

# State Interagency Coordinating Council

December 5, 2022 Minutes

9:00 AM-12:00 PM

American School for the Deaf

**Cynthia Jackson**

*ICC Chair/Provider*

**Leona Adamczyk**

*ICC Vice*

**John Lamb**, pending

*Dept. of Public Health*

**Tiffanie Allain**

*Parent Representative*

**Donna Maitland-Ward**, pending

*Dept. for Children and Families*

**Maris Pelkey**

*Creative Interventions, Provider*

**Elaine Balsley**

*Reachout, Provider*

**Nicole Cossette**

*Office of Early Childhood*

**Senator Mary Abrams**

*State Senator*

**Shonda Easley**

*Parent representative*

**Sharon Marie**

*Dept. of Aging & Disabilities Services*

**Ginny, Mahoney**

*Dept. of Social Services*

**Anne Giordano**

*Education Connection, Provider*

**Louis Tallarita**

*SDE-Homeless Children*

**Pending Appointment**

*SDE-619*

**Julie Hall**, pending

*SARAH Inc, Provider*

**Karen Pascale**

*Early Head Start*

**Myra Watnick**

*Rehab Associates, Inc, Provider*

**Ann Milanese, M.D.**

*American Academy of Pediatrics*

**Representative Liz Linehan**

*House of Representatives*

**Tammy Venenga**

*Dept. Of Developmental Services*

**Mary Beth Bruder**

*UCEDD*

**Lisa Opert**

*Parent Representative*

**Robb Dunn**

*Parent Representative*

**David Gonzalez-Rice**

*Parent representative*

**Lauren Black**

*Parent Representative*

**Gerard O'Sullivan**, pending

*Department of Insurance*

ICC Members Present: Anne Giordano, Cindy Jackson, Tiffanie Allain, Shonda Easley, Elaine Balsley, Ginny Mahoney (remote), Myra Watnick, Nicole Cossette, Lisa Opert (remote), Leona Adamczyk, Sharon Marie, Julie Hall, Gerard O'Sullivan, Bethanne Vergean (representing UCEDD)

ICC Members Absent: Karen Pascale, Representative Linehan, Senator Abrams, Donna Maitland-Ward, John Lamb, Lauren Black, David Gonzalez-Rice, Ann Milanese, Robb Dunn, Louis Tallarita, Maris Pelkey, Tammy Venenga

Meeting called to order at 9:00 AM by Cindy Jackson ICC Chair

**Introductions:** ICC members in attendance introduced.

Tribute of appreciation to Myra Watnick on her retirement. Remarks by Mark Greenstein, Alice Ridgway, Joe McLaughlin, Nicole Cossette, and Tina Gilbertie.

## **Public Comment:**

Clorinda Velez, Professor and Researcher at Quinnipiac University, spoke to the ICC to share her research project regarding diaper needs. The research is focused on whether Birth to Three and Home Visitors screen for diaper need and if so, what/how do they give information to parents. Her request was to share the flyer with all providers to reach as many home visitors as possible. Recruitment flyer attached to minutes.

## **Old Business:**

Approval of the June 6, 2022 minutes: Approved.

Updates from Committees since February 2022 meeting:

**Legislative/Fiscal Committee** Current discussion around pending rate study and implications from that. New session to begin in January. Julie Hall is working on talking points to share with legislators. With Myra's retirement, Elaine is looking for new co-chair. Parent representative needed as co-chair.

**Education and Outreach Committee** Held first parent meet-up in October. Three families attended. Hoping for bigger turnout in the Spring at Camp Harkness. Non-parent Co-Chair is needed for this committee.

**System Support/Personnel Development Committee** Following up on ideas shared at the Retreat in October around what the workforce looks like and ways to support going forward with lens of diversity and equity.

## **New Business:**

ICC Retreat was held at the end of October 2022. There was good attendance from both the ICC and the Part C subcommittee on Equity. Commissioner Bye was also in attendance in the morning of the Retreat. There were 3 outcomes for the Retreat: achieving the mission of Birth to Three, developing shared understanding of equity, and identifying recommendations for equitable supports. The barriers and opportunities were discussed throughout the day and in small groups with a focus on 3 areas: child find, provider diversity, and diversity within the ICC. Three statements from each focus group were shared as action plans:

- **Child Find:** Based on the discussion, article review and system analysis completed at the ICC retreat, our subgroup on Child Find found that we don't know/don't have data on cannot locate and evaluation eligible children and a universal message about Birth to Three. We recommend that the ICC put forward to the OEC to fully fund and commit the Child Find position to this work to comprehensively address previously unaddressed areas of need. This would result in improved equity of early identification.
- **Provider Diversity:** Based on the discussion, article review and system analysis completed at the ICC retreat, our subgroup on Provider Diversity found that data on the workforce is not readily available and that there is a lack of a common definition of diverse workforce. We recommend that the ICC put forward to the OEC to develop a definition of diverse workforce, make data on CT's workforce available for use and focus on recruitment as an area to target to address CT's anticipated workforce diversity issues. This would result in having providers that represent the children and families served through Birth to Three.
- **ICC Member Diversity:** Based on the discussion, article review and system analysis completed at the ICC retreat, our subgroup on ICC member diversity found that we need broader membership and representation on the Council. We recommend that the ICC put forward to the OEC to conduct a survey of the current members and to use the data to explore current and needed membership across individual people and agencies. This would result in the development of an ICC that represents the children and families served through Birth to Three and the interagency collaborations needed to support achieving Birth to Three's mission.

Cindy Jackson and Nicole Cossette met following the Retreat to discuss next steps. They determined that each action plan statement could be given to subcommittees for next step discussion. Child Find was placed with Legislative/Fiscal. Provider Diversity was placed with System Support/PD. ICC Diversity was placed with Education Outreach/Communication. Additionally, it was determined that the current mission statement should be revised using an equity lens. Task force will be formed to look at the mission statement. Those interested in being on this task force should email Nicole and Cindy.

Adriana Fontaine from CPAC shared their quarterly update. CPAC has received 62 referrals this past quarter, which is lower than expected. 47 families were served. They were unable to reach 8 families. CPAC trained an additional 22 mentors and held 15 events for families and professionals. CPAC has a new website for family connections with referral form.

With Myra retiring, there is a new provider opening on the ICC. Anyone interested should email Sabrina Crowe, ICC staff support. ICC is always looking for more parents on to sit on the ICC. Adriana, CPAC, will share will parents she thinks may be interested.

Meeting dates for 2023 shared. The goal will continue to be in-person meetings going forward. Dates for 2023 are as follows: February 6, April 3 (Family Focus), June 5, October 2, December 4.

Nicole Cossette shared Lead Agency report. See below.

Committee reports outs:

**Legislative/fiscal** topics: Discussed the shared budget estimates and questions stemming from that. Committee would like to meet as small group with Mary Coyle at OEC to discuss these questions and have better understanding. Steve Hunt will email Ashley and Nicole to schedule meeting at OEC with Mary. Discussion around Child Find action plan from Retreat, including how to have more outreach to pediatricians and hospitals as was previously done with Eileen McMurrer, connecting with Bethanne Vergean around UCEDD grant work for multi-system communication, and potential partnering with Bridging the Gap.

**Education and Outreach** topics: Second parent meet-up in the Spring at Camp Harkness with plan to get details out sooner in hopes for larger attendance. Discussed April ICC Family Focus meeting. Discussion around ICC member diversity action plan with idea for a survey to current ICC members to gauge diversity across multiple data points and identify potential gaps. Sabrina to provide current demographics ICC survey to Lisa as starting place.

**System Support/Personnel Development** topics: Discussion around Provider Diversity action plan. Would like to gather workforce data from programs as a starting point until RAIN is launched. Discussion around partnering with other OEC departments for cross training opportunities.

**Next Meeting: scheduled for February 6, 2023.**

# Early intervention providers - Complete our research survey and help us learn about diaper need in your clients!

Diaper need is when families have difficulty affording sufficient diapers to keep a child clean, dry, and healthy.

**1** in **3** U.S. families struggles with diaper need



**Please complete survey if:**

- You work in Birth to Three, Early Head Start, or similar CT programs and have contact with families with young children

**Complete the survey here!**

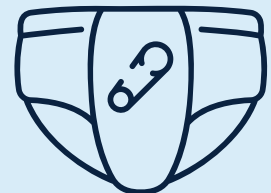
<https://forms.office.com/r/97beGkFuQs>

**Or Scan QR Code Below**



**Contact us if you have any questions!**

[clorinda.velez@quinnipiac.edu](mailto:clorinda.velez@quinnipiac.edu)  
[anne.eisbach@quinnipiac.edu](mailto:anne.eisbach@quinnipiac.edu)  
IRB Protocol #: 03922



Participants will be entered into a raffle to win 1 of 3 \$100 Amazon gift cards

Information about CT diaper resources also available upon request



### **State Systemic Improvement Plan (SSIP)**

*Parents will be able to describe their child's abilities and challenges more effectively as a result of their participation in Early Intervention.*

#### FFY20-25 SPP / APR SSIP

- The Annual Performance Report (APR) is due to the Office of Special Education Programs (OSEP) on February 1, 2023. Are there any volunteers to read through the report?
  - This report will be publicly posted on December 9, 2022, for stakeholder feedback.
  - The draft APR Report will be posted here: [Annual Performance Reports – Birth23.org](https://www.birth23.org/annual-performance-reports)
  - Feedback will be due on January 27, 2023, so the Lead Agency has time to implement and submit.
- Help us welcome our new Data Manager – Amanda Kach!

#### Fiscal Enhancements

- Public Consulting Group (PCG) had signed the contract for the rate study. Now that it has been signed, the Lead Agency can send the contract over to the Office of the Attorney General (AG) for review and final approval. Once the AG's office approves, the work can begin. The first deliverable is expected to be completed by December 31, 2022.
  - See deliverable outline below.
- American Rescue Plan (ARP) funds update. Contracts are moving for many of the initiatives submitted in the ARP budget for Part C ARP funds.
- The Lead Agency is beginning to work on the Federal Part C Application and will publicly post for feedback in early 2023.
  - This will be reviewed in detail at the next ICC meeting.

#### Education Outreach

- Updated combined Parent Rights/System of Payment (SoP) Brochure is still being worked on.
  - The payment portion is currently being revised to reflect the SoP policy on file with OSEP.
- Updated Family Handbook II – Orientation to Services, is now posted and is out for translation.
- Family Handbook III- Transition, will be updated next.
- Who to Contact for B23 with the QR code included.
  - See below.
- Education and Outreach presented to Family-Based Recovery, DCF Regional Resource Groups, Home Visiting, Yale Summer Institute.

#### Leadership Grant

- Cohort 2 participants are working diligently on their local projects.
- Cohort 3 recruitment will begin in the coming months with a focus on aspiring leaders in the system.
  - There will likely be an in-person aspect in the next cohort.

#### Personnel Development Grant

- Bonnie Keilty, Ph.D., is coming to Connecticut to work on Infant Toddler Family Specialist (ITFS) course.
- The coaching piece is moving forward in Year 3.
  - The groups are formed and scheduling the TA process.

#### Personnel Development

- The Lead Agency moved Service Coordination training back to in-person!
- There were two Natural Learning Environment Practices (NLEP) trainings completed remotely in August and October 2022 to prepare for the Rush and Shelden training.

- Rush and Sheldon's two-day family coach and one-day mentor coach training were completed in November. The associated 6-month Coaching Technical Assistance is to begin as soon as possible.
- The Circle of Security (CoS) contract amendments for programs are in process.
  - Many of the Birth to Three program contracts were sent to the AGs office, and once approved by the office, the work will begin.
- The Student Placement initiative and contract amendments are in process.
- There was an Autism Community of Practice presentation by Megan Miller Ph.D.
  - The Lead Agency is looking to host future trainings to support this work.

#### General Supervision

- The Lead Agency is working on updating form 1-3 Health Savings Account (HSA): Permission to Bill an Health Reimbursement Agreement (HRA) or Health Savings Account (HSA).
  - Working with providers, Department of Social Services, and Technical Assistance (TA) centers to ensure clarity and streamline processes.
- Recommendations for Individuals with Disabilities Education Act (IDEA) Compliance Self-Assessment (ICSA).
- SFY 23 Expense Report Results.
  - See Below.
- DMS2.0 Update:
  - We are not in Cohorts 1-3 but will likely be in Cohorts 4 or 5.
  - While an Office of Special Education Programs (OSEP) visit will not occur in the next two years, the Lead Agency is diligently preparing by:
    - Informing stakeholders of their involvement,
    - Passing down information from the monthly OSEP Technical Assistance (TA) calls, and
    - Reviewing the DMS2.0 protocol and workbooks TA centers have issued and comparing them with state documents.

#### Data

The enrollment and fiscal data requested by the ICC on a regular basis is attached.



## OUR MISSION

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.

We do this by providing early intervention using natural learning environment practices, coaching, and a primary service provider with full team support for each family.

## REFERRALS

211 Child Development

(p); **800-505-7000** (f); **860-571-6853**

**211childcare.org**

## WEBSITE

**Birth23.org**

- Contact information for the 20 contracted programs by town
- Policies, procedures, and forms
- And more!

## QUICK FACTS

- No out-of-pocket cost to families.
- Open to all children in CT ages 0 to 3 years who have a significant delay in development or diagnosis that is likely to cause a developmental delay.
- Anyone with a concern or question about a child can make a referral.
- Each family has a service coordinator who helps them connect with resources/supports and transition.



Connecticut Office  
of Early Childhood



## WHO TO CONTACT WHEN A CHILD IS ENROLLED

- 1 Call the assigned Birth to Three program providing support. Use QR code below for contact information.
- 2 Not sure who to contact? Use the Birth to Three Main Email: **ctbirth23@ct.gov**. Please list topic in the subject line.
- 3 Additional information: **1-800-500-4440**

Scan here to  
learn more:





## IDEA Compliance Self-Assessment (ICSA) Timeline

LA= Lead Agency    P=Providers    ICC=Interagency Coordinating Council

Step	Activity	Completed by	Duration
1	Determine Measures	ICC, LA, & +	Year 1
2	Create Assessment	LA	
3	Distribute to Providers	LA	
4	Complete	Providers	
5	Collect Responses	LA	
6	Review Results	LA	
7	Report results to ICC	LA	
8	Meet with Providers to review results and determine next steps	LA	
9	Create & complete corrective plan	Providers	
10	Collect corrective plan	LA	
11	Provide TA as needed	LA	
12	Verification of correction	LA	Year 2
13	Collect Responses	LA	
14	Review Results	LA	
15	Meet with Providers to review results and determine next steps	LA	
16	Report Results to ICC	LA	

### Questions:

1. How often does the ICC recommend providers complete the ICSA?
  
2. Are there any recommendations/changes to this process/ timeline?



## FY 2022 Expense Report Findings Summary for ICC

### Continued lessons from 2021 that apply for 2022:

1. The way information was reported varied depending on the person completing the form and their understanding of the question.
  - a. *Example:* Some programs had their finance department complete it while others had the Director of the program completing it.
2. Almost every program had to resubmit information. Therefore, the form will continue to be redesigned to clarify terminology and ease of completing it. Additionally, the roll-out process will also be reworked.

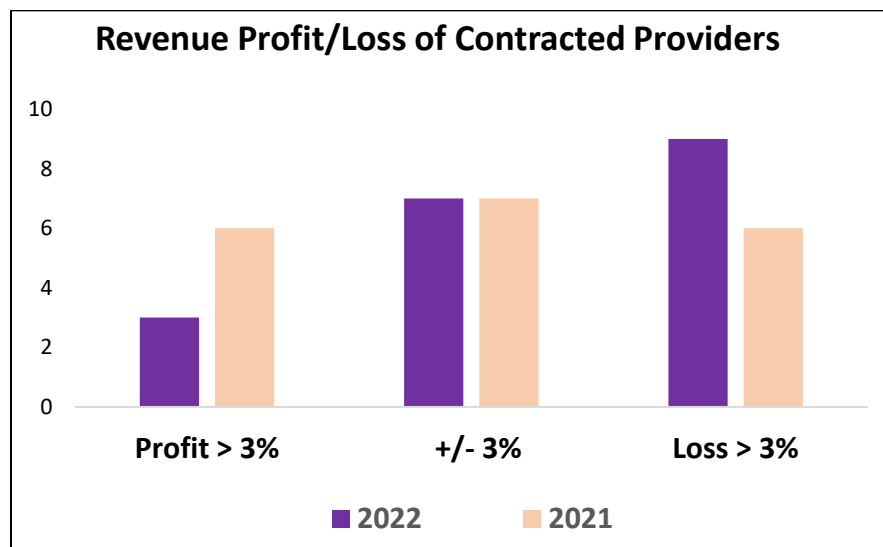
### New Lessons:

1. Even though the data requested was significantly reduced a few programs completed the additional data fields. See #2 above
2. OEC is continuing to receive clarification from OSEP about how and what funding streams need to be monitored.

### Major Finds:

1. All contracted programs are spending Federal funds appropriately.
2. An expected continuation of the difference in the amount of money reported to be paid out from Medicaid and Insurance by the OEC and the program. Variation reasons included different months being reported, accrual versus reported, and the reporting of EOB claims to PCG.
3. Continuation of the hearing-impaired programs reporting a significant loss.

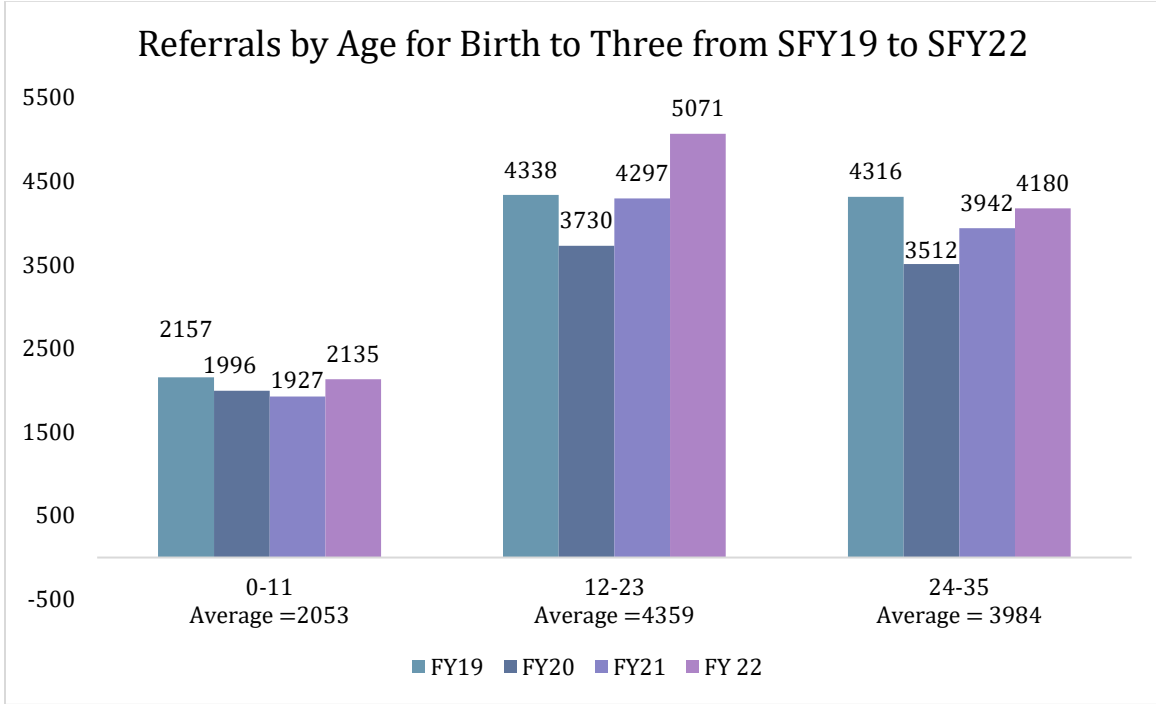
### Data Highlights:



**Average Age of Referrals for 0-11 months, 12-23 months, and 24-35 months**

**SFY19, SFY 20, SFY21, and SFY22**

Additional Child Count Data can be found here: <https://www.birth23.org/618data/>



**Raw Data:**

<b>Case Count of SFY Referral Data</b>					
<b>Age in Months</b>	<b>SFY19</b>	<b>SFY20</b>	<b>SFY21</b>	<b>SFY22</b>	<b>SFY23 (7/1/22-11/22/22)</b>
0-11	2157	1996	1927	2135	807
12-23	4338	3730	4297	5071	2076
23-35	4316	3512	3942	4180	1825

SFY 2023 Summary of Birth to Three Budget															
	July	August	September	October	November	December	Janaury	February	March	April	May	June	YTD		
	Actual	Actual	Actual	Actual	Actual	Estimate	Estimate	Estimate	Estimate	Estimate	Estimate	Estimate	Total		
<b>Number of Direct Services</b>	39,605	36,033	40,831	38,246	38,367	39,126	35,629	39,818	42,156	50,070	43,290	45,568	488,739		
<b>Direct Services Provided</b>	4,774,461	4,317,387	4,916,463	4,617,648	4,607,898	4,730,950	4,326,645	4,844,446	5,076,772	6,028,384	5,243,186	5,537,156	59,021,396		
<b>Escrow Payments</b>	2,109,604	1,916,254	2,017,762	1,828,088	2,058,356	1,797,761	1,644,125	1,840,890	1,929,173	2,290,786	1,992,411	2,104,118	23,529,327		
<b>Additional Services:</b>															
Assistive Technology	8,278	14,060	5,677	1,075	7,931	7,400	7,400	7,400	7,400	7,400	7,400	7,400	88,820		
Other	10,516	7,790	8,824	11,207	7,734	9,250	9,250	9,250	9,250	9,250	9,250	9,250	110,821		
Administrative Fee (GAP)	478,200	974,200	1,015,800	954,800	965,800	980,000	980,000	980,000	980,000	980,000	980,000	980,000	11,248,800		
Interpretation	6,951	14,018	28,722	28,686	24,319	20,500	20,500	20,500	20,500	20,500	20,500	20,500	246,197		
<b>Subtotal Additional Services</b>	503,946	1,010,068	1,059,022	995,768	1,005,784	1,017,150	1,017,150	1,017,150	1,017,150	1,017,150	1,017,150	1,017,150	11,694,638		
Commercial Insurance Billing Fees	-	37,605	-	38,832	21,740	12,236	18,000	18,000	18,000	18,000	18,000	18,000	218,412		
Medicaid Billing Fees	-	4,775	-	5,292	2,759	2,542	2,500	2,500	2,500	2,500	2,500	2,500	30,369		
Data Integration	-	21,000	(21,000)	-	-	-	-	-	-	-	-	-	-		
<b>Subtotal Net Parent and Billing Fe</b>	-	63,380	(21,000)	44,124	24,499	14,778	20,500	20,500	20,500	20,500	20,500	20,500	248,781		
Previous Month Invoices Paid	8,670	1,727,265	2,765,645	1,438,807	1,721,252	1,380,782							9,042,421		
Current Month Invoices Payable	(1,727,265)	(2,765,645)	(1,438,807)	(1,721,252)	(1,380,782)								(9,033,751)		
<b>Net Accounts Payable</b>	(1,718,595)	(1,038,380)	1,326,838	(282,445)	340,470	1,380,782	-	-	-	-	-	-	8,670		
<b>Net OEC Payments</b>	<b>894,954</b>	<b>1,951,321</b>	<b>4,382,623</b>	<b>2,585,536</b>	<b>3,429,108</b>	<b>4,210,471</b>	<b>2,681,775</b>	<b>2,878,540</b>	<b>2,966,823</b>	<b>3,328,436</b>	<b>3,030,061</b>	<b>3,141,768</b>	<b>35,481,416</b>		

**Connecticut Office of Early Childhood Birth to Three System Monthly Enrollment Data**

	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov*
<b>Calls to 211CD</b>	980	1074	1512	1258	1303	1216	1116	1281	1204	1203	920
Percent compared to CY2019 average (1113)	88%	96%	136%	113%	117%	109%	100%	115%	108%	108%	83%
<i>Families declining the referral to B23<sup>1</sup></i>	190	247	277	229	228	239	175	174	193	81	20
Percent compared to CY2019 average (199)	95%	124%	139%	115%	115%	120%	88%	87%	97%	41%	10%
Percent of calls to 211CD (CY2019 average was 17%)	19%	23%	18%	18%	17%	20%	16%	14%	16%	7%	2%
<b>Referrals to Birth to Three</b>	790	826	1235	1029	1076	972	940	1107	1011	966	665
Percent compared to CY2019 average (913)	87%	90%	135%	113%	118%	106%	103%	121%	111%	106%	73%
<i>Families declining eligibility evaluations<sup>2</sup></i>	74	75	69	64	110	84	69	100	121	69	45
Percent compared to CY2019 average (67)	110%	112%	103%	96%	164%	125%	103%	149%	181%	103%	67%
Percent of B23 referrals (CY2019 average was 7%)	9%	9%	6%	6%	10%	9%	7%	9%	12%	7%	7%
<b>Initial Eligibility Determinations</b>	832	781	934	901	957	953	802	1023	989	953	600
Percent compared to CY2019 average (843)	97%	91%	109%	105%	112%	111%	94%	120%	116%	111%	70%
<b>Determined to be Eligible</b>	599	566	699	624	628	627	534	664	670	670	388
Percent compared to CY2019 average (570)	105%	99%	123%	109%	110%	110%	94%	116%	118%	118%	68%
Percent Eligible	72%	72%	75%	69%	66%	66%	67%	65%	68%	70%	65%
Percent compared to CY2019 average (68%)	4%	4%	7%	1%	-2%	-2%	-1%	-3%	0%	2%	-3%
<i>Families leaving Part C in the month before an initial IFSP meeting<sup>3</sup></i>	34	29	22	23	25	25	26	33	28	30	14
Percent compared to CY2019 average (55)	62%	53%	40%	42%	45%	45%	47%	60%	51%	55%	25%
Percent of B23 those eligible (CY2019 average was 10%)	6%	5%	3%	4%	4%	4%	5%	5%	4%	4%	4%
<b>Initial IFSP meeting held during the month</b>	575	526	639	588	615	570	506	606	686	644	351
Percent compared to CY2019 average (516)	111%	102%	124%	114%	119%	110%	98%	117%	133%	125%	68%
<i>Families leaving Part C after the initial IFSP meeting but before EITS<sup>3</sup></i>	8	15	11	7	3	5	7	11	9	9	6
Percent compared to CY2019 average (15)	53%	100%	73%	47%	20%	33%	47%	73%	60%	60%	40%
Percent of all Exits	2%	3%	2%	1%	1%	1%	2%	1%	1%	2%	3%
<b>Eligible children who received an EITS in the month</b>	5648	5846	6087	6026	6140	6287	6349	6684	6243	6377	4587
Percent compared to CY2019 average (5177)	109%	113%	118%	116%	119%	121%	123%	129%	121%	123%	89%

**Connecticut Office of Early Childhood Birth to Three System Monthly Enrollment Data**

	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov*
Average hours per child per month	4.9	5.0	5.8	5.0	5.2	5.3	4.9	5.2	5.1	5.1	2.8
Percent compared to CY2019 average (7.3)	67%	68%	79%	68%	71%	73%	67%	71%	70%	70%	38%

<b>Eligible children with an ASD who received an EITS in the month</b>	694	634	687	684	678	649	674	701	657	627	512
Percent compared to CY2019 average (676)	103%	94%	102%	101%	100%	96%	100%	104%	97%	93%	76%
Average hours per child per month	11.6	12.3	13.2	13.8	12.6	11.3	10.3	11.1	10.3	11.0	6.0
Percent compared to CY2019 average (24.9)	47%	49%	53%	55%	51%	45%	41%	45%	41%	44%	24%

<b>Eligible children without an ASD who received an EITS in the month</b>	4954	5212	5400	5342	5462	5638	5697	6006	5621	5784	4082
Percent compared to CY2019 average (4529)	109%	115%	119%	118%	121%	124%	126%	133%	124%	128%	90%
Average hours per child per month	4.2	3.7	3.8	4.5	4.5	4.5	4.2	4.5	4.5	4.4	2.4
Percent compared to CY2019 average (4.7)	89%	79%	81%	96%	96%	96%	89%	96%	96%	94%	51%

<b>Children in families who exited before age 3<sup>3</sup></b>	167	199	192	165	186	220	226	661	285	182	87
Percent compared to CY2019 average (224)	75%	89%	86%	74%	83%	98%	101%	295%	127%	81%	39%

<b>Children in families who exited at age 3<sup>4</sup></b>	328	324	356	331	219	144	153	344	397	319	142
Percent compared to CY2019 average (322)	102%	101%	111%	103%	68%	45%	48%	107%	123%	99%	44%

<b>Children in Families who exited at age 3 as eligible for Part B</b>	212	215	257	229	120	60	84	712	380	216	95
Percent compared to CY2019 average (225)	94%	96%	114%	102%	53%	27%	37%	316%	169%	96%	42%

November data as of 11/21/22\*

All counts are counts of cases and include may include referrals within 45 days of age 3.

- 1) includes parent declined, referred to LEA, DCF no concerns and unable to contact
- 2) includes parent declined, moved out of CT, deceased and unable to contact
- 3) EITS stands for Early Intervention "Treatment" Services vs EIS (also evaluations, assessments, and IFSP meetings)
- 3) includes parent withdrew, moved out of CT, deceased and unable to contact
- 4) includes eligible for Part B, not eligible, and eligibility not determined/LEA not included