












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**

THIS REPORT, PAST DATA REPORTS, AND OTHER PUBLICATIONS ARE AVAILABLE AT:
www.birth23.org/aboutb23/AnnualData.html

PAGE		
INSIDE FRONT COVER	Mission	
1	Table of Contents	
2	Making the Connection: Referrals	
6	Children Who Were Eligible	
7	Children Born Over the Last Ten Years	
8	How We Support Families	
9	The Connecticut Early Childhood Community	
11	Family Stories	
14	Making a Positive Difference	
14	How We Rate Nationally	
15	When It's Time to Move On	
16	Costs of Early Intervention	
17	We Can't Do It Alone	
18	Town-by-Town Snapshot	
INSIDE BACK COVER	System Administrators	

Making the Connection: Referrals

WE RECEIVE 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 8,603 referrals were received by the Birth to Three System in Fiscal Year 2011 (July 1, 2010 – June 30, 2011). An additional 1,098 parents either were not able to be reached for their consent to evaluate or were not interested in receiving an evaluation for their child. There were another 129 calls received about children who would turn three years old within 45 days who were referred to their public school for a special education evaluation.

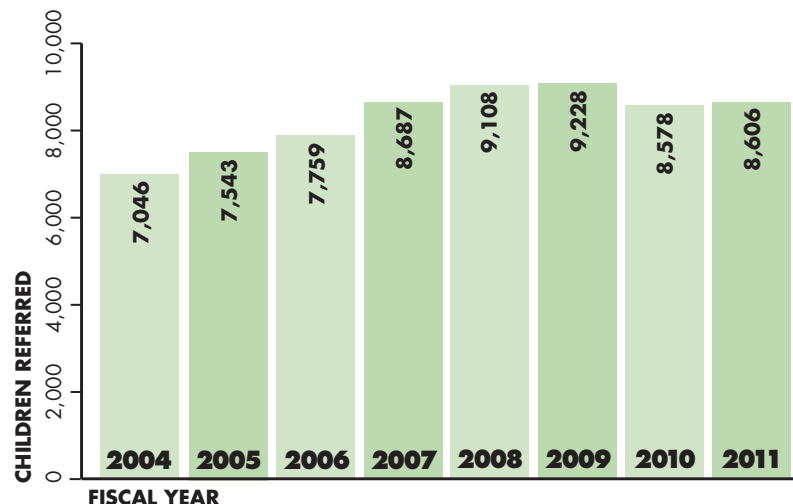
As more people learn about the benefits of early intervention, our referrals have consistently increased each year, despite fewer births. A 7% decrease in FY10 was primarily due to a change in the way referrals were handled, FY11 showed little change.

Calendar Year Births

- **2010:** 37,446*
- **2003:** 43,511

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.



2000



2011

Children were referred from all across Connecticut,
 from birth until close to their 3rd birthday and
 from homes where many languages are spoken.
 One third of those new referrals were from:

2011



CITY	NUMBER OF CHILDREN
Hartford	592
Bridgeport	471
New Haven	420
Waterbury	399
Stamford	363
New Britain	279
Norwalk	246

AGE AT REFERRAL	PERCENTAGE
Birth–11 months	22%
12–23 months	38%
24–35 months	40%

AVERAGE AGE AT REFERRAL	MONTHS
Mean	19.3

BOYS & GIRLS	PERCENTAGE	NUMBER OF CHILDREN
Boys	65%	5,579
Girls	35%	3,024

LANGUAGES SPOKEN	PERCENTAGE
English	85%
Spanish	12%
plus 39 other languages	each less than 1%



2003

MOST FAMILIES REFERRED THEIR OWN CHILD (59%) OR THE CHILD WAS REFERRED BY A HEALTH CARE PROVIDER (32%).

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

SOURCE	PERCENTAGE
Primary Health Care Provider	68%
Relative, Friend, Co-Worker	10%
Social Service or Education Organization	7%
Other Health Care Provider	5%
Child Care Provider	5%
2-1-1 or Ages & Stages Questionnaires*	3%
all others	2%

*See next page

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

DEVELOPMENTAL CONCERNS AT TIME OF REFERRAL	PERCENTAGE
Communication	76%
Motor (fine and gross)	30%
Adaptive	12%
Social-Emotional	11%
Health	8%
Vision or Hearing	3%
Cognitive	>1%

NOTE: Total is greater than 100% because there is often more than one area of concern for any single child.

A TEAM MEETS WITH THE CHILD AND FAMILY TO EVALUATE THE CHILD'S DEVELOPMENTAL STRENGTHS AND NEEDS AND THEN DETERMINES ELIGIBILITY.

All areas of development are evaluated to produce a complete picture of the whole child. Two professionals with different types of training record the child's skills in completing a range of activities and interview the parents about their child's needs and abilities. (See page 13 for a listing of different types of early intervention professionals) Parents and professionals work together to get a complete picture of the child's abilities as compared with what is typically expected at that age. Results are shared with the family in their native language and in writing. If the parent gives permission, results can be shared with others, including the child's health care provider.

Children are eligible for Birth to Three supports and services when they have either:

- significant developmental delay, or
- a diagnosed medical condition with a high likelihood of resulting in developmental delay.



WHAT HAPPENS WHEN A CHILD IS NOT ELIGIBLE?

Children who are not eligible may still have differences that would benefit from support. Families of children who were not eligible for Birth to Three or whose children left the Birth to Three System before age three were offered information about other community resources. The **Ages and Stages Questionnaires** offered by the Help Me Grow* program allows families to track their children's development by completing a questionnaire every few months. If parent response shows that the child's development may be delayed, the family may be 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.

This past fiscal year, 554 new families out of the 3,306 whose children were evaluated and found not eligible chose to enroll in the Ages and Stages Questionnaire monitoring process.

Families whose children are 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 FY11, 434 children were eligible at the time of a subsequent evaluation.

**A program of the Children's Trust Fund,
CT Department of Social Services*

2011



2006

Children Who Were Eligible

7,975 EVALUATIONS WERE COMPLETED

4,669 (59%) CHILDREN WERE ELIGIBLE

90% WERE ELIGIBLE FOR EARLY INTERVENTION DUE TO SIGNIFICANT DELAYS IN THEIR DEVELOPMENT.

3,339

(72%) tested 2 standard deviations below average in at least one area of development

754

(16%) tested 1.5 standard deviations below average in two or more areas of development

90

(2%) could not be tested, but had a significant developmental delay according to informed clinical opinion

10% WERE ELIGIBLE BECAUSE THEY HAD A MEDICAL CONDITION WITH A HIGH LIKELIHOOD OF RESULTING IN DEVELOPMENTAL DELAY, INCLUDING:

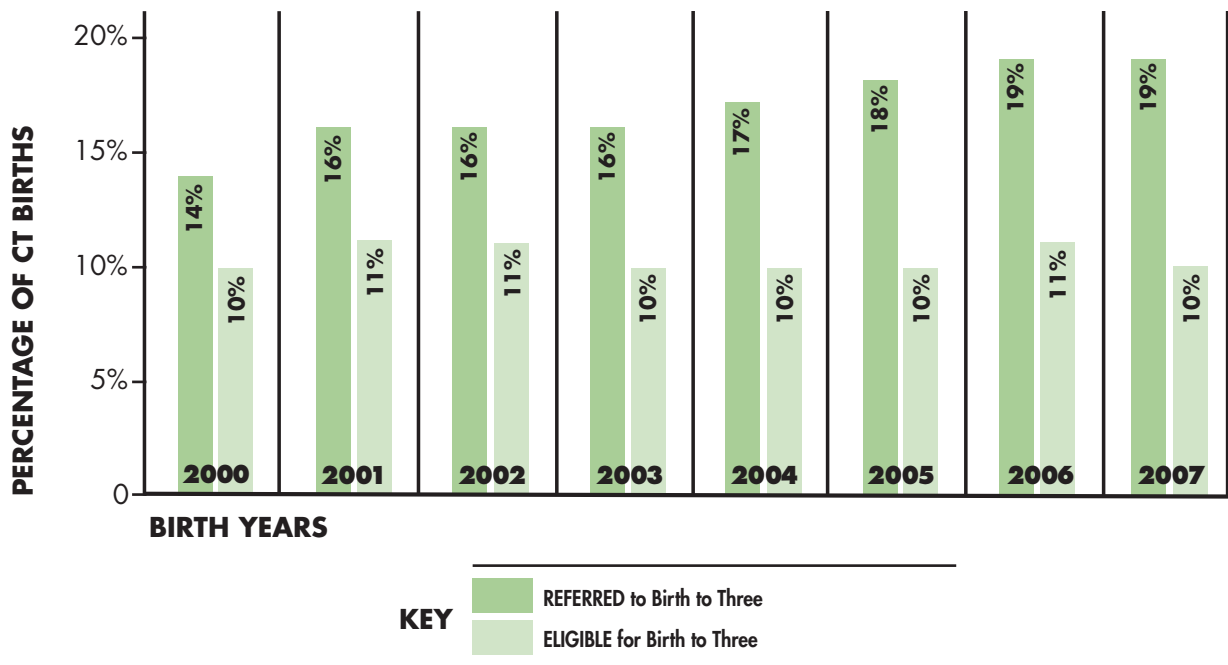
- premature birth (28 weeks gestation or less) or very low birth weight (<1,000 grams) = **163 children**
- hearing loss = **70 children**
- Down syndrome = **49 children**
- autism spectrum disorders (known at the time of referral) = **44 children**
- cleft palate = **35 children**

ETHNICITY	RACE OF ELIGIBLE CHILDREN					
	WHITE	BLACK	ASIAN	NATIVE AMERICAN	PACIFIC ISLANDER	MULTI-RACIAL
Hispanic	1173	75	10	8	18	40
Non Hispanic	2504	509	172	25	33	102

Children Born Over the Last Ten Years

This page shifts the focus away from the fiscal year and over to all children born in a single calendar year who had contact with Birth to Three. (Remember that a child under the age of three can be referred in any of four fiscal years, depending upon the age at referral and the date of birth).

CHILDREN BORN EACH YEAR



Over the past seven years, there were between 14% and 19% of children born each year who were referred to Birth to Three because of concerns about their development. Approximately 10% of all children born in Connecticut were found eligible for early intervention supports and services.

THERE WERE 435 ELIGIBLE CHILDREN BORN IN 2007 WHO RECEIVED A DIAGNOSIS OF AUTISM SPECTRUM DISORDER, WHICH WAS 1 IN 95 CHILDREN BORN IN CONNECTICUT THAT YEAR.

How We Support Families

FAMILY CHOICE IS IMPORTANT. Each family may choose from several different programs. Parents sometimes transfer their child from one program to another due to a relocation, choice of a different program, or their desire for an autism or deaf/hard of hearing specific program due to their child's needs. Early intervention works best when parents and their Birth to Three team learn from each other. Together they decide which early intervention supports can help the child learn new skills.

Most families enroll their eligible children, develop an Individualized Family Service Plan (IFSP) with their team and receive direct services that meet their child's unique needs and define their priorities for their child. Parents pay a monthly fee on a sliding scale that is adjusted according to their income, family size and certain other factors.

Some families choose to only receive those services that are available at no cost, including evaluation and assessment, IFSP development, service coordination, and transition supports. In FY11, there were 765 families who chose to receive services at no cost for at least one month of the year.

Every family has a service coordinator to help them identify their goals, understand information, coach them on teaching their child new ways of learning, and plan for the future.

During the year, 862 children received what are described as "intensive services", that is, more than 13 hours per month. Approximately 700 of these children had an autism spectrum disorder.

- If we look only at children who did not receive intensive services, the statewide average hours per month, as listed in their Individualized Family Service Plan, was 4.2 hours
- For children who received intensive services with a diagnosis on the autism spectrum, the average hours of service was 46 per month.
- For children who received intensive services with a diagnosis other than autism spectrum disorder, the average hours of service was 25 per month.

Providing effective supports in a family's home requires updated professional knowledge, sensitivity, the ability to fold new learning strategies into daily activities and to know what truly matters to the family.

To see what an early intervention visit looks like, go to
www.birth23.org/videos/HV/HV.html

The Connecticut Early Childhood Community

Connecticut is very invested in improving and expanding the number and variety of high-quality early childhood opportunities for young children. Our Governor and legislature, state and municipal agencies, local entities and grassroots organizations are all working to help ensure that every child is learning well and is ready for kindergarten. The Connecticut Birth to Three System is an important contributor to these efforts. Since 1996, we have dedicated many staff hours toward cultivating meaningful relationships and collaborative policies and practices with all levels of early childhood supporters so that young children with developmental delays are fully involved in these rich learning opportunities in their local communities.

The Birth to Three System represents the Department of Developmental Services on the Early Childhood Education Cabinet, and has become increasingly involved in issues of local governance for early childhood. We are working with the Governor's office and other elected officials to support Public Act 11-181 to establish a coordinated early childhood system for all children, from birth to five years of age. We link our data and records with the Connecticut Department of Education, which will eventually contribute to an early childhood data network. Birth to Three is helping to write the Act Early diagnostic guidelines for autism spectrum disorders. We participate in Right From the Start, an initiative of the William Caspar Graustein



Memorial Fund to link state and local early childhood governance. Many Birth to Three providers and administrators directly share resources and knowledge with local community agencies as well, including licensed early care and education centers and family child care, Early Head Start, school-readiness and Discovery communities.

These collective efforts and others too numerous to list are advancing the quality of early learning experiences for all children. The Connecticut Birth to Three System is committed to continuing to lead, participate and fully support these partnerships.

Family Stories

This FY11 Report includes updated photos and stories from three of our former Birth to Three families. We are thrilled at the opportunity to revisit these families and learn how they have grown. ♡ ♡ ♡



Nathan's Story

Our grandson, Nathan, became the love of our life the minute he was born. When we were told that he couldn't hear we felt helpless. Birth to Three connected our family with others who had received help for their children. They never let us down when we needed to talk to someone about Nathan and his special needs. Now, our grandson is on the path to intellectual freedom and his life will be limitless. -- Grandma Judy and Grandpa Scott

We could never fully put into words how Birth to Three has helped us with Nathan. They changed our lives and Nathan's future. He got his first hearing aids only four weeks after he was born! They connected us to other parents and said it was going to be OK. I never thought that my little boy would become the person he is today: athletic, scholarly, outgoing and independent. Yes, we have had some mountains to climb, but Birth to Three helped us grow and understand about hearing loss and what we needed to do. Soundbridge (our Birth to Three program) was always there when we had panic days. We were always – and still are – proactive parents.

Nathan feels that being aided so young gave him the opportunity to grow up with sounds around him, so he did not miss out on anything. School comes easy to him and his hearing aids are a "part" of him. He enjoys teaching kids in his class about his FM [hearing assistance] system and he loves the private messages his teachers send him.

My baby is now a preteen who enjoys family bike rides, traveling, school, basketball and is an overall GREAT child and son. Nathan's hearing loss does not hold him back. This year he won the President's Education Award for Academic Excellence, along with 5 of his hearing peers. WOW. Nathan has big plans for his future: become an NBA player, then a scientist and then an audiologist. He feels it would be great for children to see their doctor wear hearing aids. So do we. -- Mom and Dad



Alaysia's Story

Alaysia just turned eleven and what a celebration we had! Our family is very close and she picked a roller rink for her party, so we all went, including her very best friend since kindergarten, Angelica. They were wonderful to us and let Alaysia go around the rink in her wheelchair - what a thrill! We had a family reunion over the summer and went to Sesame Place in Pennsylvania together. They have lots of good fun for children in wheelchairs. Alaysia doesn't let her chair stop her from doing what she wants to do. She is very independent.

Alaysia brings out the best in everybody. She is in sixth grade now and is very popular. Her friends follow her down the hallway in her chair and everybody in school knows her. That's just the way she likes it. Her teachers and therapists say she is very smart and independent, just like at home.

When we have free time we like to go out to eat seafood, which we love. Alaysia also likes going to the movies and watching "iCarly" and "Victorious" on television. She loves listening to music by Big Time Rush, and can't get enough of WWE wrestling!

When her doctor first told us that she had cerebral palsy, it was a blow. But we never treated her like she was any different. Vicki from Birth to Three loved her so much, and we send her a special thank you! Ten years later, there's nothing I would change. Alaysia is just a gift that keeps us going every day.

Alaysia's aunt is a medical assistant, and Alaysia really loves and admires her. Alaysia says that she is going to be a medical assistant when she grows up, too. With a little help and our family's support, I know Alaysia will become anything she sets out to be!

-- Mom and Dad



Tyler's Story

Well it's been almost 5 years since Tyler left the Birth to Three System, and he continues to make wonderful progress. He now attends 2nd grade, where his favorite activities include reading and math. While Tyler continues to experience physical challenges on a daily basis, school staff have been extremely helpful through weekly physical and occupational therapy. To supplement that, Tyler has taken part in after school activities including physical and aquatic therapy, swimming lessons, and most recently has been introduced to tennis and joined the Boy Scouts. He also enjoys spending time at the various playgrounds in town, where he interacts with other children, including his younger sister, Noël. Besides reading - his favorite past time - Tyler loves chocolate and playing hockey with his Dad. He also enjoys watching his favorite team, the Chicago Blackhawks, at any opportunity. At this writing, his love of chocolate appears to have inspired him to one day become a baker. A career as a life-star helicopter pilot also interests him at this time as well. He truly has a very active imagination (as they say, the sky's the limit).

We are truly grateful for the services received from Birth to Three, as well as the current support that continues in the school system. While progress in some instances has been slow but steady, we feel so fortunate for our very special boy. At the same time, we have developed so much compassion for others afflicted with hydrocephalus. In September, we participated in Connecticut's inaugural walk to benefit hydrocephalus research, in the hopes that others will enjoy a better quality of life. Our hope is that as the years pass, Tyler will live a normal life as a productive member of the community, and will continue to support causes such as Birth to Three and the Hydrocephalus Association.

-- Mom and Dad

In fiscal year 2011, there were 44 approved programs employing approximately 975 service providers. Each program serves a specific set of towns, and parents can choose from among the 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 whose children are deaf or hard of hearing from any town in Connecticut.

DEAF/HARD OF HEARING SPECIFIC PROGRAMS	CHILDREN SERVED
American School for the Deaf (ASD)	93
CREC Soundbridge	65
New England Center for Hearing Rehabilitation (NECHEAR)	15

AUTISM SPECIFIC PROGRAMS	CHILDREN SERVED
ABC Intervention Program	127
Academy for Young Minds	143
Achieve Beyond	48
BEACON Services of CT	89
Creative Interventions	108
First Partners	83
Little Learners	28
Partners for Autism	37
TLC Autism Program	15

GENERAL PROGRAMS	CHILDREN SERVED	GENERAL PROGRAMS	CHILDREN SERVED
Abilis	370	HARC – Steppingstones	465
Advance Birth to Three	139	Jane Bisantz & Associates, LLC	312
Building Bridges, LLC	156	Kennedy Center, Inc.	130
CES/Beginnings	116	Kennedy-Donovan Center	72
Cheshire Public Schools – Darcey School	66	Key Human Services, Inc.	101
Child & Family Network	152	LEARN: Partners for Birth to Three	232
Children’s Therapy Services	166	McLaughlin & Associates	308
Cornell Scott-Hill Heath Center	115	Oak Hill Birth to Three Program	111
Creative Development Programs	156	Project Interact, Inc.	276
CREC Birth to Three	372	REACHOUT, Inc.	386
Early Connections	580	Rehabilitation Associates of Connecticut, Inc.	861
EASTCONN Birth to Three	99	SARAH, Inc. – KIDSTEPS	344
East Hartford Birth to Three	115	St. Vincent’s Special Needs Services	101
Easter Seals Rehabilitation and Healthcare	919	STAR/Rubino Center	103
Education Connection – SEED	267	TheraCare	477
Family Junction	410	Wheeler Clinic	140

BABIES AND TODDLERS LEARN BEST WHEN THEY HAVE MANY OPPORTUNITIES TO PRACTICE NEW SKILLS DURING THEIR REGULAR DAILY ACTIVITIES.

Birth to Three staff coach parents and other caregivers on new ways to teach each child

in the places where they live, learn and play: 95% of services were provided in families' homes, and 5% in community settings. Family members and other caregivers use these techniques during regular activities throughout each day.

The service coordinator is the primary support to the family. Other members of the team may make joint visits or provide consultation when more than one type of service is provided.

SERVICE DELIVERED BY	NUMBER OF CHILDREN	% OF CHILDREN WITH IFSP
Speech and Language Pathologist	5,676	65%
Special Educator	4,337	49%
Occupational Therapist	2,952	34%
Physical Therapist	2,823	32%
Early Intervention Associate or Assistant	2,805	32%
Social Worker	665	8%
Board Certified Behavior Analyst or Associate Analyst	502	6%
Audiologist	401	5%
Nutritionist	175	2%
Occupational Therapy Assistant (COTA)	149	2%
Nurse	73	1%
Psychologist	68	>1%
Physical Therapy Assistant	65	>1%
Family Therapist/Professional Counselor	24	>1%



Making a Positive Difference

Children who exited in FY11 and had received at least six months of services improved across all three outcomes that were measured:

	CAUGHT UP	REDUCED THE GAP
1– Positive social-emotional skills, including social relationships	51%	83%
2– Acquisition and use of new skills, including early language and communications	55%	83%
3– Use of appropriate behaviors to meet their needs	63%	89%

51% of children who had received Birth to Three services and were enrolled in Kindergarten during school year 2010-2011 did not require special education.



Families reported feeling more confident and competent as a result of receiving Birth to Three services and supports. 98% of families whose children were enrolled for more than six months agreed that Birth to Three services helped their family help their child develop and learn, and to communicate their child's needs more effectively.

How We Rate Nationally

U.S. Department of Education review of the Connecticut Birth to Three System resulted in the highest determination rating for the fifth consecutive year. This indicates that Connecticut fully complied with the federal Individuals with Disabilities Education Improvement Act, Part C, which is the law that defines early intervention.

Connecticut is one of only 10 states to earn this highest rating over so many years.

When It's Time to Move On

CHILDREN LEAVE THE BIRTH TO THREE SYSTEM EVERY DAY. MOST FAMILIES CONTINUE WITH BIRTH TO THREE SERVICES UNTIL THEIR CHILDREN TURN THREE YEARS OLD OR NO LONGER NEED EARLY INTERVENTION SERVICES AND SUPPORTS.

Service coordinators help families prepare for the future as early as possible by identifying new community resources that can meet the needs of their children.

Some children do not need further special supports. Others move on into their public school preschool special education programs. The 4,800 children who exited the System in Fiscal Year 2011 left because:

REASON FOR LEAVING BIRTH TO THREE	NUMBER OF CHILDREN	% OF CHILDREN
Child turned three years old	2,944	61%
Parent withdrew child	716	51%
No further service needed by child	448	9%
Attempts to contact were unsuccessful	460	10%
Moved out of state	224	5%
Died	8	>1%

Of the 2,944 children who left at age three, 2,609 were referred to their school district:

PLANS AFTER BIRTH TO THREE	NUMBER OF CHILDREN	% OF CHILDREN
Eligible for special education	2,119	81%
Referred to public school but special education eligibility not yet determined	335	13%
Not eligible for special education but referred to another program	292	11%
Not eligible for special education and not referred to another program because no further services were needed	198	8%

Costs of Early Intervention

The Birth to Three System expenditures for FY11 were \$50,287,770 from all sources. Revenue sources included state funds, federal funds, parent payments and commercial health insurance reimbursements. Only 3% of that total amount was spent on administration of the system, leaving 97% for direct services. Birth to Three is the payer of last resort and successfully maximized other revenue. This included billing Medicaid, which brought in \$9.7 million dollars in federal revenue to the State General Fund, thereby decreasing the net State contribution to Birth to Three by that amount.

ACTUAL FY11 EXPENDITURES	
State Funds	\$ 41,193,555
Total Federal Funds	\$ 4,017,562
Commercial Insurance Reimbursements	\$ 3,986,381
Parent Fees	\$ 1,090,272
Total System Expenditures	\$50,287,770

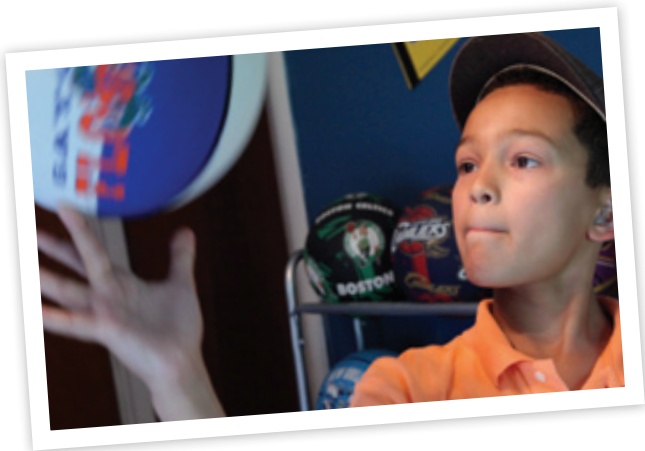
The average cost per child, net of commercial health insurance reimbursements for services provided by contracted programs was:

General Programs	\$ 8,109
Autism Programs	\$26,540
Deaf/Hard of Hearing Programs	\$10,286

Salaries and fringe benefits	\$1,306,882
For 9.5 FTE positions (administrative staff)	
Other expenses	135,803
State & Local ICCs*	6,430
Public Awareness & Child Find	284,923
Data system	29,240
Personnel development	87,265
Supervision and monitoring	8,871
Procedural safeguards	1,674
TOTAL SYSTEM COMPONENTS	1,848,097
DIRECT SERVICES	2,156,474
TOTAL FEDERALLY FUNDED EXPENDITURES	\$4,017,562

NOTE: \$1 million in federal funds was IDEA Part B Child Find funding transferred from the State Department of Education

*See next page



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 Connecticut Birth to Three System.

STATE INTERAGENCY COORDINATING COUNCIL

Mark A. Greenstein, M.D., CHAIR
DEVELOPMENTAL PEDIATRICIAN AND CLINICAL GENETICIST

P.J. Ruddy, VICE CHAIR
PARENT

Kathleen Bradley, Ph.D.
DEPARTMENT OF CHILDREN AND FAMILIES

Eileen Bukowski
PARENT

Mary Ann Dayton-Fitzgerald
COMMISSION ON THE DEAF AND HEARING IMPAIRED

Stephen DeAngelis
INSURANCE DEPARTMENT

Dona Ditrìo
EARLY HEAD START

Rita Esposito
PROVIDER

Corrine Griffin
PARENT

Jeanette Haines
BOARD OF EDUCATION AND SERVICES FOR THE BLIND

Cynthia Jackson
PROVIDER

Lynn Skene Johnson
DEPARTMENT OF DEVELOPMENTAL SERVICES

Robert LaCamera, M.D.
AMERICAN ACADEMY OF PEDIATRICS, CT CHAPTER

Ginny Mahoney
DEPARTMENT OF SOCIAL SERVICES

Miriam Martinez
PARENT

Joseph McLaughlin
PROVIDER

Senator Anthony Musto
CT LEGISLATOR

Deborah Pagano
PARENT

Lorna Quiros-Dilan
OFFICE OF PROTECTION AND ADVOCACY

Laurel Ross
PROVIDER

Maria Synodi
STATE DEPARTMENT OF EDUCATION (SDE)

Louis Tallarita
STATE DEPARTMENT OF EDUCATION,
OFFICE OF CHILDREN WHO ARE HOMELESS

Representative Jack W. Thompson
CT LEGISLATOR

Robin Tousey-Ayers
DEPARTMENT OF PUBLIC HEALTH

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

Myra Watnick
PROVIDER

LOCAL INTERAGENCY COORDINATING COUNCIL CO-CHAIRS

DANBURY

Juleen Flanigan

Trish Butler

TORRINGTON

Janae Peluso

Anne Giordano

LOWER FAIRFIELD

Deborah List

Karen Feder

Special thanks to the many families, health care providers and community agencies who support our efforts, including the Connecticut Family Support Network, PATH Parent To Parent, and the Child Development Infoline staff and administration.

Town-by-Town Snapshot

Here are the number of referrals to Birth to Three in FY2011, and the number of children in each town who were eligible at any point during the year.

TOWN	2010 BIRTHS	REFERRALS	SERVED	TOWN	2010 BIRTHS	REFERRALS	SERVED
Andover	18	7	7	Columbia	39	<	7
Ansonia	252	38	56	Cornwall	13	<	<
Ashford	46	11	13	Coventry	114	21	27
Avon	123	36	32	Cromwell	151	19	22
Barkhamsted	18	6	8	Danbury	1140	205	242
Beacon Falls	51	8	11	Darien	199	67	59
Berlin	141	28	33	Deep River	37	10	16
Bethany	31	<	<	Derby	118	32	32
Bethel	170	45	41	Durham	52	8	16
Bethlehem	19	<	<	East Granby	56	14	12
Bloomfield	207	36	42	East Haddam	74	15	26
Bolton	29	9	8	East Hampton	142	18	26
Bozrah	19	<	6	East Hartford	697	177	199
Branford	226	43	57	East Haven	271	68	79
Bridgeport	2160	471	540	East Lyme	124	22	23
Bridgewater	9	0	<	East Windsor	125	29	32
Bristol	666	143	175	Eastford	8	<	<
Brookfield	132	28	41	Easton	44	16	13
Brooklyn	74	13	29	Ellington	157	44	49
Burlington	61	16	21	Enfield	398	114	104
Canaan	14	<	<	Essex	35	16	16
Canterbury	33	13	11	Fairfield	505	140	122
Canton	82	21	19	Farmington	194	43	43
Chaplin	26	<	<	Franklin	13	0	<
Cheshire	183	41	45	Glastonbury	251	60	62
Chester	26	<	7	Goshen	15	<	6
Clinton	101	25	34	Granby	68	23	20
Colchester	158	42	40	Greenwich	569	184	174
Colebrook	10	<	<	Griswold	117	26	27

Town-by-Town Snapshot, 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 FY11 could have been born in 2011, 2010, 2009, or 2008.

TOWN	2010 BIRTHS	REFERRALS	SERVED	TOWN	2010 BIRTHS	REFERRALS	SERVED
Groton	608	130	147	Naugatuck	354	72	77
Guilford	153	35	35	New Britain	1102	279	346
Haddam	68	11	19	New Canaan	129	47	35
Hamden	616	119	123	New Fairfield	114	33	45
Hampton	19	<	7	New Hartford	61	9	11
Hartford	2009	592	650	New Haven	2006	420	423
Hartland	14	<	<	New London	342	74	90
Harwinton	33	7	10	New Milford	237	60	81
Hebron	75	17	13	Newington	249	59	66
Kent	19	<	<	Newtown	199	51	63
Killingly	198	43	71	Norfolk	10	<	<
Killingworth	42	14	21	North Branford	105	30	36
Lebanon	61	16	15	North Canaan	27	0	<
Ledyard	162	31	26	North Haven	163	36	44
Lisbon	31	11	11	North Stonington	41	<	6
Litchfield	49	11	9	Norwalk	1187	246	241
Lyme	5	<	<	Norwich	482	97	110
Madison	83	22	26	Old Lyme	49	10	10
Manchester	806	152	199	Old Saybrook	64	14	20
Mansfield	93	17	20	Orange	81	17	14
Marlborough	46	12	14	Oxford	103	19	14
Meriden	786	213	232	Plainfield	155	38	38
Middlebury	60	14	13	Plainville	149	42	42
Middlefield	34	<	6	Plymouth	125	31	30
Middletown	533	94	125	Pomfret	45	8	8
Milford	465	86	95	Portland	87	16	10
Monroe	137	40	33	Preston	39	8	<
Montville	164	43	49	Prospect	62	16	20
Morris	21	<	6	Putnam	103	31	38

Town-by-Town Snapshot, continued

TOWN	2010 BIRTHS	REFERRALS	SERVED
Redding	50	8	13
Ridgefield	166	50	57
Rocky Hill	188	35	35
Roxbury	12	<	<
Salem	34	7	6
Salisbury	20	<	<
Scotland	14	<	0
Seymour	134	26	25
Sharon	13	<	<
Shelton	322	85	87
Sherman	20	8	12
Simsbury	167	63	45
Somers	63	23	20
South Windsor	218	48	46
Southbury	112	30	31
Southington	346	88	104
Sprague	27	<	9
Stafford	109	19	29
Stamford	1890	363	388
Sterling	38	9	7
Stonington	92	22	29
Stratford	525	105	113
Suffield	85	25	25
Thomaston	72	10	21
Thompson	74	16	21
Tolland	99	22	32
Torrington	402	98	114
Trumbull	285	73	79
Union	5	<	<

TOWN	2010 BIRTHS	REFERRALS	SERVED
Vernon	372	71	77
Voluntown	22	<	6
Wallingford	387	115	101
Warren	3	<	<
Washington	28	<	<
Waterbury	1542	399	417
Waterford	158	30	26
Watertown	179	32	43
West Hartford	644	138	159
West Haven	694	136	131
Westbrook	39	16	21
Weston	55	15	26
Westport	171	47	53
Wethersfield	252	44	46
Willington	38	8	10
Wilton	128	45	34
Winchester	102	17	29
Windham	305	88	123
Windsor	280	54	57
Windsor Locks	105	20	20
Wolcott	111	22	21
Woodbridge	52	19	15
Woodbury	67	16	12
Woodstock	58	9	17
TOTAL	37,446 *	8,603	9,468

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

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

Dannel P. Malloy, GOVERNOR

Terrence W. Macy, Ph.D., COMMISSIONER

Linda Goodman, DIRECTOR

Lynn Skene Johnson, ASSISTANT DIRECTOR

ACCOUNTABILITY and MONITORING

*Alice Ridgway
Anna Gorski Hollister*

FAMILY LIAISON

Aileen McKenna

FISCAL OFFICE

*Peg Boyajian
Kathy Granata
Ilka Torres*

INFORMATION SYSTEMS

Sandy Booth

PERSONNEL DEVELOPMENT

*Deb Resnick
Karen Stockton*

PUBLIC AWARENESS

Eileen McMurrer

STATE ICC STAFF SUPPORT & LOCAL ICCs

Anna Gorski Hollister

ADMINISTRATIVE SUPPORT

Karyn Pitt

MEDICAL ADVISOR

Ann Milanese, M.D.
DEVELOPMENTAL PEDIATRICIAN
CT CHILDREN'S MEDICAL CENTER

www.birth23.org

Funding provided under Part C of the Individuals with Disabilities Education Improvement Act, through the United States Department of Education, Office of Special Education Programs.

This Publication, in compliance with the Americans with Disabilities Act (ADA), is available in alternative formats. If you need further assistance, please call 860-418-6155

Designed by Gardner Group Graphic Design, LLC, West Hartford, CT 860-232-7352
Photography by Muldoon Photography, Farmington, CT 860-675-1181

Printing by State of Connecticut, Department of Administrative Services Print Shop



www.birth23.org

CENTRAL OFFICE

460 Capitol Avenue
Hartford, CT 06106

**INFORMATION
& REFERRALS**

1-800-505-7000
Multilingual (Voice/TDD)

CENTRAL DIRECTORY

2-1-1 (Voice/TTY)