

Interagency Coordinating Council (ICC) on Early Intervention

Day 2 Meeting Minutes

August 7, 2026

[Meeting Recording](#)



MEETING MINUTES

OPENING AND HOUSEKEEPING

- Jasmine Suo shared housekeeping items, including how to access Spanish and American Sign Language (ASL) interpretation, how to share comments, how to use chat, and how to submit written comments to DDS.
- Dr. Marie Poulsen welcomed everyone and welcomed three new community members: Jenifer Pearsall, Christina Blevins, and Joe Perales.
- Jane Lee performed roll call for ICC voting members.

AGENDA REVIEW

- Dr. Poulsen reviewed the agenda. No changes were made to the agenda.

REVIEW OF ICC MISSION, PURPOSE, AND THEME OF THE MEETING

- Dr. Poulsen reviewed the mission and vision of the ICC. The theme of this month's meeting is Importance of Early Start/Providers and Families.

COMMITTEE REPORTS

Improving State Systems – Susan Ducore and Yvette Baptiste

- Susan Ducore noted that there was confusion over what the Improving State Systems Committee was all about and Yvette Baptiste suggested including a slide in the future meeting. Fran Chasen mentioned that they will put together a slide on the role and purpose of the committee. Fran said that the committee's role and support is to review the current Early Start service system, see how it functions, and consider what areas need improvement. The purpose is to provide well intended necessary services to make it easier for families and young children to qualify for Early Start and participate in the program.
- Susan Ducore shared that the committee reviewed the Early Start survey results, which included the top Early Start challenges and facilitators. There were 336 English and 45-55 Spanish responses collected. The committee decided to close the survey and proceed with analysis, acknowledging the underrepresentation of Spanish-speaking respondents.

- Some of the top Early Start challenges identified from the survey include knowing that the program exists, getting into the program, understanding services, and transitioning to services after age three.
- The committee also discussed barriers to survey completion, such as survey fatigue, Spanish-speaking community hesitancy, and the inability of regional centers to distribute external surveys unless DDS requests it.
- Yvette Baptiste reported that some of the committee members presented some feedback on the survey and they will use that for any future survey efforts.
- The committee reviewed the 2027 ICC meeting schedule and proposed extending the Wednesday meeting time to 4:00 PM to provide additional time for discussion and ICC recommendation development. The committee also proposed holding more structured committee meetings that lead to more concrete recommendations.
 - Michelle Oliver commented via chat that she agreed on the Wednesday time increasing. Again, would like to see a shift to Wednesday/Thursday as starting point of shift. And perhaps day one starting at 10:00 a.m. or even 12:00 - 4:00 p.m. to allow adequate time.
- The committee co-chairs have reached out to existing committee members who have become inactive regarding their continued participation. Members were invited to contact the co-chairs with any membership questions or concerns.
- The committee's public input period included multiple comments expressing concerns about the clinical supervision rate issue. Commenters stressed the urgency of the matter and would like the issue to be escalated to DDS for corrective action.
 - Marty Omoto commented via chat that he mentioned other families and individuals who spoke other languages (including Chinese, Tagalog, Vietnamese), ASL and those with hearing loss were also possibly underrepresented in the survey (though there wasn't any specific demographics surveyed on other language speaking individuals) during the committee meeting yesterday. He added that it is critically important to mention other individuals and families who speak other languages and come from other ethnic groups to underscore their commitment to inclusion and diversity.
 - Yvette Baptiste responded via chat that the chat comments from the meeting will help inform the limitations in the survey analysis. She noted that the Early Start survey was a quick survey not with high fidelity to research methods and therefore should expect limited expectations on what it can say more broadly. Yvette also responded that the committee discussed Marty's concern during yesterday's Improving State Systems

Committee meeting and she apologized for inadvertently overlooking including this content in the brief committee report out this morning, and she appreciated Marty's participation and input over this concern. The committee members discussed this issue and the potential impact on feedback received from the survey. This was recognized by the committee as a limitation and one that would be taken into consideration regarding final analysis/report and future survey development/outreach.

Communications and Outreach Committee - Doug Erber and Robert Rochin

- Doug Erber and Robert Rochin shared that the committee discussed the 2027 ICC meeting schedule. Members felt that the new format could help reduce travel burdens, particularly for families and members traveling long distances. Several members felt that the proposed Wednesday committee time of 1:00–3:00 p.m. may be too short and suggested extending it to 4:00 p.m. or beginning at Noon. Members also suggested holding more frequent or longer meetings between quarterly ICC meetings to maintain momentum. The committee emphasized the importance of preserving the opportunities for networking and relationship building, recognizing that some of the most valuable collaboration happens outside of the formal meeting agenda.
- Members also supported holding committee meetings on Wednesday followed by possible new member orientation before the full ICC meeting on Thursday. The committee also discussed offering recorded webinars or learning sessions between ICC meetings to provide family-focused information, professional development, and background on future ICC themes.
- The committee also recognized that we have to try to make hybrid participation more engaging. Some suggestions were to incorporate facilitated networking breakout groups and interactive tools that were successful in the past like Mentimeter to encourage participation from both in-person and virtual attendees.
- The committee will continue developing a plain-language, accessible new member orientation PowerPoint for review in November. Members also discussed adapting the existing mentorship materials into a model that is manageable for a volunteer committee, potentially pairing new members with mentors during the orientation process.
- The committee will continue working on the request for an ICC logo and they will also work on an ICC tagline.
- The committee agreed that targeted outreach and dissemination should become a recurring agenda topic. Members discussed creating an annual communications calendar highlighting timely resources that ICC members can

share through their local networks, including family education, safety information, and ICC recruitment materials.

- The committee's public comment period included a formal recommendation that the committee meet more frequently throughout the year, potentially once a month. Monthly meetings could provide dedicated time to identify and develop promotional, recruitment, and outreach materials for members to distribute through their communication channels.
 - Michelle Oliver commented via chat that these are great suggestions on engaging community and virtual involvement.

PUBLIC INPUT

- Jane Lee provided reminders about public input parameters.
- Andrea Davis thanks DDS for clarifying that developmental relationship-based interventions (DRBI) are appropriate for children ages 0–3, as it indicates funding by the regional centers. She raises concerns about DDS's position that DRBI program may have been disallowed due to a coding or vendor issue, even though adaptive skills align with DRBI approach. She notes that according to SDRC, DDS stated DRBI approaches like DIR Floortime are not evidence-based, despite over a decade of supporting research. She also highlights delays in implementing SB 805 regulations, leaving families and providers without clear guidance. She urges DDS to provide clear guidance so families transitioning out of Early Start aren't left without support.
- Janelle Brasil explained that Touchstone Family Developmental Center has provided regional center-funded DIR Floor time services for children ages 2–12 for over a year and has participated in IFSP meetings as early intervention specialists. Despite the availability of a regional center-funded DIR floor time program, they have never participated in an IFSP meeting where DIR was presented alongside ABA as an evidence-based option for families of children ages 2 to 3. Her concern is that recommendations for intensive intervention are being made before professionals have understood the child. She requested DDS to ensure regional centers present Early Start families with balanced information about all evidence-based intervention options so they can make informed decisions.
- Morgan Barker shared that her organization provides DRBI services but was recently informed by San Diego Regional Center that its vendorization could not become operational because DDS determined DIR/DRBI was not evidence-based. She raised concern about the lack of a transparent review process and uncertainty for providers, regional centers, and families. She requested the ICC recommend that DDS establish a transparent, stakeholder-informed process for

evaluation DRBI and emerging service models and provide clear guidance to the regional centers.

- Morgan Barker also shared the link to [SB 805](#).
- DJ Tomko expressed interest in collaborating with DDS and the ICC on Early Start. He requested that the ICC update its bylaws to require at least one representative from the State Council on Developmental Disabilities as part of the council's composition.
- Yvette Baptiste expressed support for DRBI while noting uncertainty about their classification as evidence based. Yvette requests a more balanced presentation addressing why DDS determined that DRBI is not evidence-based. She recommended that independent academic experts or neutral parties could present their perspectives. She also supported Morgan Barker's request for greater transparency.
- Michelle Oliver recommended that San Andreas Regional Center be considered a pilot site for the initiatives discussed in yesterday's DDS presentation. Michelle described her ongoing support for private infant programs, intake/referral/assessment processes, and professional development. She highlighted training areas, such as assessments, trauma-informed practices, and cultural sensitivity, and noted that San Andrea's approach could be a model for other regional centers.
- Fran Chasen provided a high-level update on the information from the Infant Developmental Association (Voices in the Field). She discussed proposed changes to the Head Start regulations and concerns about their potential effects on staffing, child ratios, and service quality. She also provided an update on a California Assembly Budget Committee hearing on proposed equitable access to intake and services through a DDS trailer bill. She also raised concerns about the continued use of the Client Evaluation Department Report (CDER), as it is decades-old and may have potential effects on the standardized intake on children and families transitioning from Early Start to the Lanterman system. You can find information on the [IDA](#) website.
- Lisa Schoyer raised concerns about ABA being identified for children before they receive a diagnosis. She spoke specifically on behalf of families of children with fetal alcohol spectrum disorder (FASD), noting that ABA may be harmful for children with FASD because of their cognitive and executive function challenges. She suggested relationship-based interventions as an alternative approach and noted the difficulties families face in obtaining appropriate diagnoses.
 - Lisa Schoyer also raised concerns via chat about applying behavioral modification approaches such as ABA to children with undiagnosed or diagnosed [FASD](#), noting that cognitive and neurological differences may make these approaches harmful or ineffective. She advocated for DRBIs

that focus on understanding the child's needs and provide appropriate support, particularly before a diagnosis is established.

- Gary Johnson commented via chat that there was compelling information provided yesterday and today regarding the DRBI issue and asked what the ICC will do with this information.
- Andrea Davis shared via chat the complete [Coalition ICC Public Comment letter](#) to the ICC for Early Intervention regarding her comments from yesterday's meeting.
- Pablo Velez commented via chat that a major barrier to recruiting and retaining qualified Early Start staff is the lack of access to Public Service Loan Forgiveness (PSLF). In California, Part C services are largely provided by small private agencies, and many professionals enter the field with significant student loan debt. Because PSLF generally requires employment by a public or nonprofit organization, most Early Start staff are excluded, while school districts can offer this benefit as an important recruitment and retention tool. Pablo also commented that given California's high cost of living and workforce shortages, one option would be to allow nonprofit Regional Centers to certify qualifying service for professionals who have worked in their catchment area for 10 years. This may require a federal waiver or policy change allowing regional centers to provide the necessary attestation.
 - Lisa Schoyer added that the new federal cuts to such professional fields further erodes the pipeline's structure.

PRESENTATION: GROWING TOGETHER: FAMILY-CENTERED GROUP EARLY INTERVENTION AT ICEC

Pam Alexander, ICEC

- Pam Alexander presented an overview of the group early intervention services at [ICEC](#). ICEC is a pediatric therapy organization that has operated in Orange County for about 40 years and serves children from birth to 5.
- The Infant Development Program (IDP) is a group-based program specifically for babies from birth to 12 months. It emphasizes parent participation, developmental support, early identification/"child find", parent coaching, and peer and family connection. The program provides weekly family-centered early intervention classes and specialized services for infants at risk or experiencing developmental delays.
- Pam identified the benefits of group early intervention for three groups: children, parents, and the early intervention system. Pam noted that the "natural

environment” should not necessarily mean only the home; families naturally build communities through places where other families and children gather.

- ICEC’s group curriculum has three components: Little Sprouts for 1-2-year olds; Little Buds for 2-3-year olds; and Bloom and Grow for 2-3-year olds who need behavioral support.
- The IDP program is a partnership between ICEC and the Assistance League of California. The program is community-funded and at no cost to families.
- Families in the IDP program learn many aspects of family-centered care, such as positioning, play ideas, feeding strategies, communication techniques, and sensory supports.
- Pam shared that the IDP is successful through family coaching, multidisciplinary care, small ratios, play-based learning, and community partnerships.
- Yvette Baptiste asked how ICEC is collaborating with Comfort Connection, their local family resource center for early intervention families.
 - Pam Alexander responded that ICEC has a collaborative relationship with Comfort Connection, as they are housed in the regional centers and families are often referred to Comfort Connection. ICEC and Comfort Connection coordinate workshops and services together.
- Julie Maier asked via chat if the ICEC provides vision and deaf/hard of hearing (DHH) services for babies and toddlers who are blind/low vision, deaf, or deafblind.
 - Pam Alexander responded that ICEC does have low vision, DHH babies. It is not necessarily their specialty, but they consult with a local agency, Beyond Blindness and they also coordinate with the Braille Institute. She also noted that some children are connected to DHH services within their school district as well.
- Lisa Schoyer commented via chat that the ICEC’s Parent Discussion program is very needed and should be expanded. She also added that the health of the dyadic relationship is the focus for mental health services for children aged 0-5. She noted that LACDMH works to ‘commonize’ how important “dads” are, how their roles fit into the child’s development, and she appreciates “dads” being included in the presentation.
 - Pam Alexander responded that this is one of ICEC’s hardest focuses to get funding for. They write for grants and partners with mental health services in Orange County for families as well.
- Fran Chasen asked via chat why there is a current hesitation to fund Early Intervention support services. The recent rate adjustment roll out has fiscally reduced this service code, so providers are not able to support staff for this type

of Early Intervention service. She also noted that a DDS survey regarding this particular service model is awaiting release.

- Pam Alexander responded that she has participated in numerous statewide discussions regarding the issue. She noted that ICEC has hosted DDS representatives and legislative analysts to increase their understanding of the program and suggested that limited awareness of the program may contribute to hesitation in supporting it. She expressed concern and disappointment regarding the lack of funding.
- Andrea Davis commented via chat that she enjoyed hearing about the ICEC program and wanted to highlight what Pam Alexander said about referrals from regional centers. She noted that there are integrated preschool programs for the community and Early Start clients in the Los Angeles area who have lost their regional center referrals because of an interpretation of the “natural environment” requirement. She added that this could leave families to seek neighborhood childcare services that may lack the training and capacity to appropriately serve children receiving Early Start Services.
- Andrea Davis also asked via chat what the ICC could do to make sure that the Early Intervention programs that do exist to receive Early Start family referrals from service coordinators and clarify that these do not prevent services in the natural environment, and that this is a highly natural environment.
 - Pam Alexander responded via chat that she agreed and cited more exposure and better understanding of the differences [between early intervention programs].
- Pam Alexander shared her email via chat: pama@iceckids.org

VIDEO: EARLY START ROUNDTABLE

- Jennifer Bloom, Director of Client Services at Alta California Regional Center (ACRC), shared the [ARCA Early Start Roundtable video](#). ACRC created the video to highlight their experiences in the Early Start program and asked their service coordinators and families to share their experiences. The video shows a conversation between two families who have participated or are participating in the Early Start program, and their respective service coordinators and client service manager. The video was produced by Future Films, one of ACRC’s vendors.
- Pablo Velez thanked Jennifer Bloom for sharing the survey. He thought that it was very supportive, accessible, and easy for families to follow. He also noted that the kindness of the service coordinator and client services manager could be felt in the video.

PRESENTATION: DIFFERENTIATED MONITORING AND SUPPORT

Sally Shepherd, SRI International

- Sally Shepherd presented the [Differentiated Monitoring and Support \(DMS\)](#) process monitored by the Office of Special Education Programs (OSEP). The goal of DMS is to improve outcomes and results for infants, toddlers, children and youth with disabilities and their families and ensure compliance. DMS focuses on States's system of general supervision integrating both results and compliance.
- DMS is divided into multiple topic areas, such as fiscal management, monitoring, data, and dispute resolution.
- DMS monitoring occurs in four phases: Discovery, Engagement, Report Development, and Close-Out. Discovery begins approximately five months before engagement, engagement lasts about 1 month, the DMS Monitoring Report is issued within 120 days after Engagement, and Close-out may continue for up to one year to review corrective actions and provide technical assistance.
- Sally Shepherd reviewed California's monitoring schedule. Discovery will take place in November/December 2026, engagement will take place in May 2027, OSEP will release the DMS Monitoring Report in October 2027, and Close-out will occur up to one year after issuance of DMS Monitoring Report.
- OSEP will ask the Part C coordinator to provide a list of potential interviewees, which will include individuals knowledgeable about California's Part C Early Intervention System. Interview participation is voluntary and may be individual or group interviews. Sally Shepherd shared some sample interview questions.
- Pablo Velez asked via chat when the evaluation was last done in California.
 - Sally Shepherd could not recall but noted that California is in cohort 4 of the DMS process and cohort 1 started in 2022.
 - Anne De Medeiros added that it has been 10 years since DDS received an audit, but the DMS process is different from the last process.
- Andrea Davis commented via chat if Sally Shepherd referred to Family Resource Centers or community centers for parents when she mentioned parent centers.
 - Sally Shepherd responded that it could be both, and that any center that has services for children 0-3 are included.
 - Yvette Baptiste noted that family centers typically mean parent centers funded by Part B or C to support families but will defer to Sally.

- Pablo Velez noted that recent ICC turnover may make it difficult for members to recall and articulate the Council's accomplishments during the DMS process. He recommended reviewing ICC's key milestones and success. Sally Shepherd supported the recommendation, noting that DMS evidence and documentation may reach back three years and that documenting system-level changes and impact take time.
 - Yuko Johnson added via chat that Pablo's suggestions can also bring newer ICC members up to speed and serve partially as an introduction to ICC.
- Lisa Schoyer commented via chat that longitudinal perspective has the potential to knit the otherwise atomized collected information.
- Andrea Davis asked via chat about the availability of parent centers and expressed concern that the rate study reforms, unpaid claims, inadequate rates, and restrictive interpretations of the natural environment requirement are threatening the sustainability of Early Start programs and limiting referrals.
 - Anne De Medeiros responded that OSEP is talking about the Parent Training and Information Centers when referring to parent centers, not necessarily centers where services are provided. California funds FRCs and Parent Training and Information Centers, which are more focused on Part B. In this case, the presentation is focused on FRCs, which are focused on Part C.
 - Julie Maier commented and shared the [PTI and CPRCs](#) which are funded by OSEP.
 - Yvette Baptiste commented and shared the [Family Resource Center](#) website which ICC members can view.

VIDEO: MEET DOMINIC: HOW AAC TRANSFORMED HIS COMMUNICATION

- The ICC watched San Diego Regional Center's (SDRC) [Meet Dominic video](#), which shared how Dominic received life-changing services through the Early Start program and received Alternative Augmentative Communication (AAC) devices to support his communication. AAC transformed his communication.
 - Pablo Velez thanked SDRC for creating the video and shared the importance of understanding the value of AAC devices. He has noticed a reduction in behaviors and an increase in verbal communication with the use of AAC devices. Pablo emphasized the importance of families understanding the difference between AAC devices and regular electronic devices.

- Laurie Jordan noted that it is important for families to understand who owns and is funding AAC devices. She described a situation in which a family discovered that an AAC device their child had used for years actually belonged to a different school district than they had thought. She emphasized the importance of clearly discussing the devices with the child and family to avoid misunderstandings.
 - Pablo Velez added that he has also witnessed this situation as well. Children who transfer school districts must transfer devices, and they may not have a communication device during that transition. Early Start providers can process and request devices through insurance or Medi-Cal so that the device can continue to be with the family.
- Michelle Oliver agreed with Pablo's comment on understanding the difference between a communication device and electronic device. Michelle added that family training and counseling are listed as services on the DDS website. She emphasized the importance of having service codes that can incorporate family training and counseling services and noted that it would be useful to have continuity on what the service code and rate should look like.
- Yvette Baptiste expressed support for Pablo and Michelle's comments, and she also supported the video and the improvement of the process for children to have early access to language.
- Monica Peterson shared in chat that some regional centers are very discouraging of AAC devices. She appreciates this highlight.
- Yuko Johnson commented via chat that medical providers also need to be kept apprised of these needs (access to language) and see if there is additional support through the health system.
- Andrea Davis commented via chat that she agreed with Michelle Oliver's comment about family training and counseling services, codes and rates. As a trainer of infant mental health providers for 40 years, she can support parent guidance and training, and working collaboratively with a parent and empowering the parent's own confidence in their abilities to support their child is the trickiest and highest-level service to train and provide and should be compensated accordingly.
- Anne De Medeiros shared via chat that Dominic's story was also featured in the [DDS newsletter](#) along with more information, infographics, and an FAQ on Assistive Technology
- Yuuko Johnson commented via chat that she encourages utilizing the Individualized Family Service Plan (IFSP) to house many of these ideas shared today.

- Marie Poulsen asked if anyone had specific agenda items that they would like to be included in the November meeting.
 - A member said they would love some attention to fetal alcohol spectrum disorder and how the ICC can support those families.
 - Julie Maier added via chat that it will be important to have an update on any changes to the Head Start regulations and the inter-agency agreements with Dept of Ed and HHS which will impact Early Start and Part C.
 - Yvette Baptiste reiterated her comment on the need for a neutral party presentation on evidence-based practices that are DIR/DRBI.

CLOSING

- Dr. Marie Poulsen thanked everyone for their work supporting infants, toddlers, and families throughout the state.
- Jane Lee announced that the next ICC meeting will be held November 5 and 6, 2026. The meeting will be hybrid, with the physical location at the San Andreas Regional Center. Jane noted that the website currently lists the meeting as all virtual but it will be updated. To register, visit the [ICC website](#).
- Dr. Marie Poulsen adjourned the meeting at 11:44 a.m.

MEETING ATTENDEES

APPOINTED MEMBERS PRESENT

Amanda Levy (for Mary Watanabe)	Karen Chang (for Jennifer Troia)	Michelle Dove
Doug Erber	Maricris Acon, DDS (for Pete Cervinka)	Pamela Riley
Gigi Ostrowsky	Marie Poulsen*	Susan Ducore

COMMUNITY REPRESENTATIVES PRESENT

Debbie Sarmento	Joe Peralas*	Pablo Velez*
Edyth Gallardo*	Julie Maier	Robert Rochin*
Fran Chasen	Laurie Jordan*	Yuuko Johnson*
Gayatri Mahajan	Lisa Schoyer*	Yvette Baptiste*
Jadolphus Fraser*	Marty Omoto	
Jenifer Pearsall	Michelle Oliver	

INTERPRETERS PRESENT

Elizabeth Vega, ASL	Marc Gutierrez, Spanish
Richard Haffner, ASL	Maricela Miotto, Spanish

OTHERS PRESENT

Alex Guerrero	Elizabeth Villanueva	Martha Ornelas-Cruz
Amy Walls, DDS*	Eun Kim*	Matt Chestnut
Ana Barranco	Gary Johnson	Megan Glass
Andrea Davis	Gwendy Rodriguez	Michelle Velasco
Andrea Grimes	Hely Lee Chan	Mini Nandakumar, DDS
Angela McGuire, WestEd	Jane Lee, DDS*	Monica Peterson
Angie Luu, DDS	Janelle Brasil	Morgan Barker
Anna Schichtel	Jasmine Fang, DDS	Natalie King
Anne De Medeiros, DDS*	Jasmine Suo, DDS	Niasha Gonzalez
Apple Sepulveda	Jeanne White	Osman Hossain
Asami Saito, DDS	Jeffrey Stanley	Paige Richmond, DDS
Ashly Perry	Jennifer Bloom	Pam Alexander
Austin Lyke, DDS	Jennifer Castle	Priscilla Solano, DDS
Becky Vang, DDS*	JJ Fernandez, DDS*	Rachel Nerland, DDS
Breck Frye, Mission	Johana Caicedo	Randy Olson
Courtney Chandler	Joni Hasselbring, DDS	Reyhan Shafiha-Taylor
Cynde Josol	Karima Boumatar	Ryan Digman, DDS
Danielle Calloway, Mission	Kathy Angkustgsiri	Sally Shepherd
DJ Tomko	Lauren Libero, DDS	Sarah Franco*

Dulce Flores

Lisa Gonzales, DDS

Shannen Cheng, DDS

Elena Bramble*

Mahnaz Ehsan

Tara Siesmore-Hester

Elizabeth Fuller

Maria De Jesus Rodriguez

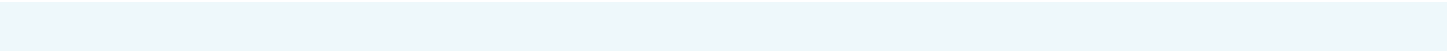
Van Pham

Elizabeth Jimenez-Winslow

Marisol Segura, DDS

Vicky Wheeler, Mission

* Indicates attendance at the in-person meeting location



Questions?

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