



*Learning
Through
Play*

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
- ARE BUILT UPON MUTUAL RESPECT AND CHOICE

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THIS REPORT, PAST DATA REPORTS, AND OTHER PUBLICATIONS ARE AVAILABLE AT:

www.birth23.org under "Publications"



Reagan's Story

As the parents of four children, Gina and Brian were a little more relaxed about their youngest daughter “not talking enough” amidst the hustle and bustle of daily life. When her second birthday rolled around, though, they decided to talk with their pediatrician about their concerns. The pediatrician mentioned that Birth to Three might be able to help, but recommended that they rule out a hearing loss first. Brian and Gina learned that Reagan’s hearing was fine, but thought about her language skills and how hard it was to understand her, and thus decided to call Birth to Three.

“The evaluators were very knowledgeable and forthcoming with information,” says Gina. “They didn’t make Reagan feel like she was being tested. We were not particularly surprised by their initial findings and we were eager to get started.” Now Reagan looks forward to visits from her speech and language therapist, Alicia.

“Reagan was talking a mile a minute, but we couldn’t understand what she was saying,” says Alicia. “In the beginning, it was all about building rapport with Reagan. We set up a picture board so she could show her mom specifically what she wanted inside the refrigerator.” “When Reagan would point to the fridge, I’d have to guess whether it was cheese or a piece of fruit or a drink of milk that she wanted, which was a challenge,” says Gina. Gina and Alicia try to keep every visit different, using crafts and games with her brother as an opportunity to give verbal labels to everything. “Reagan loves to play! She learns best through games and having fun,” says her mom. “I’ve also found it to be really helpful to be reminded to use LOTS of descriptive words with Reagan. I don’t just tell her that it’s time to get dressed. Now I say, ‘put on your green pants and white shirt.’” “Now that she can communicate better she and her 4 year old brother can play together with a lot less frustration.”, says Gina. Her older sisters are glad she is making progress too. “Reagan can be more communicative about her likes and dislikes which has dramatically cut down on her whining and improved her familial relationships.”

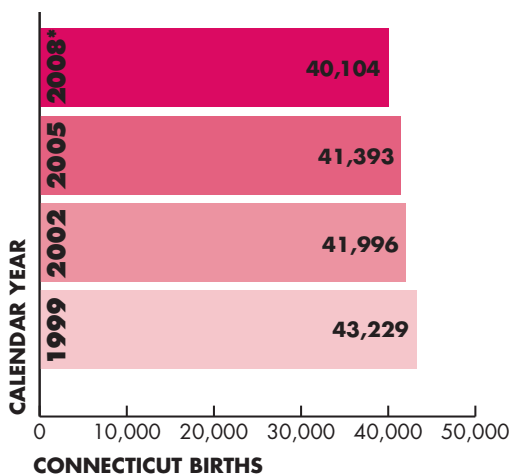
Reagan’s dad, Brian, says, “Before she started with Birth to Three it was obvious that she was struggling, and that was overflowing onto other parts of her life. Now she has more confidence and is much happier. That will serve her well once she starts school.” Reagan enjoys going to the local playgroup with her mom, tried gymnastics this past summer, and loves to play with all of her cousins. “We just want her to be happy,” say her parents, “and Birth to Three has really helped.”

Making the Connection: Referrals

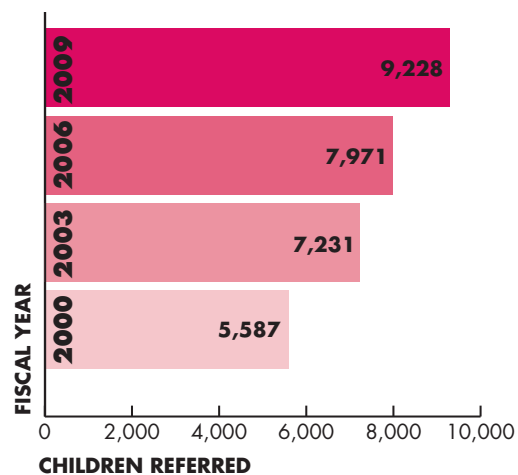
WE RECEIVED REFERRALS BY PHONE, FAX, AND E-MAIL TO CONNECT FAMILIES WITH OUR SUPPORTS THROUGH THE CHILD DEVELOPMENT INFOLINE 1-800-505-7000 AND WWW.BIRTH23.ORG.

A total of 9,228 referrals were received by the Birth to Three System in Fiscal Year 2009 (July 1, 2008 – June 30, 2009), an increase of 1.3% over the previous year.

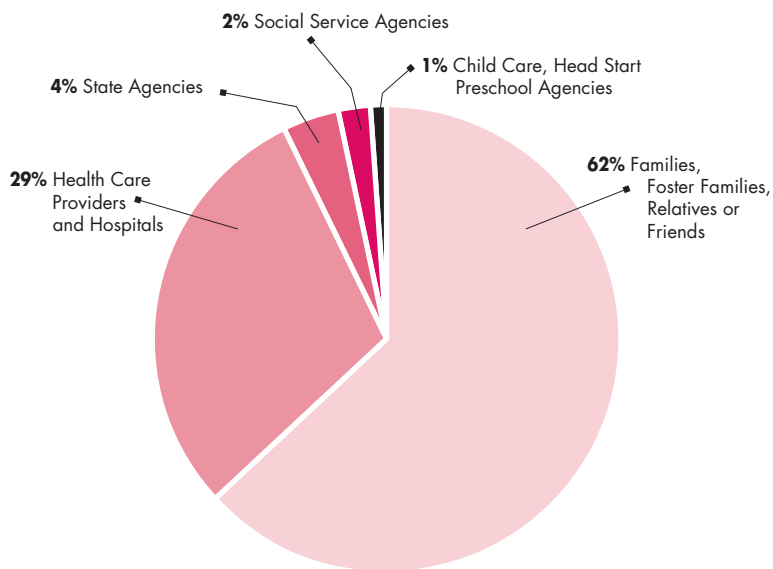
The median age at referral was 19 months. 65 percent were boys. Most children lived in homes where English (84.5%) or Spanish (11.7%) was spoken.



Data Source: CT Dept. of Public Health
*provisional data



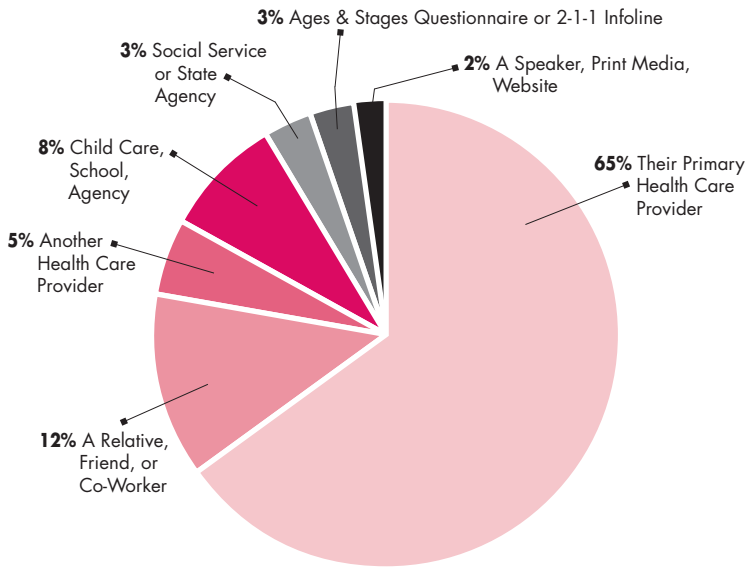
Data Source: CT Birth to Three data system
NOTE: Some children were referred more than once.



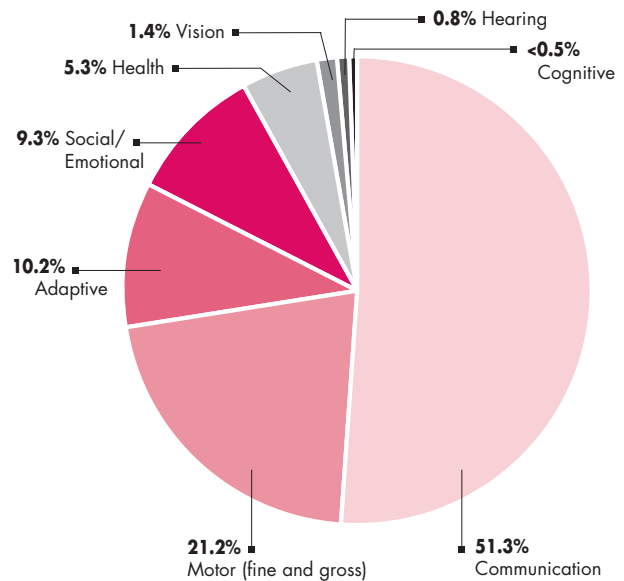
Most families referred themselves (62%) or were referred by a health care provider (29%).

When a referral is made by someone other than the parent or guardian, Child Development Infoline contacts the parent for permission to proceed with the referral. In addition to the 9,229 referrals, 1,062 parents were not able to be reached or were not interested in obtaining an evaluation for their child.

Families and others who didn't already know about the Birth to Three System heard about it from:



Children were referred because of concerns about a variety of developmental issues:



A MULTIDISCIPLINARY TEAM 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.

Families of children who were found not eligible for Birth to Three services or those whose children left the Birth to Three System before age three were offered information about other community resources, including a program for tracking their children's ongoing development. **Ages and Stages Questionnaires** are mailed to each family every few months so they may report on their child's mastery of new skills. If scores show that a 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 developmental status report with suggested activities to continue to help their child learn new skills.

Families whose children are found not eligible may re-refer their child for a new developmental evaluation if they are still concerned about their children's development after three months or more. In FY09, 414 children were found eligible at the time of the subsequent evaluation.

Children Who Were Eligible

WHEN A CHILD IS ELIGIBLE, THE FAMILY WORKS WITH THEIR SERVICE COORDINATOR TO IDENTIFY THEIR NEEDS, CONCERNS AND PRIORITIES, AND GOALS FOR THEIR CHILD AND FAMILY.

TOGETHER THEY DEVELOP A PLAN OF SERVICES AND SUPPORTS TO HELP REACH THOSE GOALS.

Connecticut served 3.5% of our population of children under age three (9,112). 8,680 children received comprehensive multidisciplinary evaluations, and 60% (5,194) were found eligible for early intervention.



90% (4,711) OF CHILDREN FOUND ELIGIBLE HAD DEVELOPMENTAL DELAYS

- 70%** tested 2 standard deviations below average in at least one area of development
- 17%** 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

10% (483) OF CHILDREN FOUND ELIGIBLE HAD DIAGNOSED CONDITIONS LIKELY TO RESULT IN DEVELOPMENTAL DELAY WHICH MADE THEM AUTOMATICALLY ELIGIBLE FOR ENROLLMENT. THESE INCLUDED:

Prematurity or low birth weight	160 children
Hearing or vision loss	70 children
Down syndrome	46 children
Cleft Palate or Lip	39 children
*Autism Spectrum Disorder	37 children
Brain or Neurological Disorder	32 children

* These 37 children had already been diagnosed at the time of referral, however many other referred children obtained this diagnosis after enrollment.

How We Support Families: Service Delivery

Eligible children's racial or ethnic backgrounds:

RACE/ETHNICITY	PERCENTAGE	NUMBER
White, non-Hispanic	56%	(2,925)
Hispanic	27%	(1,406)
Black	11%	(566)
Asian	4%	(196)
Undetermined	2%	(77)
Native American	<1%	(20)

Top languages spoken in the home for eligible children:

LANGUAGE	PERCENTAGE	NUMBER
English	83%	(4,301)
Spanish	13%	(686)
<i>plus 39 other languages</i>		

Eligible children lived in all 169 Connecticut cities and towns. One-third of those children were from:

CITY	NUMBER OF CHILDREN
Hartford	630
Bridgeport	504
Waterbury	436
New Haven	397
Stamford	340
New Britain	298
Danbury	264
Norwalk	240

BIRTH TO THREE STAFF COACH THE FAMILY ON WAYS TO TEACH THEIR CHILD NEW SKILLS. FAMILY MEMBERS AND OTHER CAREGIVERS USE THESE TECHNIQUES DURING REGULAR ACTIVITIES THROUGHOUT THE DAY. SERVICES AND SUPPORTS CHANGE AS THE FAMILY'S GOALS FOR THEMSELVES AND THEIR CHILD CHANGE.

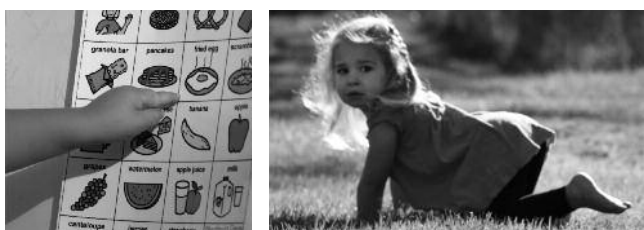


There were 50 approved programs employing approximately 950 service providers in FY09. Each program serves a specific set of towns, and parents can choose from among two or more general programs that work with resident families. There is also at least one autism-specific program serving each town, and three programs that work with families from any town in Connecticut whose children are deaf or hard of hearing.

DEAF/HARD OF HEARING SPECIFIC PROGRAMS

CHILDREN SERVED

American School for the Deaf (ASD)	72
CREC Soundbridge	65
New England Center for Hearing Rehabilitation (NECHEAR)	24



AUTISM SPECIFIC PROGRAMS

CHILDREN SERVED

ABC Intervention Program	46
Academy for Young Minds	93
Achieve Beyond	29
Beacon Services of CT	39
Creative Interventions	32
First Partners	58
Kaleidoscope	25
LEARN Partners for Autism	20
Little Learners	16
TLC Autism Program	17

GENERAL PROGRAMS

CHILDREN SERVED

Abilis (formerly Greenwich ARC)	402
Advance Birth to Three	76
Ahlbin Centers at Bridgeport Hospital	26
Building Bridges, LLC	118
CES/Beginnings	190
Cheshire Public Schools – Darcey School	73
Child & Family Network	177
Children’s Therapy Services	174
Creative Development Programs	140
CREC Birth to Three	380
Early Connections – North Region	492
Early Connections – South Region	129
Early Connections – West Region	97
EASTCONN	45
East Hartford Birth to Three	123
Easter Seals Rehabilitation and Healthcare	596
Easter Seals of CT, Inc.	387
Education Connection – SEED	258
Family Junction	535

GENERAL PROGRAMS

CHILDREN SERVED

HARC – Steppingstones	515
Hill Heath Center	121
Jane Bisantz & Associates, LLC	352
Kennedy Center, Inc.	104
Kennedy-Donovan Center	44
Key Human Services	101
LEARN: Partners for Birth to Three	276
McLaughlin & Associates	418
Oak Hill Birth to Three Program	76
Play and Learn	16
Project Interact, Inc.	299
REACHOUT, Inc.	403
Rehabilitation Associates of Connecticut, Inc.	959
SARAH – KIDSTEPS	325
St. Vincent’s Special Needs Services	97
STAR/Rubino Center	114
TheraCare	346
Wheeler Clinic	151

Making a Positive Difference

Families reported feeling more confident and competent

as a result of receiving Birth to Three services and supports. Families enrolled for more than six months said Birth to Three helped them to:

- Help their children develop and learn (98%)
- Communicate their child's needs effectively (96%)
- Know their rights (98%)

Children made gains in:

- use of appropriate behaviors to meet their own needs (92%)
- acquisition and use of knowledge and new skills (92%)
- positive social-emotional skills, including social relationships (89%)

This includes all children who exited in FY09 who had received at least 6 months of services.

SERVICE DELIVERED BY	NUMBER OF CHILDREN	% OF ALL SERVICES
Speech and Language Pathologist	5,745	28%
Educator	4,140	20%
Early Intervention Associate or Assistant	3,097	15%
Physical Therapist or PT Assistant	2,663	13%
Occupational Therapist or COTA	2,593	13%
Social Worker or Social Work Intern	595	3%
Audiologist	461	2%
Early Intervention Team	433	2%
Board Certified Behavior Analyst or Associate Analyst	244	1%
Psychologist, Counselor or Marriage and Family Therapist	100	0.5%
Nutritionist	88	0.4%
Nurse	35	0.2%
Orientation and Mobility Specialist	5	<0.1%
Optometrist	1	<0.1%

SERVICE DELIVERED IN	NUMBER OF CHILDREN	% OF CHILDREN
Home (includes foster homes)	8,693	95%
Community	445	5%
Other	36	<0.4%



When It's Time to Say Goodbye

CHILDREN LEAVE THE BIRTH TO THREE SYSTEM EVERY DAY, MOVING INTO THEIR SCHOOL DISTRICT, EARLY CHILDHOOD SPECIAL EDUCATION PROGRAMS OR OTHER COMMUNITY PROGRAMS WHEN THEY REACH THE AGE OF THREE OR WHEN THEY NO LONGER NEED EARLY INTERVENTION SERVICES.

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

Most families continue with Birth to Three services until their children turn three years old or no longer need early intervention services and supports. Families are connected with new community resources as the transition process unfolds. The 4,777 children who exited the System in Fiscal Year 2009 left because:

REASON FOR LEAVING BIRTH TO THREE	NUMBER OF CHILDREN	% OF CHILDREN
Child turned three years old	2,824	59%
Parent withdrew child	771	16%
No further service needed by child	522	11%
Attempts to contact were unsuccessful	441	9%
Moved out of state	203	4%
Died	16	<1%

Of the 2,824 children who left at age three:

PLANS AFTER BIRTH TO THREE	NUMBER OF CHILDREN	% OF CHILDREN
Eligible for special education	2,015	71%
Referred to public school but special education eligibility not yet determined	363	12%
Not eligible for special education but referred to another program	248	9%
Not eligible for special education and not referred to another program because no further services were needed	198	7%
Not referred to public school	131	5%

Costs of Early Intervention



The Birth to Three System expenditures for FY09 were \$51,771,852 from state and federal sources. Revenue sources included parent payments and health insurance reimbursements. Only 3% of that total amount was spent on administration of the System, leaving 97% for direct services.

ACTUAL FY09 EXPENDITURES		
Total State Funds	\$42,866,868	(up 8% from FY08)
Total Federal Funds	\$ 4,779,075	(down 8% from FY08)
Commercial Insurance Reimbursements	3,383,401	(down 9% from FY08)
Parent Fees	742,508	(up 9% from FY08)
Total System Expenditures	\$51,771,852	(up 8% from FY08)

Medicaid claims resulted in \$4.2 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 \$11,141. After commercial insurance reimbursements, the net average cost per child was \$10,413.

STATE FY08 EXPENDITURES OF FEDERAL FUNDS ONLY	
Salaries and fringe benefits For 11.5 FTE positions (administrative & support staff)	\$1,294,453
Other expenses	143,020
State & Local ICC	7,015
Public awareness	30,999
Data system	46,062
Personnel development	92,119
Supervision and monitoring	24,219
Procedural safeguards	4,715
TOTAL SYSTEM COMPONENTS	1,540,326
TOTAL DIRECT SERVICES	3,136,473
TOTAL FEDERALLY FUNDED EXPENDITURES	\$4,779,075*

*\$1 million of this was Part B Child Find funding transferred from the State Department of Education

We Can't Do It Alone

Many people, committees, and agencies work with the Birth to Three System in supporting Connecticut's families with young children. The Governor-appointed **State Interagency Coordinating Council** is comprised of stakeholders from throughout the state who advise and assist the Birth to Three System. Here is their vision:

All children with developmental disabilities or special needs in Connecticut will be provided the opportunities to participate as fully as possible in the typical places and activities of their families and communities in order to achieve optimal health and development.

STATE INTERAGENCY COORDINATING COUNCIL

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OFFICE OF PROTECTION & ADVOCACY

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Deborah Pagano
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STATE LEGISLATOR

Robin Tousey-Ayers
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Melissa vanBuren (alternate for Mary Beth Bruder)
UNIVERSITY CENTER FOR EXCELLENCE
IN DEVELOPMENTAL DISABILITIES

Myra Watnick
PROVIDER

Diane Wixted
COMMISSION ON THE
DEAF AND HEARING IMPAIRED

Numbers of Children by Town

Here are the numbers of referrals to Birth to Three from each town in FY2009 and the unduplicated numbers of children in each town who received early intervention services during any portion of the fiscal year. The number of births per town in calendar year 2008 is provided as a reference. **NOTE:** A child can be referred more than once.

TOWN	2008 BIRTHS	REFERRALS	SERVED	TOWN	2008 BIRTHS	REFERRALS	SERVED
Andover	24	12	11	Columbia	39	12	10
Ansonia	227	35	33	Cornwall	12	<	<
Ashford	42	7	10	Coventry	127	32	25
Avon	129	27	33	Cromwell	153	39	36
Barkhamsted	22	8	9	Danbury	1232	265	264
Beacon Falls	56	14	11	Darien	230	79	53
Berlin	153	36	39	Deep River	39	9	6
Bethany	38	7	7	Derby	152	30	28
Bethel	190	38	52	Durham	61	10	14
Bethlehem	29	<	<	East Granby	14	15	13
Bloomfield	185	38	42	East Haddam	84	19	18
Bolton	35	<	7	East Hampton	156	35	33
Bozrah	20	6	8	East Hartford	767	159	151
Branford	234	59	55	East Haven	306	61	64
Bridgeport	2328	455	504	East Lyme	128	24	32
Bridgewater	8	<	<	East Windsor	132	31	36
Bristol	694	158	173	Eastford	14	<	<
Brookfield	139	39	52	Easton	48	18	14
Brooklyn	89	18	18	Ellington	179	54	47
Burlington	85	26	33	Enfield	400	105	103
Canaan	13	6	<	Essex	45	12	10
Canterbury	33	10	11	Fairfield	572	112	140
Canton	102	21	30	Farmington	206	47	59
Chaplin	25	6	<	Franklin	12	<	<
Cheshire	206	45	48	Glastonbury	301	69	77
Chester	30	<	<	Goshen	16	<	7
Clinton	127	36	38	Granby	104	21	18
Colchester	150	40	51	Greenwich	571	171	184
Colebrook	3	0	<	Griswold	137	34	38

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

Numbers of Children by Town, continued

NOTE: an infant can be referred within days of being born, and can continue to be enrolled for almost three full years, if needed. So, a baby that received a service in FY09 could have been born in 2009, 2008, 2007, or 2006.

TOWN	2008 BIRTHS	REFERRALS	SERVED	TOWN	2008 BIRTHS	REFERRALS	SERVED
Groton	662	114	124	Naugatuck	346	87	87
Guilford	141	39	48	New Britain	1083	284	298
Haddam	70	28	20	New Canaan	154	41	40
Hamden	650	135	119	New Fairfield	122	43	56
Hampton	16	<	<	New Hartford	50	11	14
Hartford	2156	570	630	New Haven	2117	472	397
Hartland	17	<	<	New London	263	77	75
Harwinton	52	16	23	New Milford	383	56	61
Hebron	74	22	29	Newington	307	60	66
Kent	27	<	6	Newtown	201	68	72
Killingly	212	59	70	Norfolk	9	<	<
Killingworth	48	9	6	North Branford	127	26	35
Lebanon	47	16	21	North Canaan	23	7	7
Ledyard	171	34	28	North Haven	189	45	59
Lisbon	32	17	17	North Stonington	46	12	10
Litchfield	52	16	15	Norwalk	1247	271	240
Lyme	14	<	<	Norwich	556	137	120
Madison	103	26	41	Old Lyme	45	10	15
Manchester	858	153	190	Old Saybrook	70	22	13
Mansfield	92	26	31	Orange	82	18	15
Marlborough	62	17	21	Oxford	116	38	29
Meriden	926	226	220	Plainfield	182	42	35
Middlebury	72	13	20	Plainville	182	40	41
Middlefield	31	13	8	Plymouth	130	31	29
Middletown	571	98	115	Pomfret	32	<	10
Milford	483	96	87	Portland	73	14	17
Monroe	151	47	55	Preston	31	10	7
Montville	184	38	38	Prospect	75	32	19
Morris	7	<	<	Putnam	130	30	29

TOWN	2008 BIRTHS	REFERRALS	SERVED
Redding	63	15	18
Ridgefield	181	63	55
Rocky Hill	190	38	45
Roxbury	10	<	<
Salem	38	6	<
Salisbury	25	<	<
Scotland	14	<	<
Seymour	173	31	34
Sharon	12	<	6
Shelton	357	105	107
Sherman	26	<	9
Simsbury	165	43	57
Somers	68	20	21
South Windsor	107	54	62
Southbury	406	31	33
Southington	214	80	103
Sprague	34	9	12
Stafford	124	26	24
Stamford	1794	348	340
Sterling	37	13	6
Stonington	117	22	29
Stratford	564	102	144
Suffield	102	26	18
Thomaston	68	23	17
Thompson	87	21	17
Tolland	143	37	42
Torrington	412	89	105
Trumbull	322	84	103
Union	5	0	<

TOWN	2008 BIRTHS	REFERRALS	SERVED
Vernon	357	83	92
Voluntown	28	<	7
Wallingford	428	87	94
Warren	16	<	<
Washington	21	8	10
Waterbury	1721	408	436
Waterford	154	26	46
Watertown	191	39	42
West Hartford	651	170	183
West Haven	706	149	130
Westbrook	51	8	12
Weston	64	25	26
Westport	204	65	69
Wethersfield	251	39	45
Willington	39	8	11
Wilton	132	43	44
Winchester	131	27	41
Windham	326	116	116
Windsor	299	61	72
Windsor Locks	110	25	20
Wolcott	133	22	28
Woodbridge	47	17	17
Woodbury	73	14	16
Woodstock	66	11	17
TOTAL	40,104	9,228	9,671

*The Connecticut Birth to Three System is administered by
the Connecticut Department of Developmental Services*

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