

For which issues will the Improving State Systems Committee research and provide advice to the ICC in 2025-2026?

- 1. Improve documentation of service delivery at intake for behavior health and trauma-based care to ensure that they are getting the services that they need:**

Examples:

- Improving differential diagnosis of autism to avoid misdiagnosis, missed diagnosis, and bias, as it relates to timely and appropriate services
- Expand recognition of other evidence-based behavioral services, including Applied Behavioral Analysis (ABA), Routines Based Intervention (RBI), Developmental Relationship Based Interventions (DRBI), parent coaching models, infant mental health approaches, etc.
- Include parental mental health screening and support in the IFSP process; make it more intentional rather than an after thought

- 2. Continuation: Review and update of the Early Start Personnel Manual**

Examples:

- Evaluate impact of recent revisions to Early Start online from direct facilitation to Open Access
- Provide training grants for Early Start personnel since the American Rescue Plan Act funds are gone
 - a. **Possible Recommendation:** This is currently moving forward with support. Can we receive an update regarding what is happening with this. We want to hear progress.

- 3. Develop strategies to address the shortage in the workforce**

Examples:

- Development of local college/university/Healthcare/community college partnerships as the solution for Early Start personnel.
 - a. **Possible Recommendation:** Presentations from healthcare organizations or health plans such as CalOptima to share about what they are doing to support workforce development.
 - b. **Possible Recommendation:** Expand diversity in the workforce. Look into some of the Service Access and Equity Grants and we could have a presentation from Special Needs Network in LA.

- 4. Continuation: Take a comprehensive look at the impact that accessing insurance has on families and the overall system which mandates coordinated multidisciplinary systems and early intervention services**

5. Address potential impact of federal funds being re-allocated for our California birth to three services.

Examples:

- How do we advocate for the children and families as changes are occurring in all the different programs throughout California?
- Head Start: Address impact of federal funds being reallocated
- Supporting families affected by anti-immigrant policies
 - a. **Possible Recommendation:** We may want a standing agenda item to discuss these items or bring in those that have the expertise to inform decisions.

6. Address the need for coordinated child find efforts among agencies that are mandated for child find to avoid duplication and confusion around accessing services

Examples:

- Increasing the consistency of the family/client experience across regional centers

7. Presentations

- a. **Possible Recommendation:** Update on the information learned from provisional eligibility implementation
- b. **Possible Recommendation:** Have someone from the Autism Services Branch at DDS at each quarterly ICC meeting to provide updates?

8. Solutions to address client cancellations and absenteeism that impact service providers (how they are paid, inconsistent with labor laws)

9. Information from DDS

Examples:

- Want to understand how Mental Health Services Act funds are being used for Early Start
- Get information from DDS about the development and implementation of the standardized IFSP
- Look at how the IFSPs are being written so they don't reflect 'sets' of services that every child gets without recognizing specific needs and priorities
- Advocate for a more systematic process to support transition to start during the intake process
- Develop and implement a uniform approach to include foster care children in the regional center system (sign-off process; authorization form)

From Public Comments:

- Improved and consistent screening of infants and toddlers for visual impairments, including cerebral visual impairment