

BABY BOOK 2002 SEE HOW WE'VE GROWN

BIRTH TO THREE BABY BOOK 2002

Introduction	1
Mission	2
Here is How We Fulfill Our Mission	3
Making the Connection: Referrals	4
How We Make a Difference: Service Delivery	9
When It's Time to Say Goodbye	13
Costs of Doing Business: Our Budget and Expenses	14
We Can't Do It Alone: Our Collaborators	15
Numbers of Children by Town	-17
Ways We Stay Connected	18

Please Note: Data reflect fiscal year 2002 (FY02) from July 1, 2001 through June 30, 2002.

INTRODUCTION

The Connecticut Birth to Three System is like a big family working together to support other families whose babies or toddlers need help with their development. This Baby Book shows how we work to reach our goals for children, for families, and for our state's system of early intervention.

Denzel and his family and friends share their Birth to Three experiences in the photos throughout this Baby Book. Denzel was diagnosed with a brain tumor at three months of age and was operated on immediately. The tumor was successfully removed and a shunt inserted. The family then had a difficult decision to make. Denzel could receive chemotherapy to prevent the tumor from growing back but because of his young age, the chemotherapy might cause some brain damage. Their second option was to wait and see if the tumor would grow back. His family chose the second option and according to a recent MRI, it has not grown back.

Denzel and his family have participated in the Birth To Three System since he was six months old because of his delayed development. He received visits in his home until last winter when he began attending a local childcare center. He is visited weekly by a developmental therapist, and monthly by physical, occupational and speech therapists. His family and his service coordinator say that he is making good progress in all areas of his development. Denzel actively participates in his childcare classroom, and enjoys many daily activities with his friends, teachers, and family.

OUR MISSION

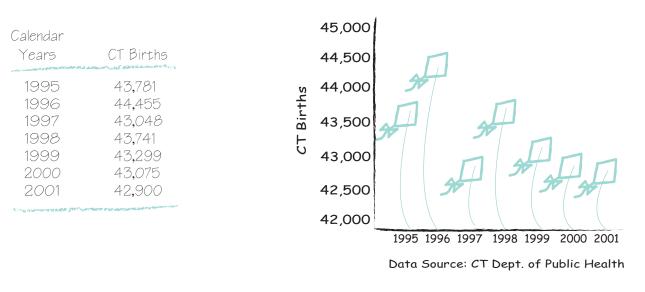
The mission of the Connecticut Birth to Three System is to strengthen the capacity of Connecticut's families to meet the developmental and health-related needs of their infants and toddlers who have delays or disabilities. The System will ensure that all families have equal access to a coordinated program of comprehensive services and supports that foster collaborative partnerships, are family centered, occur in natural settings, recognize current best practices in early intervention, and are built upon mutual respect and choice.

HERE IS HOW WE FULFILL OUR MISSION

- We receive referrals by phone, fax, and e-mail to connect families with our supports through the Child Development Infoline (1-800-505-7000 or www.birth23.org)
- The program that receives the referral meets with the child and family to evaluate the child's developmental strengths and needs. Results are shared with the family in their native language and in writing.
- When a child is not eligible, the family is offered a way to monitor changes in their child's development and decide if there is a need to re-evaluate the child. Information about other community resources is provided to the family.
- When a child is eligible, the family works with their service coordinator to choose what they want their child to work on and their goals for their family. Together with their Birth to Three team, they develop a plan of services and supports to help reach those goals. The child's doctor is an important team member.
- •The family learns learn new ways to teach their child during regular activities throughout the day. Services and supports change as the family's goals for themselves and their child change.
- Children leave the Birth to Three System every day, moving into school district special education programs or other community programs when they reach the age of three or when they no longer need early intervention services.

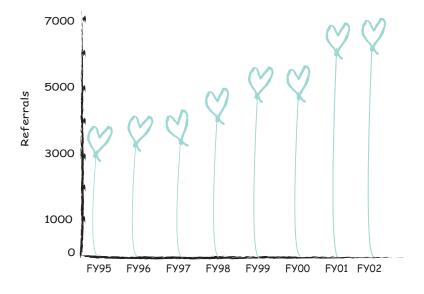
MAKING THE CONNECTION: REFERRALS

A total of 6,601 children were referred to the Birth to Three System in FY02. New referrals have increased each year for the past seven fiscal years even though fewer babies were born in Connecticut during each of those same years.



Fiscal Years	Referrals
1995 1996 1997 1998 1999 2000 2001 2001 2002	3,959 4,292 4,535 4,913 5,504 5,587 6,544 6,601

Please Note: data reflects fiscal years from July through June.



Who connected families with Birth to Three?

Most families referred themselves (67%) or were referred by a health care provider (26%).

	Families, foster families, relatives or friends	67%	
	Health Care providers and Hospitals	26%	
	State Agencies	4%	
	Child Care Agencies	1%	
	Social Service Agencies	1%	
	All Others	1%	
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How did families find out about us?

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	From their primary health care provider	68%	
	From a relative, friend, or co-worker	9%	
	From another health care provider	7%	
	From their child care provider •	4%	
	From a social service organization	3%	
	As a result of the Ages & Stages Questionnaire	2%	
	From their school district	2%	
	From an early intervention provider	2%	
	All others	2%	

5

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Where do our families live?

We work with families from all 169 cities and towns across Connecticut. One third of our new referrals were from:

city/town	# children
Hartford	365
Bridgeport	297
Stamford	270
New Haven	269
Waterbury	261
Danbury	166
Norwalk	147
Fairfield	130
West Hartford	129
New Britain	123
Greenwich	121

See the final pages of this book for a complete town-by-town chart of numbers of children referred and served.

Who are the infants and toddlers referred?

Age at Ref		Boys and Girls		
Birth-11 months			4,393 = 67%	
12-23 months	33%	girls	2,208 = 33%	
24-36 months	1 1 70			
Average Age	19.7 months			

Why are children referred?

Children have different kinds of developmental needs that bying them into the Birth to Three System. Referrals for 6,601 children in FYO2 were because of concerns about:

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	Communication	68%	Hearing	1%
	Motor (fine & gross)	28%	Vision	<1%
	Adaptive	10%	Cognitive	<1% 🔍
	Social/emotional	5%	Other	5%

(total percentages exceed 100 because there can be more than one concern for any one child)

Why are children eligible for the Birth to Three System?

4,475 children were found eligible for CT Birth to Three services in FYO2:

86% of children had developmental delays

- 74% tested 2 standard deviations below average in at least one area of development
- \bullet 23% tested 1.5 standard deviations below average in two or
- more areas of development
 - 3% could not be tested, but had a significant developmental delay according to informed clinical opinion.

14% of children had diagnosed conditions likely to result in developmental delay, such as:

Extremely Low Birthweight (<1000 grams)	107	
Down Syndrome	56	
Hearing Loss 💿	28 *	
Brain deformities and anomalies	20	
Cleft Palate	14 🔍	

• Twenty eight infants younger than three months were referred as a direct result of universal newborn hearing screening. In the past, children born with a hearing loss were not usually identified until about 18 months of age.

What do we offer for children who are not eligible for Birth to Three services?

Parents of children who are found not eligible for Birth to Three services or whose children have left the Birth to Three System before age three may enroll their children in the Ages and Stages Developmental Monitoring Program. Families complete a series of developmental questionnaires about their child and return them to the Child Development Infoline. If scores show

that the child's development is increasingly delayed, the family is offered another evaluation. If the child's development appears to be on track, the family is sent a report with suggested activities to continue to help their child learn new skills.

619 new families chose this method to monitor their child's development in FYO2. During the year, 155 children who were being monitored were referred for another evaluation, with 108 (70%) found eligible.

HOW WE MAKE A DIFFERENCE: SERVICE DELIVERY

During FYO2, we had 42 approved programs employing approximately 850 service providers working with 8,791 eligible children and their families.

Statewide Total = 8,791 Children

Northwest - 1,594

- Cheshire Public Schools
- Children's Therapy Services
- Danbury Public Schools
- Early Connections NW
- Easter Seal of Waterbury
- Education Connection
- Family Junction
- Project Interact
- Rehabilitation Associates
- Therapy Solutions

Southwest - 1,837

- Ahlbin Centers for Rehabilitation Medicine
- ARI of CT
- ARC Greenwich
- Child & Family Network
- Cooperative Educational Services
- CT Easter Seal Southwest
- Early Connections SW
- Kennedy Center
- Rehabilitation Associates
- Rehabilitation Center of Southwestern CT
- St. Vincent's Special Needs Services
- STAR/Rubino Center

North Central - 2,493

- CT Children's Medical Center
- Capitol Region Education Council
- Early Connections NC
- East Hartford Public Schools
- HARC Steppingstones
- Jane Bisantz & Associates
- Key Services
- May Center
- McLaughlin & Associates
- Project Interact

South Central - 1,778

- Easter Seal of Central CT
- Early Connections SC
- Family Junction
- Hill Health Center
- KIDSTEP-SARAH
- LEARN
- REACHOUT
- Rehabilitation Associates
- St. Vincent's Special Needs Services

Statewide Programs

(Numbers included in regional totals)

- American School for the Deaf
- New England Center for Hearing Rehabilitation
- Soundbridge

9

• Board of Education and Services for the Blind

Eastern - 1,089

- CT Easter Seal Southeast
- Early Connections EA
- KIDSTEP-SARAH
- LEARN
- McLaughlin & Associates



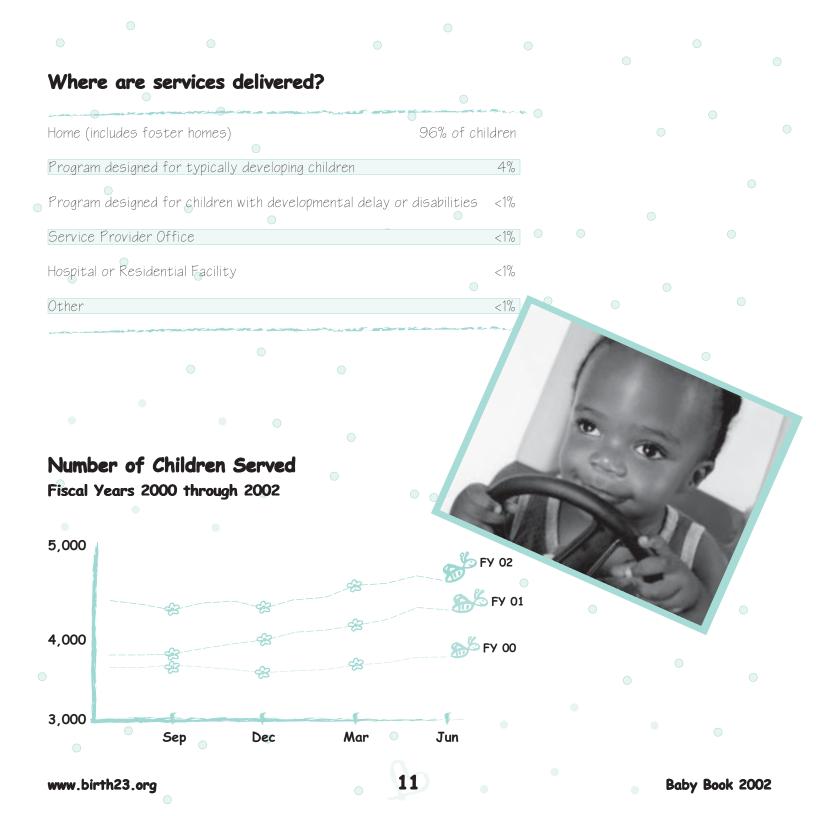
Who is supporting enrolled children and their families?

	Number of Children	% of Children
Speech and Language Pathologist	5321	63.0
Special Educator	4031	47.7
Physical Therapist	2752	32.6
Occupational Therapist	2557	30.3
Early Intervention Associate or Assis	tant 1637	17.0
Audiologist	369	4.4
Social Worker	333	3.9
Nutritionist	238	2.8
Nurse	146	1.7
Psychologist	92	1.0
Physical Therapy Assistant	46	.5
Family Therapist/Counselor	34	.4
Board Certified Behavior Analyst		
or Associate Analyst	24	.3
Occupational Therapy Assistant (COT)	A) 24	.3
Orientation and Mobility Specialist	23	.3
Physician	6	.1

How much service, on average, are children and families receiving?

Most children receive an average of 6 service hours per month. Some children (about 80 per month) receive more "intensive services" totaling more than 15 hours per month. Many of these children, but not all, have an autism spectrum disorder. All families are taught new ways to help their children learn, and are encouraged to use these techniques with their children throughout their every-day routines and activities.





How do we assure quality?

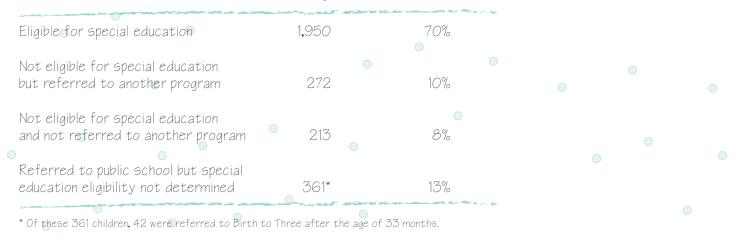
- Birth to Three Procedures Manual: standard procedures for all aspects of approved program operations in order to assure consistency, effectiveness, and compliance with laws and regulations; updated annually
- Service Guidelines: recommended best practices and position statements on specific topics based on reviews of research and current practices in the field along with additional resource listings: current guidelines cover the topics of: autism spectrum disorder, natural environments, communication disorders, infant mental health, deafness, nutrition, and assistive technology
- **Training:** annual calendar of training events offered to assure that personnel are knowledgable and updated on a wide range of topics related to family support, transdisciplinary early intervention, and effective service coordination
- Monitoring of Programs: all approved programs complete a self-assessment followed by an on-site review involving checking early intervention records, interviewing families, interviewing staff, and reviewing financial and billing practices; areas needing improvement are addressed in a continuous improvement plan approved and monitored by the regional manager
- Continuous Improvement Plan: data-based strategies developed to ensure that the Connecticut Birth to Three System and the State Department of Education special education program effectively address areas in need of improvement and continue to use strategies that maintain areas of strength in service delivery; approved by the federal Department of Education with annual progress updates

WHEN IT'S TIME TO SAY GOODBYE

Most families continue with Birth to Three until their children turn three years old or no longer need our services and supports. Families are connected with new community resources as the transition process unfolds. The 4,239 children who exited the System in Fiscal Year 2002 left because:

	# children	% of children
Child turned three years old	2.796	66
No further services needed by child	643	15
Parent withdrew child	321	8
Unable to locate	286	7
Moved out of state	174	4

The 2,796 children who left at age three were:



COSTS OF DOING BUSINESS

The Birth to Three budget for Fiscal Year 2002 was \$33,417,702 from state and federal sources, with total system expenditures of \$35,776,861. Only 7% of that total amount was spent on administration of the System plus a research study, leaving 93% available for direct services.

Actual Expenditures

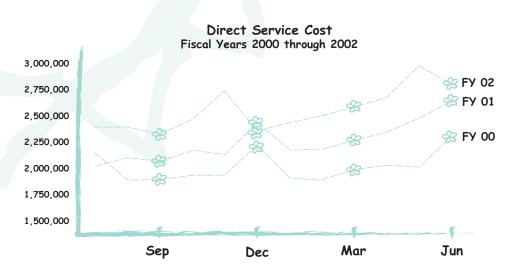
Total State Funds	\$	27,090,540
Total Federal Funds		5,017.533
Commercial Insurance Funds		3,661,670
Private Grants and Donations		7,118
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Total System Expenditures*

\$ 35,776,861

 * Medicaid claims resulted in \$3.6 million in revenue to the State General Fund, decreasing the net state contribution to Birth to Three by that amount

The average statewide gross annual cost per child was \$7,966. After commercial insurance reimbursements, the net average cost per child was \$7,457.



WE CAN'T DO IT ALONE: OUR COLLABORATORS

Many people and agencies work together with the Birth to Three System in supporting eligible families and strengthening the System. Here are some of our closest allies:

State Interagency Coordinating Council (SICC) Local Interagency Coordinating Councils (LICCs) Birth to Three Family Leaders Birth to Three Medical Advisory Committee Birth to Three Public Awareness Committee Early Childhood Cultural Competence Committee CSPD Council

Other Connecticut State Agencies

Department of Children and Families Department of Education Department of Social Services Department of Public Health Department of Insurance Office of Protection and Advocacy Commission on the Deaf and Hearing Impaired Board of Education and Services for the Blind University of Connecticut - A.J. Pappanikou Center for Disabilities Children's Trust Fund Commission on Children

15

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FISCAL YEAR 2002: NUMBERS OF CHILDREN BY TOWN

Town	# of children referred	Served	Town #	of children referred	Served
Andover	8	11	Darien	56	61
Ansonia	32	43	Deep River	13	14
Ashford	8	11	Derby	21	28
Avon	30	37	Durham	6	9
Barkhamst	ed 6	12	East Granby	10	16
Beacon Fal	lls 15	17	East Haddam	22	19
Berlin	23	36	East Hampton	17	25
Bethany	8	7	East Hartford		162
Bethel	43	67	East Haven	46	56
Bethlehem			East Lyme	23	27
3loomfield	33	40	East Windsor	20	21
3olton	6	12	Eastford	0	
Bozrah	9	8	Easton	15	22
Branford	50	54	Ellington	23	29
3ridgeport	297	403	Enfield	64	99
3ridgewate		8	Essex	16	11
Bristol	109	137	Fairfield	130	147
3rookfield	39	46	Farmington	34	48
3rooklyn	11	24	Franklin	1	
Burlington	25	37	Glastonbury	55	79
Canaan			Goshen		6
Canterbury	/ 10	9	Granby	22	30
Canton	19	24	Greenwich	121	175
Chaplin		8	Griswold	14	31
Cheshire	54	61	Groton	93	133
Chester			Guilford	27	55
Clinton	31	35	Haddam	8	11
Colchester	47	72	Hamden	115	135
Colebrook			Hampton		7
Columbia	11	17	Hartford	365	492
Cornwall			Hartland		
Coventry	26	36	Harwinton		10
Cromwell	11	13	Hebron	18	28
Danbury	166	201	Kent		6

The numbers for towns with 5 or fewer have been redacted to protect privacy.



Town # a	f children referred	Served	Town #	t of children referred	Served	Town #	of children referred	Served
Killingly	31	59	Norwalk	147	178	Stonington	11	24
Killingworth	11	12	Norwich	70	106	Stratford	95	117
Lebanon		11	Old Lyme	9	16	Suffield	19	26
Ledyard	30	36	Old Saybrook	< 18	16	Thomaston	15	15
Lisbon	17	18	Orange	15	24	Thompson	22	28
Litchfield	13	21	Oxford	17	21	Tolland	30	55
Lyme			Plainfield	33	57	Torrington	63	79
Madison	24	45	Plainville	18	31	Trumbull	80	105
Manchester	79	102	Plymouth	23	24	Union	0	0
Mansfield	13	19	Pomfret			Vernon	43	69
Marlborough	14	21	Portland	16	17	Voluntown		
Meriden	108	158	Preston	9	10	Wallingford	60	81
Middlebury	10	8	Prospect	23	25	Warren		
Middlefield		6	Putnam	20	25	Washington	10	12
Middletown	85	88	Redding	21	23	Waterbury	261	335
Milford	74	103	Ridgefield	69	75	Waterford	26	40
Monroe	51	64	Rocky Hill	21	38	Watertown	40	44
Montville	22	33	Roxbury			West Hartfor	rd 129	166
Morris			Salem		14	West Haven	85	127
Naugatuck	59	74	Salisbury			Westbrook	10	12
New Britain	123	193	Scotland		6	Weston	30	33
New Canaan	31	52	Seymour	27	30	Westport	58	68
New Fairfield	36	55	Sharon			Wethersfield	48	51
New Hartford	12	21	Shelton	62	86	Willington	13	15
New Haven	269	343	Sherman	9	11	Wilton	50	65
New London	54	69	Simsbury	49	76	Winchester	21	32
New Milford	67	98	Somers	15	19	Windham	59	79
Newington	31	41	South Winds	or 42	51	Windsor	40	57
Newtown	78	86	Southbury	44	42	Windsor Lock	5 21	24
Norfolk			Southington	74	93	Wolcott	19	27
North Branford	d 18	36	Sprague	7	6	Woodbridge	8	11
North Canaan			Stafford	14	20	Woodbury	10	13
North Haven	41	47	Stamford	270	346	Woodstock	8	12
North Stoning		11	Sterling	9	14			a man
						Total	6,601	8,791



WAYS WE STAY CONNECTED

The Birth to Three System website (www.birth23.org): contains current information on Birth to Three programs, federally-funded grant projects, Local ICCs and the State ICC, training opportunities, library materials about children with disabilities, laws and regulations, procedures, and links to many other state and national resources. Information is posted in both English and Spanish.

The Birth through Five News: jointly produced by the Birth to Three System and the State Department of Education and sent to all families of children enrolled in Birth to Three, directors of community agencies, preschool special education programs and Birth to Three staff covering a variety of topics such as:

Fall 2001	Environments For Success
Winter 2001	Parent Participation
Spring 2002	Inclusive Childcare
Summer 2002	Recognizing Vision and Hearing Loss

To make the information accessible to more families, the lead article is also printed in Spanish and each newsletter is posted on the Birth to Three website. FYO3 newsletters are being fully translated into Spanish for posting on the website. The Connecticut Birth to Three System is administered by the Connecticut Department of Mental Retardation

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To receive a copy of this 2002 Baby Book, please contact: Connecticut Birth to Three System, 460 Capitol Avenue, Hartford, CT 06106, 860.418.6146 or email to dmrct.birthtothree@po.state.ct.us.

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