



What is Regional Center of Orange County (RCOC)?

RCOC is a non-profit agency that coordinates individualized services for people with developmental disabilities.

Telephone: 714-796-5100 (24 Hour)

New Referrals Only: 714-796-5354 (Intake Department) or Fax 714-796-5200

Who Qualifies?

1. According to state law, a person is eligible for RCOC services if all of the following criteria are met:
 - ▶ The person has a disability due to intellectual disability, cerebral palsy, autism, epilepsy or a condition requiring treatment similar to that for people with intellectual disability.
 - ▶ The disability began before the age of 18.
 - ▶ The disability is likely to continue indefinitely.
 - ▶ The disability is substantially handicapping for the individual.
2. RCOC also coordinates the State-mandated Early Start Program which provides early intervention services for children under age 3 who have one of the following:
 - ▶ Significant developmental delay.
 - ▶ Established risk conditions expected to result in significant developmental problems.
 - ▶ Low incidence condition: vision, hearing or orthopedic impairment.
 - ▶ High risk of having a substantial developmental disability due to a combination of risk factors.
3. Comfort Connection Family Resource Center with referrals to generic agencies:
 - ▶ At risk of exhibiting a significant developmental delay.

Services Available

Some of the services offered to eligible individuals may include service coordination, early intervention services, respite, behavioral health services, support groups, residential care and adult programs. RCOC may purchase medical, diagnostic and assessment services when there is a need to clarify the person's developmental disability. Additionally, RCOC may supplement or fund for medical or dental services if these services are not available through another generic resource and the need is related to the developmental disability.

Referrals

If you have a patient who fits any of the above criteria, please refer to RCOC (see reverse) and ask the patient or the patient's parent to contact RCOC's Intake and Assessment Unit at 714-796-5354 for an initial assessment to determine eligibility for services.

RCOC Referral for Services Form

FAX TO: 714-796-5200

PHONE: 714-796-5354

REFERRAL FOR SERVICE	
Date: _____	Is family aware of referral? Yes <input type="checkbox"/> No <input type="checkbox"/>
Referred by: _____	Supporting documentation? Yes <input type="checkbox"/> No <input type="checkbox"/>
Address: _____	City, State Zip
Phone: _____	Fax: _____
Language: English <input type="checkbox"/> Spanish <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other _____	

Patient Name: _____	DOB: ___/___/___	Age: ___	M <input type="checkbox"/>	F <input type="checkbox"/>
a/k/a: _____	Email Address: _____			
Address: _____	City, State, Zip			
Phone Number: Home () _____	Facility: () _____			
Name of: Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Conservator <input type="checkbox"/> _____				

Early Start (Birth to 36 Months)	Comfort Connection Family Resource Center (Birth to 36 Months)
Children under age 3 are eligible for services under California’s Early Start Program if one of the following factors is present: <input type="checkbox"/> Significant developmental delay <input type="checkbox"/> Established risk conditions expected to result in significant developmental problems <input type="checkbox"/> High risk of having a developmental disability due to a combination of risk factors LOW INCIDENCE: Vision <input type="checkbox"/> Hearing <input type="checkbox"/> Orthopedics <input type="checkbox"/>	<input type="checkbox"/> At risk of exhibiting a significant developmental delay

Developmental Disability (Over Age 3)	
<input type="checkbox"/> Intellectual Disability I.Q.: _____	<input type="checkbox"/> Cerebral Palsy Type: _____
<input type="checkbox"/> Epilepsy Frequency of seizures: _____	<input type="checkbox"/> Autism Diagnosed by: _____
<input type="checkbox"/> Other conditions similar to Intellectual Disability: _____	

Comments: