

The Regional Center System

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What is “Regional Center”

- The regional center is a system that serves people with developmental disabilities
- Founded in California in 1966
- Has grown from the first two centers in 1966 to a network of 21 agencies covering every area of the state
- Each center is a private, nonprofit corporation, funded by a contract with the State Department of Developmental Services
- Each Regional Center has a Board of Directors that includes clients, parents, professionals, and other concerned community members

Regional Center Services

- Regional centers provide diagnosis and assessment of eligibility
- Planning, accessing, coordination and monitoring of services and supports that are needed because of a developmental disability
- There is no charge for the diagnosis and eligibility assessment.
- Most services and supports are free regardless of age or income

Intake Process

- Intake is the procedure by which data is gathered to determine eligibility for regional center services
- Data includes social, medical, and psychological information
- Information may come from outside sources or from in-house interviews, examinations and testing
- The intake process consists of five steps, which may take up to 120 days

5 Steps of Intake

1. Referral
2. Social History
3. Psychological Assessment
4. Medical Assessment
5. Eligibility Determination

Overview of Regional Center Diagnostic Categories

- A person must have a disability that begins before the age of 18
- The disability is expected to continue indefinitely and present a substantial disability as defined in Section 4512 of the California Welfare and Institutions Code.
- Eligibility is established through diagnosis and assessment performed by regional centers

Eligible Conditions

As defined in the Welfare and Institutions Code, Developmental Disabilities includes:

- Intellectual Disability
- Cerebral Palsy
- Epilepsy
- Autism
- Disabling conditions found to be closely related to mental retardation or to require treatment similar to that required for individuals with intellectual disability.

Substantial Disability

- The existence of significant functional limitations in three or more of the following areas of major life activity

Major Life Activities include:

- Self-care
- Receptive and expressive language
- Learning
- Mobility
- Self-direction
- Capacity for independent living
- Economic self-sufficiency



“Developmental Disability” does not include:

- Handicapping conditions that are solely physical in nature or per the Welfare and Institutions code.



Intake Process for Early Start

(specified in Section 95014 of the California Government Code)

- Early Start Programs provide developmental monitoring, coordination and services to children (from 0 to 3 years of age)
- A baby or young child may be considered eligible if one or more of the following is present:
 - Developmental Delay
 - Conditions known to result in developmental delay or disability

5 Areas of Development

- Cognitive
- Physical (fine and gross motor)
- Communication (receptive and expressive language)
- Social-Emotional
- Adaptive

Overview of Early Start Diagnostic Categories

- High Risk of Developmental Disabilities
- Developmental Delay
- Established Risk

High Risk Factors: at least 2 factors must be identified

- Prematurity <32 weeks and/or birth weight <1500 grams (3 lbs.)
- Small for gestational age (SGA); below 3rd% for growth or Intrauterine Growth Retardation (IUGR)
- Assisted ventilation (on a ventilator or breathing machine) for 48 hours or longer in the first 28 days of life
- Apgar score of 0-5 at 5 minutes and/or birth asphyxia
- Severe and persistent metabolic abnormality (e.g., hypoglycemia, acidemia, hyperbilirubinemia in excess of the usual exchange transfusion level, etc.)
- Seizures that are not febrile seizures age 3 and under
- Brain or spinal cord lesion or abnormality (e.g., tumor, anomaly, etc.)
Diagnosis must be specified

High Risk Factors continued

- Brain or spinal chord infection (e.g., meningitis, encephalitis, etc.)
- Serious injury, accident, or illness which may seriously or permanently affect developmental outcome. Must be explained.
- Multiple congenital anomalies or genetic disorders which may effect developmental outcomes. Diagnosis must be specified.
- Prenatal substance exposure, positive newborn toxicology screen, or symptomatic newborn drug toxicity or withdrawal
- Clinically significant failure-to-thrive (e.g., weight persistently below 3rd percentile for age on standard growth charts)
- Developmentally disabled parent
- Persistent hypotonia (low tone) or hypertonia (increased tone)

Additional Criteria:

- High risk for a developmental disability also exists when a multidisciplinary team determines that the parent of the infant or toddler is a person with a developmental disability and the infant or toddler requires early intervention services based on evaluation and assessment as specified in section 52082 and section 52084.

Delay not Determined Based on:

- Temporary physical disability
- Cultural or economic factors
- The normal process of second language acquisition
- Manifestation of dialect and sociolinguistic variance.

Early Start

- **Birth to 36 months:**
- a developmental delay is defined as 33 percent or greater between the infant or toddler's current level of functioning and the expected level of development for his or her age in one or more of the following five developmental areas:
 - Cognitive
 - Physical: including fine and gross motor, vision, and hearing
 - Communication
 - Social/emotional
 - Adaptive/self help

Established Risk

- A condition of known etiology which has a high probability of resulting in developmental delay

Physical and motor exclusions include diagnoses solely related to vision, hearing, and health status.

Use of Private Insurance

- Except for services related to evaluation and assessment of the infant or toddler a family's private insurance shall be used to pay for early intervention services specified on the infant or toddler's Individualized Family Service Plan (IFSP) that are determined to be medical in nature.

Limits of Purchase of Services

- Parents will be required to use private insurance for Early Intervention services before the regional center purchases a service or support, as is currently required for children over 3 years of age
- This does not apply to evaluation and assessment services normally provided by regional centers for purposes of eligibility determination

"At risk"

- Infants and toddlers who are "at-risk" for a substantial disability
- "At risk" means
 - a child is younger than 36 months
 - has a genetic, medical, or environmental history that is predictive of a substantially greater risk for developmental disability than that for the general population
 - the presence of this condition must be diagnosed by a qualified clinician

Parent Share of Cost

- There is a requirement for parents to share the cost of 24-hour out-of-home placements for children under age 18
- This share depends on the parents' ability to pay
- There may also be a co-payment requirement for other selected services (camp and respite)

Possible Service Options

- Assistive technology
- Audiology or hearing services
- Family training
- Health services
- Medical services for diagnosis and evaluation only
- Nursing services
- Nutrition services
- Occupational therapy
- Physical therapy
- Psychological services
- Respite services
- Service coordination
- Social work services
- Special instruction
- Speech and language services
- Vision services

Behavior Services

- Effective August 1, 2009, for children requiring behavior management services (including applied behavior analysis and intensive behavior interventions), the regional center “should consider” the use of group training in lieu of some or all of in-home behavior intervention services
- This applies to behavioral services for children served by Early Start (ages 0–3) as well
- Regional centers shall only purchase behavior services when parents “participate in the intervention plan”
- Participation is defined to mean ‘any of’ the following:
 - completion of group instruction
 - collecting data on behaviors
 - implementing the intervention plan
 - attending clinical meetings

Behavior Service Mandate

- Insurance companies are required to fund for behavior intervention services for all individuals with a diagnosis of ASD