# EARLY CHILDHOOD EDUCATION

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CHAPTER 2

EARLY CHILDHOOD EDUCATION

2.1 PURPOSE AND SCOPE

The SELPA, San Mateo County Office of Education (SMCOE), LEAs, and the Golden Gate Regional Center (GGRC) will actively and systematically seek out all children with disabilities from birth to age five to refer, assess and determine eligibility for special education services.

An Individualized Family Service Plan (IFSP) or Individualized Education Program (IEP) will be developed by a multidisciplinary team to identify the child’s needs and plan appropriate services for the child and the family. LEAs and the COE will work cooperatively with the GGRC and other appropriate public agencies to provide all necessary services.

2.2 IDENTIFICATION AND REFERRAL

Child find activities may include:

1. Assigning liaisons to local hospitals and hospitals with neonatal intensive care units;
2. Contacting local parent organizations and support groups;
3. Distributing early intervention materials to agencies and individuals providing medical, social and educational services in the community;
4. Community-wide health and developmental screening;
5. Producing and distributing public service announcements;
6. Producing pamphlets, brochures and other written communication; and,
7. Making presentations to local professional groups, philanthropic organizations and other organizations established to inform and/or to serve culturally diverse populations.

SMCOE, GGRC and LEAs shall coordinate local child find activities with each other and other public agencies.

Primary referral sources include, but are not limited to, hospitals, including prenatal and postnatal care facilities, physicians, parents, childcare programs, districts, public health facilities, other social services agencies and other health care providers.

GGRC and SMCOE shall inform primary referral sources of the following:

1. Eligibility criteria for early intervention services;

2. Types of early intervention services available through the Early Start Program;

3. Contact persons and telephone numbers for regional centers and districts; and,

4. Federal requirement that a referral shall be made to the regional center or district within two (2) working days of identification of an infant or toddler, who is in need of early intervention services.

The GGRC and SMCOE that receives an oral or written referral for early intervention services shall ensure that:

1. The date of the referral is documented in the infant’s or toddler’s record;

2. A service coordinator is assigned; and,

3. Written notice is provided and consent is requested. (17 CCR 52040, 52060)

2.3 EARLY START PROGRAM DESCRIPTION

The Early Start Program (ESP) is a collaboration between the Golden Gate Regional Center (GGRC) and the San Mateo County Office of Education (SMCOE). The ESP, through SMCOE or GGRC vended private infant
programs, shall include services specifically designed to meet the unique needs of infants, from birth to three years of age, and their families. The primary purpose of an early education program is to enhance development of the infant in the context of his or her family. To meet this purpose, the program shall focus upon both the infant and his or her family, and may include home visits, group services, family involvement, and/or parent education activities. Services shall be provided in the natural (home, community) environment whenever possible.

Early Start Programs shall include, as program options, home-based services and group services.

Home-based and group services will be provided through a transdisciplinary team consisting of the parent and a group of professionals from various disciplines.

The frequency of home-based services shall be weekly, bi-weekly or monthly, depending on the needs of the infant and the family.

Early education services may also be provided through both home visits and group settings with other infants. The frequency of group services shall not exceed three hours a day for up to, and including, two days a week, and shall be determined on the basis of the needs of the infant and the family.

Parent involvement/education activities are provided in conjunction with home based and group services. (EC 56424-56426.2)

2.4 ASSESSMENT TO DETERMINE ELIGIBILITY

Each infant or toddler referred for evaluation for early intervention services shall have a timely, comprehensive, multidisciplinary evaluation of his or her needs and level of functioning in order to determine eligibility.

The determination of eligibility for an infant or toddler shall be made by qualified personnel of the SMCOE as per Memo of Understanding and contract between SMCOE and GGRC. The determination shall be made with the participation of the multidisciplinary team including the parent. Evaluation and assessment shall be based on informed clinical opinion and include:
1. A review of pertinent records related to the infant or toddler’s health status and medical history provided by qualified health professionals, who have evaluated or assessed the child.

2. Information obtained from parental observation and report.

3. Evaluation by qualified personnel of the child’s level of functioning in each of the following areas:
   a. cognitive development
   b. physical and motor development, including vision and hearing
   c. communication development
   d. social or emotional development
   e. adaptive development

4. No single procedure shall be used as the sole criterion for determining a child’s eligibility.

5. Standardized tests or instruments may be used as part of the evaluation. If such tests are used they shall be selected to ensure that, when administered to an infant or toddler with impaired sensory, motor or speaking skills, the tests produce results that accurately reflect the infant’s or toddler’s aptitude, developmental level, or any other factors the test purports to measure. The test should not factor in the infant’s or toddler’s impaired sensory, motor or speaking skills unless those skills are the factors the test purports to measure. The tests must be validated for the specific purpose for which they are used.

6. Procedures and materials for evaluation and assessment of infants and toddlers shall be selected and administered so as not to be racially or culturally discriminatory.

7. Infants or toddlers with solely low incidence disabilities shall be evaluated and assessed by qualified personnel of the SMCOE whose professional preparation, license or credential authorization are specific to the suspected disability.

8. Regional Centers, LEA’s and multidisciplinary teams shall not presume or determine eligibility, including eligibility for medical services provided through the Department of Health Services, for any other state or local government program or service when
conducting evaluations or assessments of an infant or toddler or
their family. (17 CCR 52082; GC 95016)

2.5 ASSESSMENT FOR SERVICE PLANNING

Assessment for service planning for eligible infants or toddlers shall identify all of the following:

1. The child’s unique strengths and needs in each of the above areas.
2. Early intervention and other services appropriate to meet the needs.
3. The resources, priorities and concerns of the family and the supports and services necessary to enhance the family’s capacity to meet the developmental needs of an infant or toddler with a disability.

Assessment for service planning shall be based on age appropriate methods and procedures that may include any of the following:

1. A review of information related to the child’s health status and medical history provided by qualified health professionals, who have evaluated or assessed the child.
2. Developmental observations by qualified personnel and the parent.
3. Other procedures used by qualified personnel to determine the presence of a developmental delay, established risk condition, or high risk for a developmental disability.
4. Standardized tests or instruments.

Assessments of family resources, priorities and concerns related to enhancing the development of the infant or toddler shall be voluntary on the part of the family. The family assessment shall:

1. Be conducted by qualified personnel trained to utilize appropriate methods and procedures;
2. Be based on information provided by the family through a personal interview;
3. Incorporate the family’s description of its resources, priorities and concerns related to enhancing the development of the child; and

4. Be conducted in the language of the family’s choice or other mode of communication unless it is not feasible to do so.

Evaluations and assessments for service planning shall be conducted in natural environments whenever possible. (17 CCR 52086)

2.6 TIMELINE FOR COMPLETION OF EVALUATION AND ASSESSMENT

The evaluation and assessment for eligibility for each child shall be completed within 45 days of the date that the GGRC or SMCOE received the referral.

In the event of exceptional circumstances, which make it impossible to complete the initial evaluation and assessment for eligibility within 45 days of receiving a referral, the service coordinator shall inform the parents and document the reasons for the delay. In such cases, an interim IFSP will be developed and the services agreed upon will be implemented. The interim IFSP will include the name of the service coordinator and timelines for completing assessments. (17 CCR 52086)

2.7 ELIGIBILITY

The term “eligible infant or toddler with a disability” means infants and toddlers from birth through two years of age, for whom a need for early intervention services is documented by means of assessment and evaluation and who meet one of the following criteria:

1. Infants and toddlers with a developmental delay in one or more of the following five areas: cognitive development; physical and motor development, including vision and hearing; communication development; social or emotional development; or adaptive development.

2. Infants and toddlers with established risk conditions, who are infants and toddlers with conditions of known etiology or conditions with established harmful developmental consequences.
3. Infants and toddlers who are at high risk of having substantial developmental disability due to a combination of biomedical risk factors, the presence of which is diagnosed by qualified clinicians recognized by, or part of, a multidisciplinary team, including the parents. (Note: “high risk” will be eliminated sometime in 9/30/09)

If standardized, normed or criterion referenced instruments are used as part of the evaluation, a significant difference between a child’s current level of functioning and the expected level of development for his or her age shall be established when the child’s age equivalent score falls one third below age expectation. (17 CCR 52022; GC 95014)

2.8 DEVELOPMENT OF THE IFSP

An initial IFSP shall be developed by the GGRC and/or SMCOE for each eligible infant or toddler, within 45 days of the receipt, by either the regional center or LEA, of the oral or written referral.

A periodic review of the IFSP shall be conducted every six months or more frequently if service needs change, or if the parent requests such a review.

All IFSP meetings shall be conducted in settings and at times or by means that are reasonably convenient to the parent and in the language of parent’s choice unless it is clearly not feasible to do so.

Meeting arrangements shall be made in collaboration with the parent. A written notice of meeting shall be provided to, the parent and other members of the multidisciplinary team in a timely manner to ensure attendance at the IFSP meeting.

Each initial IFSP meeting and each annual IFSP meeting shall include the following participants:

1. The parent of the infant or toddler;
2. The service coordinator; and,
3. The person(s) who conducted the evaluations or assessments.

If requested by the parent, each initial IFSP meeting and each annual IFSP meeting shall include the following participants:
1. Other family members

2. An advocate or person outside of the family.

Each IFSP meeting shall include persons who will be providing services to the infant or toddler and family as appropriate. (17 CCR 52102, 52104)

2.8. A Contents of the IFSP

The IFSP must be in writing and contain:

1. A statement of the infant’s or toddler’s present levels of development in the following areas:
   a. physical development,
   b. cognitive development,
   c. communication development,
   d. social or emotional development, and
   e. adaptive development.

2. A statement of the family’s resources, priorities, and concerns relating to enhancing the development of the family’s infant or toddler with a disability.

3. A statement of the major outcomes expected to be achieved for the infant or toddler and the family, and the criteria, procedures, and timelines used to determine the degree to which progress toward achieving the outcomes is being made and whether modifications or revisions of the outcomes or services are necessary.

4. A statement of specific early intervention services necessary to meet the unique needs of the infant or toddler and the family, including the frequency, intensity, and method of delivering services.

5. A statement of the natural environments in which early intervention services shall appropriately be provided, including a justification of the extent, if any, to which the services will not be provided in a natural environment.

6. The projected dates for initiation of services and the anticipated duration of the services.
7. When dually eligible, the service provider will be a GGRC social worker. If the eligibility is a solely low incidence, the identification of the service coordinator from the profession most immediately relevant to the infant’s or toddler’s family needs (or who is otherwise qualified to carry out all applicable responsibilities), will be responsible for the implementation of the plan and coordination with other agencies and persons.

8. The steps to be taken to support the transition of the toddler, with a disability, to preschool or other appropriate services.

The contents of the IFSP must be fully explained to the parents and informed written consent from the parents must be obtained before early intervention services can be provided. If the parents do not provide consent with respect to a particular early intervention service, then the only early intervention service to which consent is obtained shall be provided. (17 CCR 52106)

2.8. B Review of the IFSP

The IFSP shall be evaluated once a year and the family must be provided a review of the plan at 6-month intervals (or more often where appropriate based on infant or toddler and family needs).

The IFSP team will review the degree to which progress toward achieving the outcome is made and document all modifications and revisions of the outcomes or services as necessary. (17 CCR 52102)

2.9 TRANSITION REQUIREMENTS FOR EARLY INTERVENTION

To ensure a smooth transition for toddlers receiving early intervention services to preschool or other appropriate services, the following requirements must be met:

1. The families of such toddlers will be included in the transition plans.

2. At 2 years 6 months of age, the service coordinator will notify the LEA for the area in which the child resides and the parent that the child will shortly reach the age of eligibility for preschool services.
3. The District of Residence will hold an IEP meeting before the third birthday that ensures smooth and effective transition to a preschool program so that the child is in his/her preschool program on his/her third birthday. The IFSP transition planning meeting will be convened with the service coordinator, the family and the LEA at least 90 days (and at the discretion of all parties, up to 6 months) before the child is eligible for the preschool services. The purpose of the meeting is to discuss the transition steps and timelines, dates for transition activities and any such services that the child may receive.

4. In the case of a child who may not be eligible for preschool services, with the approval of the family, reasonable efforts will be made to convene a conference among the lead agency, the family, and providers of other appropriate services for children who are not eligible for preschool services. (17 CCR 52112; EC 56426.9)

5. An invitation to the initial IEP team meeting shall, at the request of the parent, be sent to the service coordinator or other representatives of the early education or early intervention system to assist with the smooth transition of services.

2.10 PRESCHOOL CHILDREN (AGE THREE TO FIVE) WITH DISABILITIES

2.10. A Identification and Referral

Preschool children age three to five with disabilities will be identified through

1. Child Find activities listed in previous sections.

2. Direct referrals from parents, preschools, physicians, members of the community, and Kindergarten teachers.

3. Children who are in transition from the Early Start Program.

Children who have been participating in the Early Start Program and are eligible to participate in preschool program will experience a smooth transition to preschool programs in the LEA or SMCOE. Representatives of the LEA will participate in
2.10. B Evaluation and Assessment

Assessment procedures, as described in Chapter 1 are applicable to preschool children from three to five years of age.

The assessments will be conducted by a transdisciplinary team including early childhood specialists, speech and language pathologists, school psychologist and other professional professionals as appropriate.

The team will use a variety of assessment tools and strategies to gather relevant functional and developmental information, including information provided by the parent that may assist in determining whether the child has a disability.

Special attention will be given to:

1. Assessing children with developmentally appropriate assessments.
3. Assessing children to identify participation in appropriate preschool activities.
4. Involving preschool personnel in observing and assessing children.

When standardized tests are considered invalid for children between the ages of three and five years, alternative means will be utilized (e.g. scales, instruments, observations, and interviews) shall be used as specified in the Assessment Plan. (EC 56441.11, 56441.6, 56426.6)

2.10. C Eligibility

The special education eligibility criteria listed in Chapter 1 shall apply to preschool children, between the ages of three and five years. A preschool child qualifies as a child who
needs early childhood special education services if the child meets the following criteria:

1. Is identified as having one of the following disabling conditions, or an established medical disability:
   a. autism
   b. deaf-blindness
   c. deafness
   d. hearing impairment
   e. mental retardation
   f. multiple disabilities
   g. orthopedic impairment
   h. serious emotional disturbance
   i. specific learning disability
   j. speech or language impairment in one or more of voice, fluency, language and articulation
   k. traumatic brain injury
   l. visual impairment
   m. established medical disability

2. Needs specifically designed instruction or services

3. Has needs that cannot be met with modification of a regular environment in the home or school, or both, without ongoing monitoring or support as determined by an IEP team.

A child is not eligible for special education and related services if the child does not otherwise meet the eligibility criteria and his or her educational needs are due primarily to:

1. Unfamiliarity with the English language;

2. Temporary physical disabilities;

3. Social maladjustment; or,

4. Environmental, cultural, or economic factors.

Established medical disability is defined as a disabling medical condition or congenital syndrome that the IEP team determines
has a high predictability of requiring special education and services (EC 56441.11, 56440, 56333-56339; 5 CCR 3030, 3031)

2.10. D Individualized Education Program

The requirements for developing, implementing, and reviewing IEPs described in Chapter 2 are applicable to preschool children, age three to five.

An early education program for preschool children with disabilities shall include specially designed instruction and related services to meet the unique needs of preschool children and their families. To meet this purpose, the program focus is on the young child and his or her family and shall include both individual and small group services, which shall be available in a variety of typical age-appropriate environments for young children, including the home, and shall include opportunities for active parent involvement.

*Note: ECE has written a grant to fund parent education for preschool and Early Start*

A preschool teacher, who has observed the child in an appropriate preschool environment, will be a member of the IEP team.

The IEPs of preschool children will describe how the disability affects the child’s participation in appropriate activities. (EC 56441.2)

2.10. E Services for Preschool Children with Disabilities

Services for preschool children with disabilities and their families shall be provided in coordination with other state and local agencies.

Services will be provided at public expense, under public supervision and without cost to the parents.

Early education services for preschool children may be provided to individuals or small groups and shall include:

1. Observing and monitoring the child’s behavior and development in his or her environment.
2. Presenting activities that are developmentally appropriate for the preschool child and are specially designed, based on the child’s exceptional needs, to enhance the child’s development. Those activities shall be developed to conform to the child’s IEP and shall be developed so that they do not conflict with his or her medical needs.

3. Interacting and consulting with the family members, regular preschool teachers, and other service providers, as needed, to demonstrate developmentally appropriate activities necessary to implement the child’s IEP in the appropriate setting, and necessary to reinforce the expansion of his or her skills in order to promote the child’s educational development. These interactions and consultations may include family involvement activities.

4. Assisting parents to seek and coordinate other services in their community that may be provided to their child by various agencies.

5. Providing opportunities for young children to participate in play and exploration activities, to develop self-esteem, and to develop pre-academic skills.

6. Providing access to various developmentally appropriate equipment and specialized materials.

7. Providing related services that include parent counseling and training to help parents understand the special needs of their children and their children’s development.

8. Note: ECE has written a grant to fund parent education for preschool and Early Start

Appropriate settings for these services include any of the following:

1. The regular public or private nonsectarian preschool program;

2. The child development center or family day care home;
3. The child's regular environment, that may include the home;

4. A special site where preschool programs for both children with disabilities and children, who are not disabled, are located close to each other and have an opportunity to share resources and program;

5. Special education preschool program, with children, who are not disabled, attending and participating, for all or part of the program; or,

6. A public school setting which provides an age-appropriate environment, materials, and services.

Early education services shall be provided by a transdisciplinary team. Responsibilities of early education staff shall include consultation with regular preschool program providers, consultation with other specialists, assessment services, and direct services.

Services may be provided by any of the following methods:

1. Directly by a LEA or SMCOE;

2. Through an interagency agreement between a local educational agency and another public agency;

3. Through a contract with another public agency;

4. Through a contract with a nonpublic, nonsectarian school or nonpublic, nonsectarian agency; or

5. Through a contract with a nonsectarian hospital. (EC 56441.3, 56441.4, 56441.8)

2.10. F Instructional Adult-to-Child Ratio

Appropriate instructional adult-to-child ratios for the group services shall be dependent on the needs of the child.

Appropriate instructional adult-to-child ratios for group services shall be dependent on the needs of the child. However, because of
the unique needs of individuals with exceptional needs between the ages of three and five years, inclusive, who require special education and related services, the number of children per instructional adult shall be less than ratios set forth in subsection (b) of Section 18204 of Title 5 of the California Code of Regulations, as it read on May 1, 1987, for young children in a regular preschool program. Group services provided to individuals with exceptional needs between the ages of three and five years, inclusive, identified as severely disabled pursuant to Section 56030.5 shall not exceed an instructional adult-to-child ratio of one to five. (EC 56441.5)

2.10. G Transition from Preschool to Kindergarten

As the preschool age child approaches the age to enter the elementary school environment, the child’s preparation is geared toward readiness for kindergarten and later school success.

Prior to transitioning a child with disabilities from a preschool program to kindergarten, an appropriate reassessment of the child shall be conducted to determine if the child is still in need of special education and services. (EC 56445)
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<thead>
<tr>
<th></th>
<th>ESP Service Coordinator</th>
<th>ESP Service Coordinator</th>
<th>District Observes Child</th>
<th>District Holds Transition (IFSP) IEP</th>
<th>District/COE Child Begins Preschool</th>
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<td>Child turns 3</td>
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Early Start Program (ESP) to Preschool Transition Timeline Chart

*May need to provide interim services.

<table>
<thead>
<tr>
<th>Transition Activity</th>
<th>Transition Planning IFSP I District Attends</th>
<th>Referral Packet Sent to District</th>
<th>Observation of Child/Assessment as needed</th>
<th>Transition IEP</th>
<th>Child Begins Preschool</th>
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<tr>
<td>Responsible Agency</td>
<td>ESP Service Coordinator</td>
<td>ESP Service Coordinator</td>
<td>District</td>
<td>District(with COE if COE Placement)</td>
<td>District/COE</td>
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# Parents’ Rights: An Early Start Guide for Families

## Confidentiality & Access to Records

Early Start records are an important source of information about your child. The information you provide to the regional center or local education agency (LEA) about your child and your family is confidential. Such information will only be shared with authorized persons involved in your child’s services.

**As a parent,* you have the right to**

1. access records, including the right to have you or your representative examine and obtain copies of records relating to your child; *You may request that any regional center or LEA amend or remove information relating to your child from the records.* [CFR 303.402, CCR 52164, CCR 52168]

2. receive, within five days of your request, copies of records relating to your child and/or explanations that you request; [CCR 52164]

3. request a meeting with the director of the regional center or the superintendent of the LEA about information contained in the record; and [CCR 52168]

4. have personally identifiable information about your child maintained in a confidential manner and have its sources, access, uses, and policies for location, storage, disclosure, retention, and destruction explained to you per the Family Education Rights and Privacy Act. [CFR 303.401, CFR 303.460, CCR 52160, CCR 52162, CCR 52165, CCR 52169]

* Refer to CCR 52000(b) (36) for definition of parent.

## Evaluation & Assessment

The determination of eligibility for Early Start in California includes a timely, comprehensive, multidisciplinary evaluation and assessment of every child under age three years who is suspected to be in need of early intervention services. If no parent or guardian is available or the child is a ward of the court, a knowledgeable surrogate parent who has no conflicting interest will be appointed. Procedural safeguards ensure that families are provided their rights under the law. [CFR 303.322, CFR 303.406, CCR 52082]

**As a parent, you have the right to**

1. be fully informed of your rights under Early Start; [CFR 303.403, GC 95020(c), CCR 52160, CCR 52161]

2. refer your child for evaluation and assessment, provide information throughout the process, make decisions, and give informed consent for your child’s early intervention services; [CFR 303.401, CFR 303.404, CCR 52040(d)]

3. understand and provide voluntary written permission or refusal before the initial evaluation and assessments are administered; [CFR 303.405, CCR 52162]

4. participate in the initial evaluation and assessment process including eligibility determination; [CFR 303.322, GC 95020, CCR 52082, CCR 52084]

5. receive a completed initial evaluation and assessment within 45 days after the referral of your child to a regional center or an LEA; [CFR 303.321, CFR 303.322, CCR 52086]

6. participate in a meeting to share the results of evaluations and assessments; and [GC 95020(b)]

7. participate in all decisions regarding eligibility and services. [CFR 303.343, GC 95014(a), GC 95020(b), CCR 52082(a), CCR 52104]

**The Individuals with Disabilities Education Act (IDEA) requires the following:**

1. Evaluation and assessment materials are administered in the language of the parents’ choice or other mode of communication, unless it is clearly not feasible to do so. [CFR 303.323, CCR 52084]

2. Evaluation and assessment procedures and materials are selected and administered so as not to be racially or culturally discriminatory. [CFR 303.323, CCR 52082]

3. Evaluation and assessment materials are appropriate to assess the specific areas of developmental need and are used for the specific purposes for which they were designed. [CFR 303.322, CCR 52082]

4. Evaluations and assessments are conducted by qualified personnel. [CFR 303.322, CCR 52082, CCR 52084]

5. Evaluations and assessments administered to children with known vision, hearing, orthopedic, or communication impairments are selected to accurately reflect the child’s developmental level. [CFR 303.322, CCR 52082]

6. Evaluations and assessments are administered in the five developmental areas, which include physical development (motor abilities, vision, hearing, and health status); communication development; cognitive development; adaptive
development; and social or emotional development. Assessments and evaluations are ongoing while your child is in Early Start. [CFR 303.322, CCR 52082, CCR 52084, CCR 52102]

7. Evaluations and assessments shall be conducted in natural environments whenever possible. [CCR 52082(i), CCR 52084(e)]

8. Pertinent records relating to your child’s health status and medical history are reviewed. [CFR 303.322, CCR 52082]

9. No single procedure is used as the sole criterion for determining your child’s eligibility for early intervention services. [CFR 303.323, CCR 52082]

10. Interviews to identify family resources, priorities, and concerns regarding the development of your child and your family’s needs are voluntary. [CFR 303.322, CCR 52084, CCR 52106]

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### Individualized Family Service Plan

An individualized family service plan (IFSP) is a written plan for providing early intervention services to an eligible child and the child’s family. For an infant or toddler who has been evaluated for the first time, a meeting must take place within 45 days of the referral to the regional center or LEA to share the results of the evaluation, to determine eligibility, and, for children who are eligible, to develop the initial IFSP. Evaluation results and determination of eligibility may be shared with families prior to the first IFSP meeting. [CFR 303.340, CFR 303.342, GC 95020(b), CCR 52100, CCR 52102]

A periodic review of your child’s IFSP must take place at least every six months. A review may occur more frequently if there are any changes to the IFSP or if you request a periodic review with the regional center or LEA. The IFSP must also be reviewed annually to evaluate how your child is doing and to make any needed changes to the IFSP. [CFR 303.342, CCR 52102]

**During the development and implementation of an IFSP, you have the right as the parent to**

1. attend the IFSP meetings and participate in developing the IFSP; [CFR 303.343, CCR 52104]
2. invite other family members to attend IFSP meetings; [CFR 303.343, CCR 52104]
3. invite an advocate or persons other than family members to attend and participate in the IFSP meetings; [CFR 303.343, CCR 52104]
4. have a copy of the complete IFSP; [CFR 303.402, CCR 52102]
5. have the contents of the IFSP fully explained in the language of your choice; [CFR 303.342, CFR 303.403, CCR 52102]
6. give consent to services listed on the IFSP. If you do not give consent to a service, it will not be provided. You may withdraw consent after initially accepting or receiving a service; [CFR 303.342, CFR 303.404, CFR 303.405, CCR 52102]
7. have services provided in the natural environment or an explanation of why that is not possible; [CFR 303.12, CFR 303.344, CCR 52106]
8. exchange information about your child among other agencies; [CFR 303.460, CCR 52112, CCR 52169]
9. be notified in writing before any agency or service provider proposes or refuses to initiate or change your child’s identification, evaluation, assessment, placement, or the provision of appropriate early intervention services to your child or your family. [CFR 303.403, CCR 52161]

The notice must contain:
- the action that is proposed or refused,
- reasons for the action, and
- all available procedural safeguards.

The notice must be presented in the language of your choice, unless it is clearly not feasible to do so, and may be translated so that you understand its contents; and [CFR 303.400 to 303.460, CCR 52161]

10. voluntarily use private insurance to pay for evaluation, assessment, and required early intervention services on the IFSP. [CCR 52109(c)]

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### Mediation Conferences, Due Process Hearings, and State Complaints

In Early Start, parents have rights and protections to assure that early intervention services are provided to their children in a manner appropriate to their needs, in consideration of family concerns, and in compliance with applicable federal and state statutes and regulations.

The following procedures are only for children under the age of three years. [CFR 303.422, CCR 52170, CCR 52172, CCR 52173, CCR 52174]

As a parent, you have the right to

1. request a due process hearing any time a regional center or LEA proposes or refuses to initiate or change the identification, evaluation, assessment, placement, and/or provision of
appropriate early intervention service(s); [CFR 303.419, CFR 303.420, CCR 52172]
2. be informed of your right to file a complaint or a request for mediation or due process; [CFR 303.510, CCR 52170]
3. file a complaint if you believe there has been a violation of any federal or state statute or regulation governing early intervention services under Early Start including eligibility and services; [CFR 303.511, CCR 52170]
4. request a mediation conference immediately, prior to a complaint or due process hearing request, or at any time during the complaint/due process hearing processes to resolve a dispute related to any matter concerning federal or state statute or regulation governing early intervention services under Early Start; and
5. file a complaint if a due process decision fails to be implemented. [CCR 52171(e)]

MEDIATION CONFERENCE
Mediation is a flexible, non-binding, confidential process in which a neutral mediator facilitates settlement negotiations between you and another party. Voluntary impartial mediation conferences are a more informal way to resolve disagreements with early intervention service agencies or to address alleged violations of any state and federal statutes or regulations. Mediation is voluntary.

As a parent you have the right to
1. file a request for mediation as the initial option for resolving a dispute or any time during the due process hearing or complaint process,
2. request a due process hearing or file a state complaint if the disagreement is not resolved;
3. refuse to participate in mediation,
4. have an impartial person facilitate the mediation conference,
5. require that the mediation conference is carried out at a time and in a location that is reasonably convenient for you,
6. have all personally identifiable information maintained in a confidential manner, and
7. receive a written document outlining the agreements reached as a result of the mediation conference.

Requests for mediation are filed with the:
Office of Administrative Hearings
Attention: Early Start Intervention Section
2349 Gateway Oaks Drive, Suite 200
Sacramento, CA 95833
(916) 263-0654 Fax: (916) 376-6318

DUE PROCESS HEARINGS
All parents are encouraged to resolve differences at the lowest administrative level possible. When differences between you and a regional center or LEA cannot be resolved, due process hearings are available. You, as a parent, are encouraged to seek assistance from your child’s service coordinator, the regional center, or the Special Education Local Plan Area (SELPA) office. [CFR 303.419, CFR 303.420, CCR 52172, CCR 52173, CCR 52174]

Circumstances leading to a due process hearing may be disagreements related to a proposal or refusal for identification, evaluation, assessment, placement, or services. [CFR 303.403(a), CFR 303.419, CCR 52172]

Your child will continue to receive the early intervention services identified on the IFSP that he/she is currently receiving unless you and the regional center or LEA otherwise agree to a change. If your disagreement involves a new service that has not started, your child will receive all services identified on the IFSP that are not in dispute. This does not include your regional center providing early intervention services after your child has reached 36 months of age, as federal law and regulations do not allow states to pay for early intervention services under any circumstances once your child transitions from Early Start. The program or programs your child enrolls in subsequent to transition from Early Start is responsible for providing you and your child services for which he or she is eligible to receive. [CFR 303.425, CCR 52172(f)]

Requests for a due process hearing are filed with the Office of Administrative Hearings at the following address:* [CFR 303.420, CCR 52172]

Office of Administrative Hearings
Attention: Early Start Intervention Section
2349 Gateway Oaks Drive, Suite 200
Sacramento, CA 95833
(916) 263-0654 Fax: (916) 376-6318

*The due process hearing request form may be obtained from your service coordinator, the regional center, the LEA, and DDS website: www.dds.ca.gov/Forms/pdf/DS1802.pdf

The due process hearing must be completed within 30 days of receipt of the request by the Office of Administrative Hearings. The timely issuance of the written decision may not be delayed by any concurrent voluntary local efforts to resolve the matter. The decision will be final unless appealed.[CFR 303.423, CCR 52172]
As a parent, you have the right to
[CFR 303.422, CCR 52172]
1. have the due process hearing conducted by an impartial person not employed by an agency serving your child who is knowledgeable in the laws relating to early intervention and the service needs of infants, toddlers, and families; [CFR 303.421, CCR 52173, CCR 52174]
2. require that the proceeding is carried out at a time and in a location that is reasonably convenient for you; [CFR 303.423, CCR 52172]
3. have all personally identifiable information maintained in a confidential manner; [CFR 303.460, CCR 52160, CCR 52169]
4. bring a civil action against the other party following completion of the proceeding if you disagree with the results; [CFR 303.424]
5. receive services identified on the IFSP that are not in dispute; and [CFR 303.425, CCR 52172]
6. have mediation discussions kept confidential and not used as evidence in any subsequent due process or civil proceedings. [CCR 52173(j)]

During a due process hearing, you also have the right to
1. be accompanied and advised by counsel and/or by individuals with special knowledge with respect to early intervention services for children under age three years; [CFR 303.422, CCR 52174]
2. present evidence, confront, cross-examine, and compel the attendance of witnesses; [CFR 303.422, CCR 52174]
3. prohibit the introduction of any evidence at the proceeding that has not been disclosed to you at least five days before the proceeding begins; [CFR 303.422, CCR 52174]
4. obtain a written or electronic verbatim transcription of the proceeding; and [CFR 303.422, CCR 52174]
5. obtain written findings of facts and decisions within 30 days from the date the request is filed. [CFR 303.422, CCR 52174]

STATE COMPLAINTS
Any individual or organization may file a signed, written complaint against the Department of Developmental Services (DDS), the California Department of Education (CDE), or any regional center, LEA, or private service provider that receives Part C funds alleging violation of any State or federal early intervention statute or regulation. The complaint process can also address remedies for denial of eligibility or appropriate services. However, even though DDS is mandated to investigate any complaint it receives, state law does not allow disclosure of the Early Start recipient’s personally identifiable information without written parental consent, other than authorized employees specified by the regional center or LEA.

Information or assistance in filing complaints is available from your child’s service coordinator, the regional center office, or the special education local plan area (SELPA). DDS and CDE are available for consultation regarding the filing of a complaint. Additional assistance is available from advocacy organizations such as the State Council on Developmental Disabilities or Disabilities Rights California. As efforts to resolve the matter at the local level are undertaken, a complaint may be filed concurrently with a request for a mediation conference or due process hearing. [CFR 303.501, CCR 303.510, CCR 303.511, CCR 52170]

Complaints are filed with the:
Department of Developmental Services
Office of Human Rights and Advocacy Services
Attention: Early Start Complaint Unit
1600 9th Street, MS 2-15
Sacramento, CA 95814
(916) 654-1888 Fax: (916) 651-8210
[CFR 303.510, CCR 52170]

Any individual or organization who files a complaint has the right to [CFR 303.511, CCR 52170]
1. receive assistance in filing the complaint from the service coordinator, regional center, or LEA; [CCR 52170]
2. not be compelled to use any other procedures under the Education Code or the Lanterman Developmental Disabilities Services Act to resolve the complaint; [GC 95007, CCR 52170]
3. submit additional information to DDS that may be helpful to the investigation; [CFR 303.512(a)(2)]
4. receive a final written decision within 60 days of the date DDS receives the complaint; [CFR 303.512(c), CCR 52171]
5. receive appropriate remedies that may include monetary reimbursement or other corrective action, and assurance that services will be provided appropriately in the future if the decision of DDS includes remedies for denial of appropriate services; [CFR 303.512(c), CCR 52171]
6. have any issue in a complaint that is not part of a due process hearing be resolved by DDS within 60 days of the receipt of the complaint; [CFR 303.512(c), CCR 52171(c)]
7. be notified by DDS that the hearing decision is binding if an issue is being raised in a complaint that had previously been decided in a due process hearing involving the same parties; and [CCR 52171(d)]
8. have any complaint resolved that alleges the failure of a public agency or private service...
provider to implement a due process decision. [CCR 52171(e)]

The complaint must

1. be in writing and contain a signed statement alleging that DDS, CDE, the regional center, LEA, or other service provider involved with Early Start has violated a federal or State law or regulation; [CFR 303.511, CCR 52170]
2. provide the name, address, and phone number of the complainant; [CCR 52170]
3. contain a statement of facts upon which the violation is based; [CFR 303.511, CCR 52170]
4. include the name of the party responsible against whom the complaint is being filed; [CCR 52170]
5. have occurred not more than one year before the date the complaint is received by DDS unless a longer period is reasonable because the alleged violation continues for the child or other children, or [CCR 52170(c)]
6. have occurred not more than three years before the date on which the complaint is received by DDS if the complainant is requesting reimbursement or corrective action as remediation of the complaint; and
7. the complaint may also include, if applicable, a description of the voluntary steps taken at the local level to resolve the complaint. [CCR 52170]