner with them.

Meeting adjourned at 1:02 p.m.
MEMBERS PRESENT
Matt Chesnut
Michelle Dove
Susan Ducore
Doug Erber*
Marie Kanne Poulsen
Richard Onley
Sheila Self
Suzanne Sherinian
Leanne Wheeler

MEMBERS ABSENT
Sally Grevemburg
Alma Martinez*
Julie A Taylor Souliere
Rachel Hagans
Amy Hansen
Kelly Young

MEMBERS EXCUSED
Norayma Cabot
Tony Anderson
Kathy Angkustsiri

LEAD AGENCY
Andrew Cavagnaro
Sharon DeRego
Jessica Dailey-Keithline
Mai Moua
Townley Saye
Cathy Schulze
Shay Willis
Emily Woolford

WESTED
Elissa Einhorn
Ardith Ferguson
Angela McGuire
Virginia Reynolds
Jennifer Teykaerts

COMMUNITY REPRESENTATIVES PRESENT
Teresa Anderson
Yvette O. Baptiste*
Karen Bohall-Ortega
Florence Bracy*
Shan Chan (on phone)
Fran Chasen
Edyth Gallardo
Samantha Hebermehl
Leah Howley
Luceron Irizarry (on phone)
Laurie Jordan*
Heather Little
Gayatri Mahajan
Christina Nigrelli
Michelle Oliver (on phone)
Marty Omoto
Julie Rems-Smario (on phone)
Sheri Rosen
Nancy Sager
Patricia Salcedo*
Debbie Sarmento*
Tara Sisemore-Hester
Pablo Velez
Diane Williams

COMMUNITY REPRESENTATIVES ABSENT
Brigitte Ammons
Maurine Ballard-Rosa
Wanda Davis
Rachel Hagans
Amy Hansen
Jordan Lindsey
Kelly Young

COMMUNITY REPRESENTATIVES EXCUSED
Linda Landry
Robin Millar
Karen Moran Finello
Scott Turner

OTHERS PRESENT
Ali Barclay
Jazmine Blackman (application pending)
Karmina Barrales
Julian Garcia
Charna Martin
Patty Moore
Shanice Orum (pending appointment)
Lisa Witchey (pending appointment)
Sharon Zone