

# FRIENDS & FAMILIES



## WORKING TOGETHER AND MAKING A DIFFERENCE

*The mission of the Connecticut Birth to Three System is to strengthen the capacity of families to meet the developmental and health-related needs of their infants and toddlers who have delays or disabilities.*

**Connecticut Birth to Three System** 2005

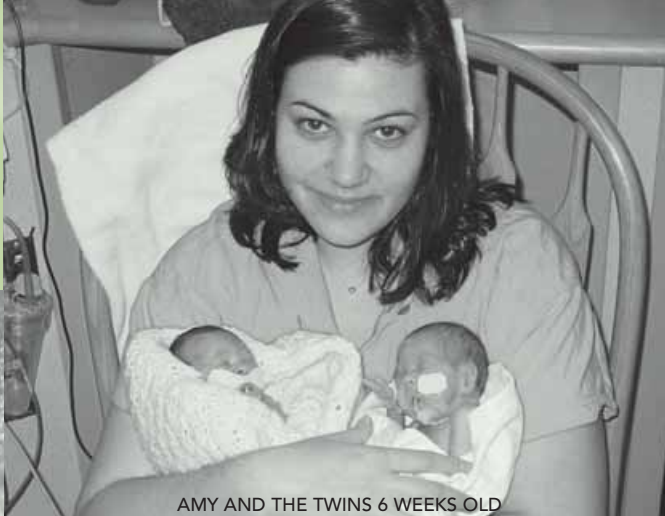
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# COLLABORATION

Working together with Connecticut families since 1993. **Connecticut Birth to Three System**



CAEDEN 1 DAY OLD



AMY AND THE TWINS 6 WEEKS OLD



NICHOLAS 1 DAY OLD

## Introduction

*Like many young couples, Amy and Kevin DeShazo wanted to start a family. Due to infertility issues, that dream had a bumpy start. They were thrilled when they learned they were to become the parents of twins! Their joy was short lived when halfway through the pregnancy, devastating complications occurred. The amniotic sac for Baby "A" ruptured, putting the entire pregnancy in jeopardy. The couple was counseled regarding their options, and decided to continue with the pregnancy, even though there was a strong chance that if the babies survived, they would suffer mental and physical disabilities.*

*Nicholas (Baby "A") and Caeden (Baby "B") came into this world four months prematurely. Weighing a little over one pound each, they were given slim odds for survival. Nicholas suffered major medical complications: heart surgery at just 12 days old, seizures, breathing and feeding difficulties. His first 6 months of life were spent in the hospital. At one point, the family was told that his long-term prognosis was questionable . . . that therapy might help, but not to expect much.*

*Caeden also had numerous complications, recurring infections, and was small for her age. Despite being so sick, she was full of energy! She spent four months in the hospital, finally coming home five days after her original due date.*

*Nicholas, Caeden and their parents began participating in the Birth to Three System when each child came home from the hospital. Throughout the past 2-1/2 years, they received various supports and services as their needs changed over time. Nicholas' major obstacle was poor muscle tone and control, while Caeden struggled with language development. Early intervention services from a physical, occupational, and speech therapist have been an important part of their routine. Their service providers used a transdisciplinary team approach to keep the number of early intervention visits manageable since Amy and Kevin felt that "more is not always better". Services were provided in their home and community locations such as the library and playgroup.*

*Despite being told that he may not walk, Nicholas reached his goal of independent walking at 33 months. This major milestone has opened many pathways for him. He began using some sign language and exploring food – the first step toward oral feeding. Caeden is using language more effectively, and is reaping the rewards of oral communication. She loves dramatic play and her "babies."*

*Nicholas and Caeden recently celebrated their third birthday and graduated to preschool! Both children are active and moving forward with their parents to explore exciting new opportunities.*

# Our Mission



**T**he 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
- ➔ are built upon mutual respect and choice

OUR JOBS AS PARENTS IS TO HELP OUR CHILDREN BECOME THE BEST NICHOLAS AND CAEDEN THAT THEY CAN BE. WE WILL HELP THEM REACH THEIR FULL POTENTIAL . . . AT WHATEVER LEVEL THAT IS.

*Amy and Kevin DeShazo*

# *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.birh23.org](http://www.birh23.org)). CDI sends the referral information to a program serving that child's town.

➤ **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 alternatives 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 shared with 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. Working with their Birth toThree team, a plan of services and supports is developed to help reach those goals. The child's doctor is included as an important team member.

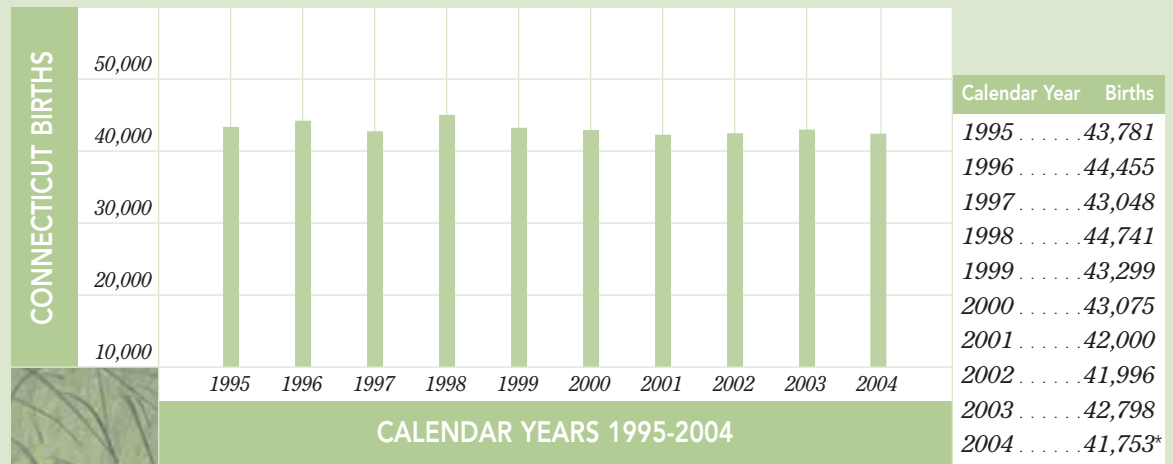
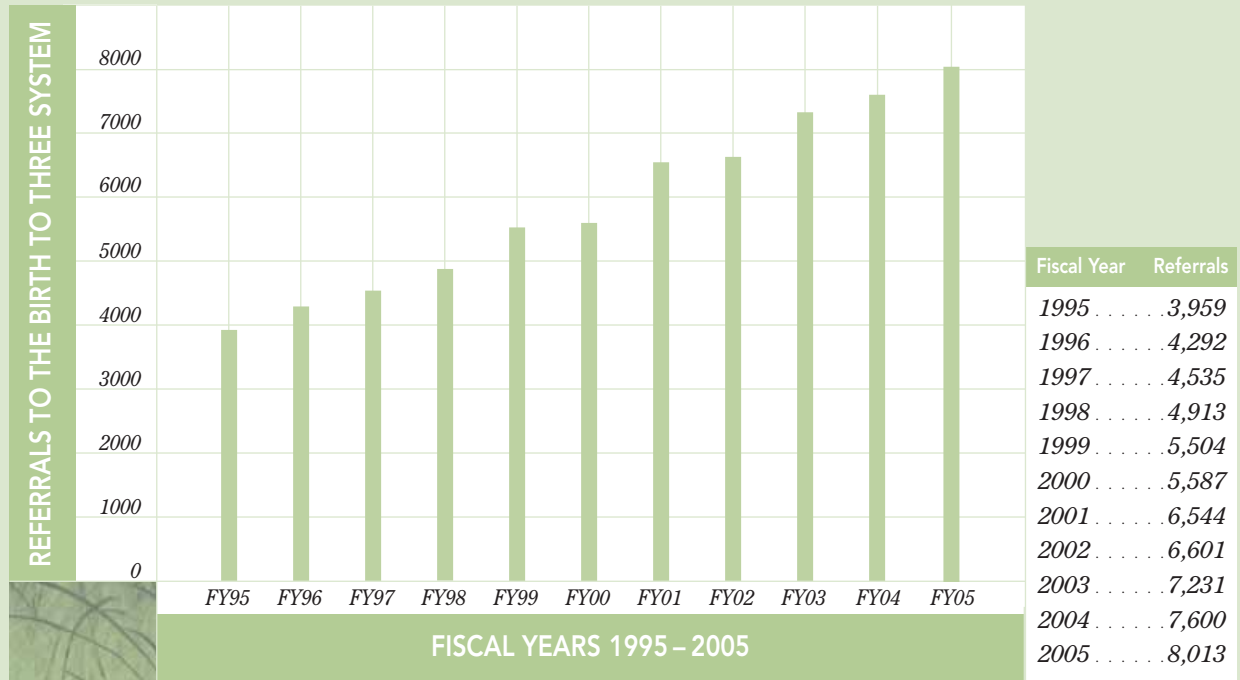
➤ **FAMILY MEMBERS LEARN** new ways to teach their child during regular activities throughout the day. Services and supports change as the family's goals for themselves and their child change.

➤ **CHILDREN LEAVE THE BIRTH TO THREE SYSTEM EVERY DAY.** Many graduate because they no longer need Birth to Three assistance. Children also transition into school district special education programs or other community-based programs when they reach the age of three.

# Making the Connection: Referrals

*How many children are referred each year?*

A total of 8,013 children were referred to the Birth to Three System in Fiscal Year 2005 (July 1, 2004 – June 30, 2005), an increase of 5% over the previous year (see Chart 1).



Birth data courtesy of the Connecticut Department of Public Health

\*Provisional Data

## Where were the children from?

New referrals were received from 167 cities and towns across Connecticut. One third of those newly referred children were from:

CITY	NUMBER OF CHILDREN
Hartford	485
Bridgeport	386
New Haven	328
Waterbury	303
Stamford	278
New Britain	197
Norwalk	194
Danbury	191
Meriden	159
Greenwich	146

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



## Who connected families with Birth to Three?

Most families referred themselves (62%) or were referred by a health care provider (27%).

REFERRAL SOURCES	PERCENTAGE
Families, Foster Families, Relatives or Friends	63%
Health Care Providers and Hospitals	29%
State Agencies	5%
Child Care Agencies	1%
Social Service Agencies	1%
All Others	<1%

## How did families or other referral sources who didn't already know about the Birth to Three System find out about it?

REFERRAL SOURCES	PERCENTAGE
From Their Primary Health Care Provider	66%
From a Relative, Friend, or Co-Worker	9%
From Another Health Care Provider	6%
As a Result of the Ages & Stages Questionnaire or Calling 2-1-1	5%
From Their Child Care Provider	4%
Social Service Organization or State Agency	3%
From an Early Intervention Provider	3%
From Their School District	2%
All Others	2%

# Making the Connection: Referrals, Continued

## Who were the infants and toddlers referred?

AGE AT REFERRAL	PERCENTAGE
Birth – 11 Months .....	27%
12 – 23 Months .....	38%
24 – 36 Months .....	35%

AVERAGE AGE AT REFERRAL	AGE
Mean .....	17.9 months
Median .....	19.0 months

BOYS & GIRLS	PERCENTAGE	NUMBER
Boys .....	65%	5,238
Girls .....	35%	2,775

## What were the reasons that children were referred?

People who referred children to the Birth to Three System expressed concerns about a variety of developmental issues. For the 8,013 children referred in FY05, these were the concerns expressed:



Communication .....	70%
Motor (fine & gross) .....	27%
Adaptive .....	13%
Social/Emotional .....	8%
Health .....	5%
Vision .....	1%
Hearing .....	1%
Cognitive .....	<1%

*(Total percentages exceed 100 because there can be more than one concern for any single child.)*



## *Why were children eligible?*

Of the 4,649 Connecticut children who were found eligible for Birth to Three services in FY05:

### **94% OF CHILDREN HAD DEVELOPMENTAL DELAYS**

- 73%** tested 2 standard deviations below average in at least one area of development
- 19%** tested 1.5 standard deviations below average in two or more areas of development
- 2%** could not be tested, but had a significant developmental delay according to informed clinical opinion

### **6% OF CHILDREN HAD DIAGNOSED CONDITIONS LIKELY TO RESULT IN DEVELOPMENTAL DELAY SUCH AS:**

Down syndrome . . . . .	.63
Extremely low birth weight . . . . .	.43
Brain deformities and anomalies . . . . .	.40
Hearing loss . . . . .	.33*
Cleft Palate . . . . .	.30

\* Twelve infants younger than three months were referred as a direct result of universal newborn hearing screening.

## *Making the Connections: Referral, Continued*

### *What does the System offer for children who are referred but are not eligible for Birth to Three services?*

Eligibility was modified effective July 1, 2003 in order to contain enrollment and thereby the cost of services.

**Follow-Along** visits were offered to directly monitor the development of three groups of children found not eligible:

- ➔ infants less than six months adjusted age whose birthweight was between 750g – 999g
- ➔ children whose receptive language was fine, but whose expressive language was tested as being at least 2 standard deviations below the mean and who were reported as having a biological risk factor for speech development
- ➔ infants and toddlers with a confirmed diagnosis that has some likelihood of later developmental delay who already exhibited a 1.5 standard deviation delay in at least one area of development.

These quarterly visits to a child's home provide ongoing developmental surveillance as well as support and information for the family on how to stimulate their child's development and connections to community resources and activities. During Fiscal Year 2005, 59 children qualified for Follow-Along visits.

Additionally, parents of all children who were found not eligible for Birth to Three services or whose children left the Birth to Three System before age three are offered a program for tracking their child's ongoing development. **Ages and Stages Questionnaires** are mailed to the family a few times a year so they may report about their child's mastery of new skills. If scores show that a child's development is increasingly delayed, the family is offered another eligibility evaluation by Birth to Three. If the child's development appears to be on track, the family is sent a developmental status report with suggested activities to continue to help their child learn new skills.

This past fiscal year, 689 new families whose children were evaluated chose to enroll their children in the Ages and Stages Questionnaire monitoring process. An additional 189 were enrolled through the **Help Me Grow** program (which assists families of children that are at-risk) and 10 from neonatal intensive care units. Overall, this represented a 5% increase over the previous year.

By June 30, 2005 **Child Development Infoline** was actively following 1,932 children, a 15% increase from the previous fiscal year. The overall return rate on the written questionnaires mailed to families was 35.6%.



## *How We Make a Difference: Service Delivery*

*How many children received services over the course of the year?*

During fiscal year 2005 (July 1, 2004 – June 30, 2005), 35 approved programs employing approximately 760 service providers worked with 8,893 eligible children and their families.

**NORTH – 2,898**

- CT Children's Medical Center
- Capitol Region Education Council
- Early Connections North
- East Hartford Public Schools
- Easter Seals of CT/RI
- HARC Steppingstones
- Jane Bisantz & Associates
- Key Service Systems
- KIDSTEPS-SARAH
- Klingberg Family Center
- McLaughlin & Associates
- Project Interact

WEST – 2,557

- Ahlbin Centers for Rehabilitation Medicine
- ARC Greenwich
- Cheshire Public Schools
- Child & Family Network
- Children's Therapy Services
- Cooperative Educational Services - Beginnings
- Danbury Public Schools
- Early Connections West
- Easter Seals of CT/RI
- Easter Seals Rehabilitation of Waterbury
- Education Connection
- Family Junction
- Kennedy Center
- Project Interact
- Rehabilitation Associates
- St. Vincent's Special Needs Services
- STAR/Rubino Center
- Therapy Solutions Center

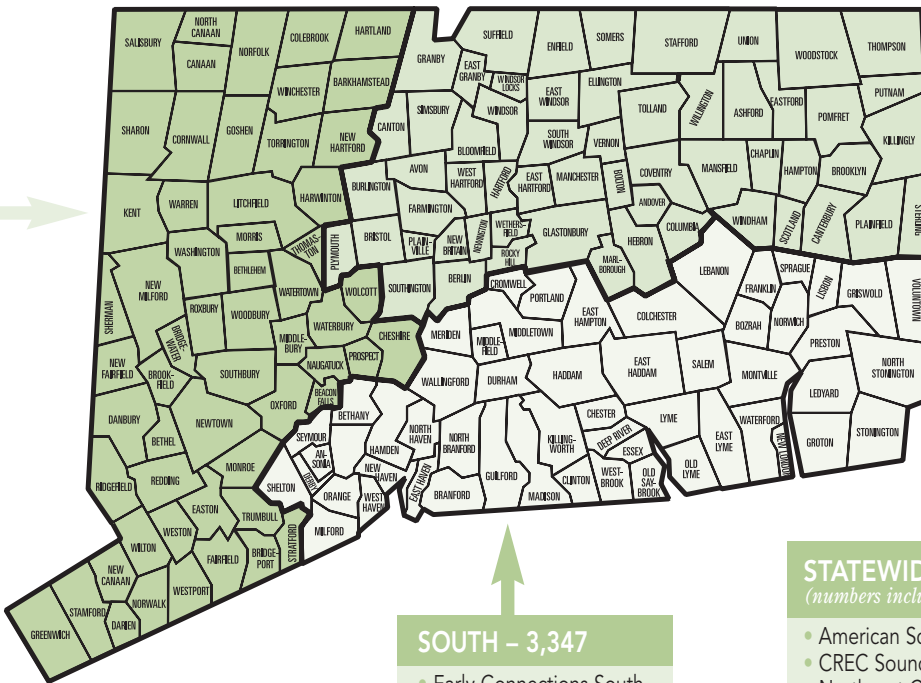
**SOUTH – 3,347**

- Early Connections South
- Easter Seals of CT/RI
- Family Junction
- Hill Health Center
- KIDSTEPS-SARAH
- LEARN
- REACHOUT
- Rehabilitation Associates

## STATEWIDE PROGRAMS

*(numbers included in regional totals)*

- American School for the Deaf
- CREC Soundbridge
- Northeast Center for Hearing Rehabilitation



*How We Make a Difference: Service Delivery, Continued*

*Who supported enrolled children and their families?*

SERVICE DELIVERED BY	NUMBER OF CHILDREN	% OF CHILDREN
Speech and Language Pathologist	5,318	60%
Special Educator	3,944	44%
Occupational Therapist	2,610	29%
Physical Therapist	2,578	29%
Early Intervention Associate or Assistant	2,031	23%
Social Worker	474	5%
Audiologist	342	4%
Nutritionist	180	2%
Occupational Therapy Assistant (COTA)	67	<1%
Nurse	45	<1%
Board Certified Behavior Analyst or Associate Analyst	44	<1%
Family Therapist / Professional Counselor	28	<1%
Physical Therapy Assistant	19	<1%
Psychologist	15	<1%
Orientation and Mobility Specialist	14	<1%
Vision Specialist	6	<1%
Physician	2	<1%

*Where were services delivered?*

PRIMARY LOCATIONS	PERCENTAGE
Home (includes foster homes)	96%
Program Designed for Typically Developing Children	4%
Service Provider Office	<0.1%
Hospital (inpatient)	<0.1%
Program Designed for Children with Developmental Delays or Disabilities	<0.1%
Residential Facility	<0.1%
Other	<0.1%

*How much service did children and families receive?*

During the year, 492 children received what are described as “intensive services” (more than 15 hours per month) and approximately 240 of these children have an autistic spectrum disorder. On average, these children were scheduled to receive 39 hours of service per month. If we look only at children who are not receiving intensive services, the statewide average as listed in their Individualized Family Service Plans is 4.66 hours per month.

# When It's Time to Say Goodbye



## *When and why do children leave the Birth to Three System?*

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 4,481 children who exited the System in Fiscal Year 2005 left because:

REASON FOR LEAVING BIRTH TO THREE	NUMBER OF CHILDREN	% OF CHILDREN
Child turned three years old . . . . .	2,666 . . . . .	58%
Parent withdrew child . . . . .	798 . . . . .	17%
No further service needed by child . . . . .	550 . . . . .	12%
Unable to locate . . . . .	341 . . . . .	7%
Moved out of state . . . . .	212 . . . . .	5%
OF THE 798 WHO WITHDREW THEIR ELIGIBLE CHILD, 266 WITHDREW PRIOR TO THEIR INITIAL IFSP MEETING		

Of the 2,666 children who left at age three:

PLANS AFTER BIRTH TO THREE	NUMBER OF CHILDREN	% OF CHILDREN
Eligible for special education . . . . .	1,872 . . . . .	70%
Not eligible for special education but referred to another program . . . . .	258 . . . . .	10%
Not eligible for special education and not referred to another program . . . . .	183 . . . . .	7%
Referred to public school but special education eligibility not determined by 3rd birthday . . . . .	233 . . . . .	9%
Not referred to public school . . . . .	120 . . . . .	4%

# Costs of Early Intervention

## Our Budget and Expenses

The Birth to Three budget for Fiscal Year 2005 was \$33,423,421 from state and federal sources, with total system expenditures (including parent payments and health insurance) of \$35,980,488. Only 5% of that total amount was spent on administration of the System, leaving 95% for direct services.

ACTUAL EXPENDITURES BY FUNDING SOURCE	
FUNDING SOURCE	DOLLARS
Total State Funds .....	\$26,964,321
Total Federal Funds .....	5,081,990
Commercial Insurance Funds .....	3,230,026
Parent Fees .....	704,151
<b>TOTAL SYSTEM EXPENDITURES*</b>	<b>\$35,980,488</b>

Medicaid claims resulted in \$4.4 million in revenue to the State General Fund, DECREASING the net state contribution to Birth to Three by that amount.

COSTS PER CHILD	
Average statewide gross annual cost per child was .....	\$7,937
After commercial insurance reimbursements, the net average cost per child was .....	\$7,039

## State Fiscal Year 2005

(July 1, 2004 - June 30, 2005)

## Expenditures Part C of IDEA

## Federal Funding Only

CATEGORIES	DOLLARS
Salaries and Fringe for 11.5 FTE Positions .. (Birth to Three central office and regional staff)	\$1,295,458
Other Expenses .....	187,388 (printing, postage, supplies, travel, equipment)
State ICC .....	6,292
Local ICCs .....	7,224
Public Awareness .....	61,987
Data System .....	47,945
Personnel Development .....	153,702
Supervision and Monitoring .....	21,706
Procedural Safeguards .....	3,985
<b>TOTAL SYSTEM COMPONENTS .....</b>	<b>\$1,785,687</b>
<b>TOTAL DIRECT SERVICES .....</b>	<b>\$2,377,094</b>
<b>TOTAL PART C OF IDEA FUNDED EXPENDITURES .....</b>	<b>\$4,162,781</b>

The available state and federal funding for Fiscal Year 2006 is \$35,676,315. With the addition of \$3,300,000 in projected commercial health insurance funding and parent payments of \$650,000, the total projected budget for the System is \$39,626,315.



# *We Can't Do It Alone: Our Collaborators*

**MANY PEOPLE, COMMITTEES AND AGENCIES WORK WITH THE BIRTH TO THREE  
SYSTEM IN SUPPORTING CONNECTICUT'S FAMILIES WITH YOUNG CHILDREN.  
HERE ARE SOME OF OUR CLOSEST ALLIES:**

## STATE INTERAGENCY COORDINATING COUNCIL

*Laurel Ross*, CHAIR  
ARC GREENWICH, PROVIDER  
*Karen Biernat*, PARENT  
*Carmina Cirioli*, PARENT  
*Mary Ann Dayton-Fitzgerald*, DEPT. FOR  
CHILDREN AND FAMILIES  
*Elizabeth Daly*, OFFICE OF PROTECTION  
& ADVOCACY  
*Mary Eberle*, UNIVERSITY CENTER FOR  
EXCELLENCE  
*Maria Engborg*, PARENT  
*Rita Esposito*, REACHOUT, INC., PROVIDER  
*Ann Gionet*, PARENT  
*Linda Goodman*, DEPT. OF MENTAL  
RETARDATION  
*Mark A. Greenstein, M.D.*,  
DEVELOPMENTAL PEDIATRICIAN  
*Clara Gutierrez*, PARENT  
*Jeanette Haines*, BOARD OF EDUCATION  
AND SERVICES FOR THE BLIND  
*Moirra Herbert*, DEPT. OF INSURANCE  
*Melvette Hill*, PARENT  
*Cynthia Jackson*, CHILDREN'S THERAPY  
SERVICES, PROVIDER  
*Robert LaCamera, M.D.*, AMERICAN  
ACADEMY OF PEDIATRICS

*Joseph McLaughlin*, MCLAUGHLIN &  
ASSOCIATES, LLC, PROVIDER  
*Denise W. Merrill*, CT LEGISLATOR  
*Amy Moncy*, EASTER SEALS OF CT/RI, PROVIDER  
*Maria Synodi*, DEPT. OF EDUCATION  
*Robin Tousey-Ayers*, DEPT. OF PUBLIC HEALTH  
*Myra Watnick*, REHABILITATION ASSOCIATES,  
PROVIDER  
*Aurele Wilson*, DEPT. OF SOCIAL SERVICES  
*Diane Wixted*, COMMISSION ON THE DEAF  
AND HEARING IMPAIRED

## COMMITTEES & COUNCILS

*Medical Advisory Committee*  
*Early Childhood Multi-Cultural  
Competence Committee*  
*Public Awareness Committee*  
*Comprehensive System of Personnel  
Development Council*  
*Local Interagency Coordinating Councils:*  
DANBURY  
GREATER HARTFORD  
LOWER FAIRFIELD  
MERIDEN / WALLINGFORD  
MIDDLESEX COUNTY  
NEW HAVEN  
TORRINGTON  
WATERBURY

## CONNECTICUT STATE AGENCIES

*Children's Trust Fund*  
*Commission on Children*  
*Commission on the Deaf and Hearing  
Impaired*  
*Department for Children and Families*  
*Department of Education*  
*Department of Social Services*  
*Department of Public Health*  
*Department of Insurance*  
*Office of Protection and Advocacy*  
*Board of Education and Services  
for the Blind*  
*University of Connecticut – University  
Center for Excellence*

*... and many families  
and healthcare providers  
throughout Connecticut.*

# Numbers of Children by Town

Here are the numbers of children in each town who were referred to Birth to Three for the first time in FY2005, and the number of eligible children in each town who received early intervention services:

TOWN	CHILDREN REFERRED	CHILDREN SERVED
Andover	6	12
Ansonia	52	66
Ashford	7	9
Avon	52	43
Barkhamsted	<	6
Beacon Falls	13	8
Berlin	45	37
Bethany	9	7
Bethel	56	62
Bethlehem	<	<
Bloomfield	18	20
Bolton	10	9
Bozrah	<	11
Branford	48	52
Bridgeport	386	435
Bridgewater	<	0
Bristol	124	142
Brookfield	38	46
Brooklyn	26	25
Burlington	28	27
Canaan	11	9
Canterbury	10	6
Canton	23	26
Chaplin	<	
Cheshire	57	61
Chester	<	6
Clinton	28	23
Colchester	59	66
Colebrook	<	

TOWN	CHILDREN REFERRED	CHILDREN SERVED
Columbia	10	11
Cornwall	0	0
Coventry	25	23
Cromwell	25	22
Danbury	191	207
Darien	62	56
Deep River	10	9
Derby	30	36
Durham	11	18
East Granby	11	13
East Haddam	20	13
East Hampton	29	31
East Hartford	131	156
East Haven	41	52
East Lyme	28	33
East Windsor	21	21
Eastford	<	
Easton	17	26
Ellington	31	30
Enfield	97	102
Essex	12	15
Fairfield	142	149
Farmington	39	36
Franklin	<	
Glastonbury	71	79
Goshen	6	<
Granby	28	26
Greenwich	146	154
Griswold	30	35

**NOTE:** REFERRED means children newly referred during the fiscal year, while  
SERVED means an eligible child who received services during any portion of the fiscal year.

TOWN	CHILDREN REFERRED	CHILDREN SERVED
Groton	102	135
Guilford	41	46
Haddam	16	11
Hamden	126	134
Hampton	<	
Hartford	485	536
Hartland	<	
Harwinton	6	8
Hebron	21	34
Kent	<	10
Killingly	49	58
Killingworth	13	12
Lebanon	24	18
Ledyard	32	42
Lisbon	10	8
Litchfield	8	15
Lyme	<	
Madison	45	46
Manchester	140	156
Mansfield	23	31
Marlborough	12	18
Meriden	159	191
Middlebury	18	17
Middlefield	<	8
Middletown	89	89
Milford	96	112
Monroe	43	44
Montville	35	35
Morris	<	<

TOWN	CHILDREN REFERRED	CHILDREN SERVED
Naugatuck	61	72
New Britain	197	262
New Canaan	55	52
New Fairfield	44	45
New Hartford	13	15
New Haven	328	341
New London	70	82
New Milford	65	68
Newington	42	42
Newtown	79	89
Norfolk	<	
North Branford	31	26
North Canaan	0	<
North Haven	40	51
North Stonington	10	14
Norwalk	194	195
Norwich	82	111
Old Lyme	17	20
Old Saybrook	16	24
Orange	24	28
Oxford	36	38
Plainfield	33	48
Plainville	43	36
Plymouth	25	35
Pomfret	14	16
Portland	22	22
Preston	<	8
Prospect	15	22
Putnam	27	30

## Numbers of Children by Town, Continued

TOWN	CHILDREN REFERRED	CHILDREN SERVED
Redding	23	17
Ridgefield	60	63
Rocky Hill	33	32
Roxbury	<	
Salem	<	10
Salisbury	<	
Scotland	<	
Seymour	32	34
Sharon	<	
Shelton	59	71
Sherman	10	11
Simsbury	49	63
Somers	21	20
South Windsor	55	61
Southbury	44	39
Southington	79	92
Sprague	7	9
Stafford	18	19
Stamford	278	307
Sterling	6	8
Stonington	24	36
Stratford	116	137
Suffield	22	24
Thomaston	16	16
Thompson	28	28
Tolland	36	35
Torrington	61	78
Trumbull	101	99
Union	<	0

TOWN	CHILDREN REFERRED	CHILDREN SERVED
Vernon	61	81
Voluntown	<	
Wallingford	90	103
Warren	<	
Washington	<	6
Waterbury	303	345
Waterford	21	23
Watertown	47	53
West Hartford	124	141
West Haven	136	125
Westbrook	9	12
Weston	32	35
Westport	66	69
Wethersfield	44	50
Willington	9	18
Wilton	58	56
Winchester	24	31
Windham	58	73
Windsor	48	51
Windsor Locks	18	18
Wolcott	21	28
Woodbridge	17	17
Woodbury	18	17
Woodstock	9	10
<b>TOTAL</b>	<b>8,013</b>	<b>8,893</b>



*The Connecticut Birth to Three System  
is administered by the  
Connecticut Department of Mental Retardation*

*Peter H. O'Meara*, COMMISSIONER

*Kathryn duPree*, DEPUTY COMMISSIONER

**BIRTH TO THREE SYSTEM  
CENTRAL OFFICE**

*Linda Goodman*  
DIRECTOR

*Sandy Booth*  
SYSTEMS DEVELOPER  
INFORMATION SYSTEMS

*Kathy Granata*  
ADMINISTRATIVE ASSISTANT

*Eileen McMurrer*  
COORDINATOR FOR PUBLIC  
AWARENESS AND ICC ACTIVITIES

*Deb Resnick*  
COORDINATOR FOR COMPREHENSIVE  
SYSTEM OF PERSONNEL DEVELOPMENT

*Alice Ridgway*  
QUALITY ASSURANCE MANAGER

*Pietro Rosato*  
ACCOUNTANT

**BIRTH TO THREE SYSTEM  
REGIONAL OFFICES**

**WEST REGION**

*Tom Coakley*, MANAGER

*Ray Horvath*, FISCAL COORDINATOR

*Tina Cox*, SECRETARY

**NORTH REGION**

*Tammy Garris*, MANAGER

*Sandy McNally*, FISCAL COORDINATOR

*Lana Raymond*, SECRETARY

**SOUTH REGION**

*Lynn Skene Johnson*, MANAGER

*Ray Horvath*, FISCAL COORDINATOR

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