



ANNUAL DATA REPORT

FISCAL YEAR (FY) 2024
JULY 1, 2023–JUNE 30, 2024



ACKNOWLEDGMENTS

The Birth to Three System would like to thank the following individuals for their contributions.

Connecticut's lead agency for the Birth to Three System is:



Commissioner Beth Bye

Deputy Commissioner Elena Trueworthy

The Governor's office appoints members of the State Interagency Coordinating Council (ICC) to advise and assist the Office of Early Childhood (OEC) as the lead agency for Birth to Three. The ICC is an invaluable resource for the lead agency and has been a source of information and assisting on behalf of Connecticut's children who are part of the Birth to Three system.

Fiscal Year (FY) 2024 ICC Members Include:

Chair: Cindy Jackson

Co-Chair: Leona Adamczyk

Tiffanie Allain	Tina Gilbertie	Ginny Mahoney	Maris Pelky
Elaine Balsley	Anne Giordano	Donna Maitland-Ward	Louis Tallarita
Mary Beth Bruder	Julie Hall	Sharon Marie	Joshua Vaughn
Nicole Cossette	Renee Kleinman	Caitlin McNamara	Tammy Venenga
Jennifer Dowty	John Lamb	Ann Milanese	Shakirah Wade
Robb Dunn	Liz Linehan	Lisa Opert	
Shanda Easley	Ceci Maher	Enrique Pabon	

The Birth to Three system would like to provide special recognition to state partners, including the Department of Social Services, Department of Education, Department for Children and Families, Department of Public Health, and Board of Education Services for the Blind – DORS. Without their collaboration and support, Birth to Three would not be the strong system it is today.

The ICC would like to especially thank Governor Lamont and Lt. Governor Bysiewicz who, without their support the field of early childhood, would not be where it is. Governor Lamont and Lt. Governor Bysiewicz are champions of early childhood and have supported the Birth to Three system in incredible ways. The state's continued investment in the Birth to Three System depicts the strong support of the Governor's office.

The ICC would also like to thank the Connecticut General Assembly (CGA), as with their continued support, Birth to Three grew into the comprehensive and coordinated system it is today. Through the support of the CGA, the state's investment has increased, demonstrating that policy leaders understand the importance of early intervention and brain development in Connecticut's youngest citizens.

TABLE OF CONTENTS

Acknowledgments	2
Programs	4
Where are the supports provided?	6
System Needs	7
Family Stories	8
Birth Cohort Data	8
Eligibility and Evaluations Data	9
During FY24 7287 Children Exited Birth to Three	11
FY24 Actuals 69.6 (Fiscal)	11
Town-by-Town Data	12
The Birth to Three team at the OEC includes:	17



PROGRAMS

The following early intervention service provider programs have been part of the Birth to Three system over the last year. The number of children listed below are those with Individual Family Service Plans (IFSPs) during the 2024 Fiscal Year and the number of towns served by each as of 6/30/24.

PROGRAM	CHILDREN	NUMBER OF TOWNS
Abilis Birth to Three	355	2
American School for the Deaf	103	<i>Statewide</i>
Beacon Services of CT	1710	93
Benchmark Infant and Toddler Services	2144	42
Building Bridges, LLC	887	23
Cheshire Public Schools - Darcey School	94	4
Children's Therapy Services	487	18
Creative Interventions	1020	60
CREC Birth to Three	334	11
CREC Soundbridge	32	<i>Statewide</i>
EASTCONN Birth to Three	342	21
EdAdvance Birth to Three	810	39
HARC - Steppingstones	484	15
Project Interact, Inc.	167	9
Reachout, Inc.	275	3
Rehabilitation Associates of Connecticut, Inc.	2462	48
SARAH, Inc. - KIDSTEPS	1479	50
Mentor South Bay	735	16
TheraCare	547	4



Connecticut’s Birth to Three system remains dedicated to the optimal development of infants and toddlers. Early identification and supporting families who have children with a diagnosis that has a high likelihood of developmental delay or children who have a developmental delay of -2 SD in one area or -1.5 in two of the five areas of development is one of the most important priorities. The chart below shows the counts of children with IFSPs in Connecticut on 12/1.

YEAR	ELIGIBLE CHILDREN 0-3	TREND
12/1/2015	4726	-
12/1/2016	4804	↑
12/1/2017	4944	↑
12/1/2018	5830	↑
12/1/2019	5320	↓
12/1/2020	5079	↑
12/1/2021	6034	↑
12/1/2022	6960	↑

As the number of children and families supported increases from year to year, it is important to bring families to the table as stakeholders and to share their stories. Family voice is an important way to understand the impacts of the Birth to Three system. Throughout this report one family describes their experience in Birth to Three.

“Hi, this is our story of our little big boy, who we love so much! When he was around 10 months old, he was playing with his infant rings. They would hang inside the super wide play yard in our living room. I noticed he would tap them so they would swing side to side. When that happened, I noticed he’d get excited with happy hands and twirly feet. Anything that would dangle, swing, or twirl he loved. He would get excited for music, too, like Ms. Rachel singing or Gracie’s corner songs. He was a quiet baby, loved to crawl in and out of the tunnels, and loved anything that lit up, for example his Fisher Price toys. While playing with excitement, no noises came out of him really. You would think he’s crawling around, watching his shows you would hear him but nope. Also, he would never answer his name. He wasn’t hitting his milestones. The differences from his sister were concerning. Thinking he’s still little, give him some more time and things will change, but it didn’t.

I decided to put my own referral in for Birth to Three. In about two days we finally got a call. We set up an evaluation meeting to see if he qualified. We had our meeting; we voiced our concerns regarding him. The fear that I had going into this was scary and very emotional. You obviously want your child to succeed in life, not struggle, or feel different. This is all very new to us, not sure how things will go from here. I’m thinking to myself if he qualifies, what’s to follow. I just don’t want him to fall behind, because it took forever to get him the help he needed, but he qualified. We were happy he was going to get the therapy. He started his therapy sessions at the end of November/Early December.”¹

WHERE ARE THE SUPPORTS PROVIDED?

Each provider who supports families throughout the State of Connecticut is a dedicated professional who provides early intervention in the home or community setting where children without disabilities typically participate. In FY24, 100% of our children received support in their home or community setting. This is essential in providing parents and caregivers the support they need to advocate for their child and describe their child's needs. Evidence-based practices include:



Providing support and services by a primary provider based on the family's priority and the child's needs.



Coaching the family to build their capacity to enhance their child's development.



Providing those supports during activities and routines within the child's typical day in their natural environment.

Natural environments are more than places where children live, learn, and play. Natural learning environment practices start with looking at the activities children participate in during their everyday lives at home and in the community. These everyday activities provide learning opportunities, which, in turn, lead to increased participation and skill development for the child. Early Intervention focuses on supporting the family's confidence and competence by providing opportunities in their everyday activities for their child to learn and develop. Many learning opportunities occur during activities in the home, such as eating, reading stories, playing with siblings, taking a bath, and folding laundry. Other learning opportunities happen in the community, such as going to the playground, grocery shopping, playgroups, and story hours, participating in church activities, and attending child care centers. When the Birth to Three providers provide supports in the child care centers, there is a stronger bridge between the center's ability to support the child and a reduction in challenges in the center, leading to children remaining in the center for longer periods of time and parents being able to work.

"We were introduced to his team, and I can honestly say we love them all! I as a mom am very protective of both my kids. I always want them to feel safe and loved. All his therapists had a motherly tone in their voice, very welcoming, made me feel relieved. Their approach with him was great and very nurturing. The interactions he has with them are fun and exciting to watch.

"He had a big appointment coming up a day before turning 2. We were told what to expect and what to do and not to do (which was hard because you always want to help your child). We understood for test purposes, to determine if he was on the spectrum or not. I was nervous, anxious, emotional. Deb (his therapist) was there with us explaining everything while he was being tested (which was very helpful and relieved some of my anxiousness). After he finished his tests, the team went outside to total his scores. I felt like it took them forever to come back. My hands were sweaty, trying not to cry, trying to keep strong. Watching him play with some toys lessened the stress. They entered the room and gave us his autism diagnosis. At that moment, I teared up. As I knew in my heart, he was autistic but hearing it is a lot harder and getting the confirmation puts fear in you. The fear of not knowing, I instantly think later down in life, what if something happens to us, who will understand him and give what he needs. How will he communicate with us regarding school. If he had a good or bad day. Was someone mean to him. Did someone hurt him. You hear and see all these horrible things in the news and your mind goes nuts.

"Also, how do we explain his new diagnosis to his older sister who is currently 8 years old. How do we get her to understand in her lingo why he has these therapies. For example, why we are careful with him, why we don't leave him in a room alone while we run to the restroom. Why do we pick up and put things away, so he doesn't choke on anything. Also, explain to her why she must protect her brother and be there for him always. A lot going through my mind, but I had to calm myself and think of the now, and how happy he is playing with these toys. His smile, the stares he gives us."²

SYSTEM NEEDS

The ICC and the Office of Early Childhood collaborated closely on a rate study cost analysis. The ICC's role was to lead and advise a comprehensive rate study and cost analysis of the Birth to Three system during 2023. This joint effort was instrumental in work which led to the publication of the results on February 28, 2024.

The OEC contracted with Public Consulting Group (PCG) to conduct a comprehensive rate study for the Birth to Three System. This study, designed to analyze costs and calculate market-based provider rates, is a crucial step in addressing current evidence-based best practices in Early Intervention Services (EIS). Connecticut currently operates under a fee-for-service model and rates have not been increased since 2017, which further underscores the significance of this study. Through PCG's analysis of data collected through a practitioner time study, cost reports, and market-based research, recommended rates were identified to ensure the system's financial stability.

The deliverables for this study included stakeholder engagement, including engagement with the ICC, provider outreach, cost study training, cost study, completion of the time study, data analysis, findings, and recommendations. PCG requested that all early intervention programs in Connecticut participate in the cost and time study to gather enough data to perform the rate calculations. Recommended rates were calculated based on hourly personnel costs, administrative costs, mileage, and non-billable time.

Through a market analysis, PCG determined the following discrepancies between the payment structure between Early Intervention providers and the average salaries of the disciplines.

MARKET SALARY ANALYSIS BY PROVIDER DISCIPLINE³

DISCIPLINE	PEER STATE AVERAGE SALARY (OES)	CONNECTICUT AVERAGE SALARY (OES ⁴)	PROVIDER REPORTED AVERAGE SALARY (PERSONNEL ROSTER)
Developmental Therapy Associate (DTA)	\$37,300	\$39,450	\$52,212
Developmental Therapy Specialist (DSP)	\$83,605	\$65,650	\$63,116
Dev. Therapist - Early Childhood Special Ed.	\$83,605	\$65,650	\$73,220
Licensed Behavioral Analyst	\$66,873	\$68,010	\$75,200
Occupational Therapist	\$95,985	\$95,400	\$78,314
Physical Therapist	\$99,853	\$103,920	\$87,887
Speech/Language Pathologist	\$97,793	\$94,380	\$76,416

As outlined above, there is a discrepancy in Birth to Three's ability to pay providers at the rate of other fields. For example, on average, PTs make \$16,000 less than those in schools, clinics, or hospitals. Interventionists have cited the pay differences and voiced concerns. Anecdotally, in exit interviews, practitioners note the payment structure is the reason for leaving the field, as well as lack of or insufficient health insurance and benefits. There was a turnover rate of 16% across all Birth to Three providers during the calendar year 2022. The workforce must be supported to continue to provide high-quality, evidence-based practices to families.

As outlined in the Rate Study, the system is supported by roughly 509 FTE highly qualified staff providing direct services to families. These professionals, whether full-time, part-time, or per diem, are expected to go through intensive training and certifications, including becoming a certified Service Coordinator, which is outlined in Part C of the Individuals with Disabilities Education Act. In

³Data obtained through the PCG Cost Study Report Published on February 28, 2024



addition, early intervention service providers are highly educated in the field. Of all who participated in the rate study cost analysis, 97% held a college degree ranging from associate degrees to doctoral degrees. The largest grouping includes master's degrees at 825 staff holding a MA/MS and 46 holding a doctorate degree. This high level of education and expertise ensures that families receive the best possible care. It is imperative to retain high-quality staff to continue to provide services for families.

FAMILY STORIES

During 2023, Connecticut's family survey was updated due to our work with the Early Childhood Technical Assistance Center (ECTA) and their national TA to improve outcomes for families. Families who completed the survey have been involved with Birth to Three for a minimum of 6 months. Providers received surveys in September 2023 to distribute to their families. Families had the option of completing a paper survey or online. Surveys were returned to the Lead Agency by November 1, 2023.

After completing the family survey, the lead agency worked to determine significance in representativeness of race/ethnicity and language within the Part C system.

Representativeness of race and ethnicity was analyzed by comparing the percentage of families enrolled in Part C by the percentage of surveys received by race and ethnicity, within each of the subgroupings. The distribution of families in Part C shows the following: White families had the highest percentage in Part C (46%), followed by Hispanic families (27%), African American or Black families (14%), Asian families (4%), American Indian or Alaska Native Families (0.26%), and Native Hawaiian or Pacific Islander families (0.9%).

Representativeness of language was analyzed by comparing the percentage of families enrolled in Part C by the percentage of surveys received by respondent language, within each of the subgroupings. The distribution of families in Part C shows the following: English had the highest response rate (82%), followed by Spanish (11%), and Not English or Spanish (7%).

BIRTH COHORT DATA

Birth cohort data looks at data for all children born during a given calendar year. This report reflects the 2020 birth cohort, or all children born between 1/1/20 and 12/31/20 who turned age three in the calendar year 2023.

Child Development Infoline Contacts (10883 = 31% of children born in 2020)

Part C Referrals (9529 = 88% of calls)

Evaluations (8930 = 94% of referrals)

Eligible (6592 = 74% of evaluations)

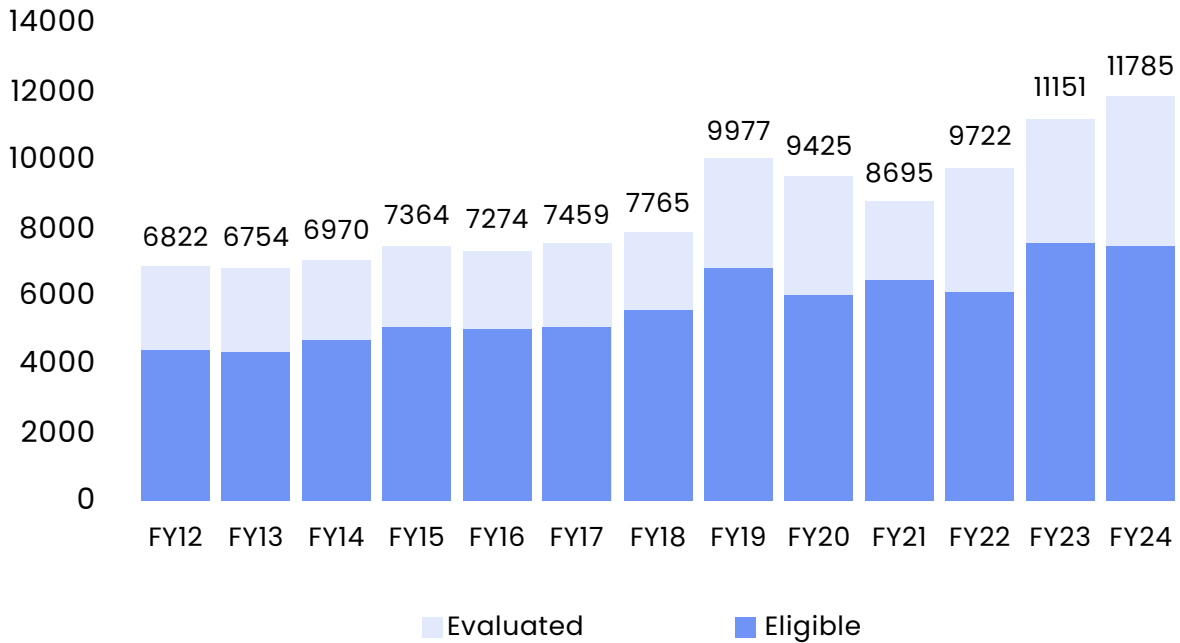
Enrolled (had an IFSP) (6376 = 97% of determined eligible)

Early Childhood Special Education Eligible (2593)

ELIGIBILITY AND EVALUATIONS DATA

In FY24, 11,785 eligibility evaluations were completed for children, and their families. Of those 11,785 evaluations, 7,470 (63.4%) were determined eligible for Birth to Three supports. Over the last 13 years, the number of evaluations and eligible children has increased, and the percentage determined eligible has remained consistent.

Evaluated And Determined Eligible



“He’s still Eli, just learns a different way. Now let’s fast forward to today August 14th, 2024. Eli is thriving, his therapy sessions get better and better. Always doing something new. He is now aware of things, and his surroundings (at the park) playing with his toys correctly, like with cars (pushing them), saying words. He’s nonverbal but hopefully his stories will come one day. He’s making us aware of what he wants. He says a couple numbers and colors. He loves the park and swings. He loves being in the pool. There’s still a lot more things to work on, long ways to go but little by little it will come to Eli. The progress he’s made with Birth to Three is amazing. We would recommend Birth to Three to anyone who needs help with his/her child.

“Since mid-February 2024 autism diagnosis, with Birth to Three the changes you see in Eli six months later are incredible and we owe it to them! They gave us the tools to help Eli. We love them for not changing him or his character. What’s wonderful about Birth to Three, they will meet you anywhere: Park, library, resource centers, stores, house, their flexibility with appointment times, too. They also recommend places or centers to try.”⁵

Connecticut remains committed to supporting families in their native language with the use of staff who speak the native language and interpreters. In FY24, the system supported families who speak 44 different languages. The system also provides translation to all families so that resources are accessible in their native language.

Below are the top 10 languages spoken in the household in FY24.

LANGUAGE IN HOME	COUNT OF CHILDREN
English	9485
Spanish	1929
Portuguese	151
Creole	78
Arabic	62
Urdu	40
Hindi	41
Bengali	31
Twi	22
Albanian	20



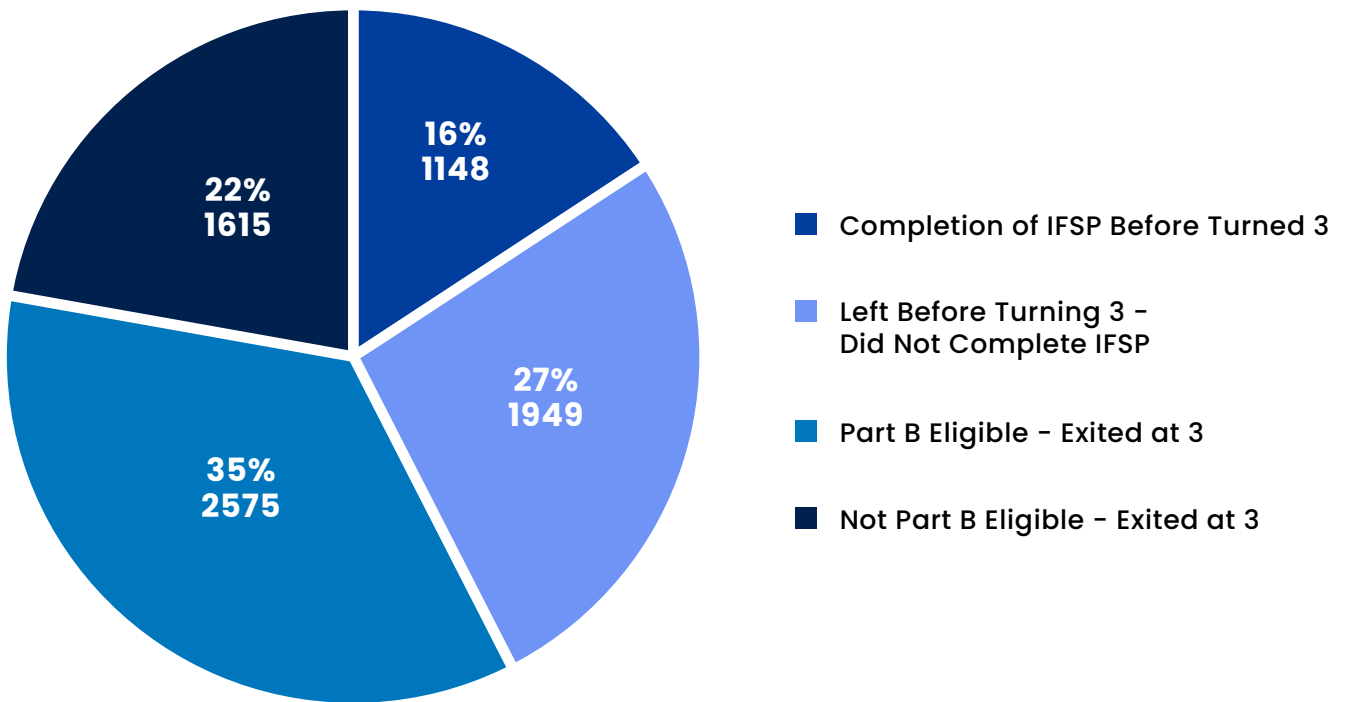
"They encourage us to have him explore the world. Don't let your insecurities or strangers' judgement stop you from doing outdoor activities. People will always criticize no matter what, why limit your child. We go everywhere with Eli. Obviously, we make sure he's safe and sharing with other children and apologize to parents if something is wrong, but he is free to explore and have fun.

"It's going to be a sad day when sessions are over with Birth to Three crew, they will be missed. Hopefully we can keep in touch and send many more accomplishments from Eli. Transitioning to his school program is a big step and hopefully he adapts just fine. Maybe he'll have new safe foods added to his list. His speech gets better. The sky is the limit with Eli, and we can't wait to take that journey with him."⁶

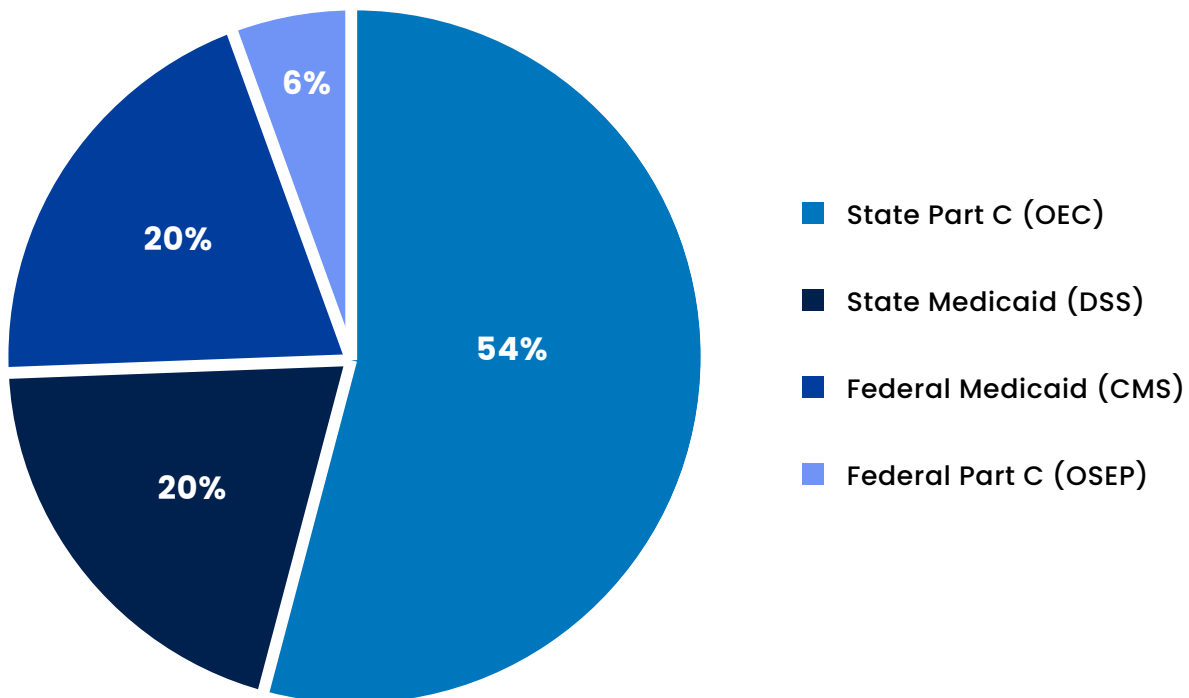
DURING FY24 7287 CHILDREN EXITED BIRTH TO THREE

*ESCE – Early Childhood Special Education

Exit Data 7/1/23–6/30/24



FY24 Actuals 69.6 (Fiscal)



TOWN-BY-TOWN DATA

A town-by-town breakdown of children who received supports throughout FY24 can be found below. Suppressed data provided for towns with five or fewer children to protect confidentiality.

TOWN NAME	REFERRALS	EVALUATED	DETERMINED ELIGIBLE	SERVED	NUMBER OF PROGRAMS
Andover	8	7	6	12	2
Ansonia	81	64	57	109	2
Ashford	11	9	<6	10	2
Avon	50	36	29	57	3
Barkhamsted	7	6	<6	<6	2
Beacon Falls	15	14	11	23	3
Berlin	51	44	26	56	2
Bethany	12	9	<6	14	2
Bethel	72	53	37	76	4
Bethlehem	7	6	<6	6	1
Bloomfield	71	54	45	84	3
Bolton	19	16	10	22	2
Bozrah	<6	<6	<6	8	3
Branford	56	48	37	67	3
Bridgeport	726	588	517	950	4
Bridgewater	<6	<6	<6	<6	2
Bristol	256	204	167	303	4
Brookfield	38	29	24	51	3
Brooklyn	25	20	21	37	2
Burlington	22	19	11	29	3
Canaan	9	8	<6	6	1
Canterbury	10	6	<6	16	2
Canton	20	15	15	25	1
Chaplin	<6	<6	<6	<6	2
Cheshire	64	54	36	77	3
Chester	<6	<6	<6	<6	2
Clinton	20	16	12	29	2
Colchester	54	45	29	56	3
Colebrook	<6	<6	<6	<6	1
Columbia	9	8	6	16	2
Coventry	32	27	22	53	1
Cromwell	38	31	26	43	3

TOWN NAME	REFERRALS	EVALUATED	DETERMINED ELIGIBLE	SERVED	NUMBER OF PROGRAMS
Danbury	359	290	192	390	5
Darien	82	73	39	77	3
Deep River	6	<6	<6	11	3
Derby	40	34	32	64	2
Durham	24	19	20	32	2
East Granby	11	10	<6	13	2
East Haddam	16	14	9	19	2
East Hampton	42	38	23	32	3
East Hartford	197	159	134	261	5
East Haven	96	80	70	130	3
East Lyme	32	28	16	41	5
East Windsor	27	22	18	31	4
Eastford	<6	<6	<6	<6	2
Easton	27	24	12	25	2
Ellington	45	38	32	56	3
Enfield	136	109	76	163	6
Essex	6	6	<6	10	2
Fairfield	165	141	97	186	3
Farmington	56	54	32	55	3
Franklin	<6	<6	<6	<6	2
Glastonbury	81	76	48	107	3
Goshen	6	6	<6	<6	1
Granby	23	18	13	26	3
Greenwich	191	157	103	212	3
Griswold	29	24	18	39	3
Groton	127	108	81	138	3
Guilford	54	45	33	64	2
Haddam	10	10	<6	11	3
Hamden	187	162	111	232	5
Hampton	<6	<6	<6	7	2
Hartford	717	553	471	797	7
Hartland	6	6	<6	6	2
Harwinton	11	7	8	25	3
Hebron	26	25	10	21	2
Kent	<6	<6	<6	<6	1

TOWN NAME	REFERRALS	EVALUATED	DETERMINED ELIGIBLE	SERVED	NUMBER OF PROGRAMS
Killingly	62	55	28	57	3
Killingworth	10	8	8	21	2
Lebanon	30	24	22	34	2
Ledyard	51	41	28	52	4
Lisbon	10	8	9	14	3
Litchfield	19	18	6	15	3
Lyme	<6	<6	<6	<6	2
Madison	40	38	24	53	2
Manchester	256	195	162	302	5
Mansfield	11	9	<6	21	2
Marlborough	30	28	13	29	2
Meriden	253	210	181	350	5
Middlebury	11	9	<6	20	2
Middlefield	10	9	<6	9	3
Middletown	135	106	98	175	4
Milford	118	101	75	148	4
Monroe	48	41	23	69	3
Montville	47	40	29	61	4
Morris	<6	<6	<6	<6	1
Naugatuck	92	82	54	122	4
New Britain	415	335	267	488	6
New Canaan	66	54	37	64	2
New Fairfield	51	46	28	60	2
New Hartford	9	7	7	15	3
New Haven	545	416	377	652	4
New London	92	75	45	96	3
New Milford	73	61	45	87	2
Newington	92	78	69	123	4
Newtown	67	61	39	83	3
Norfolk	<6	<6	<6	<6	1
North Branford	37	34	24	47	2
North Canaan	<6	<6	<6	<6	1
North Haven	84	68	50	99	3
North Stonington	10	<6	<6	11	3
Norwalk	388	311	238	446	3

TOWN NAME	REFERRALS	EVALUATED	DETERMINED ELIGIBLE	SERVED	NUMBER OF PROGRAMS
Norwich	167	130	101	186	3
Old Lyme	10	9	<6	19	3
Old Saybrook	12	12	6	18	3
Orange	34	28	20	47	2
Oxford	32	26	23	50	2
Plainfield	51	45	25	54	3
Plainville	42	34	23	51	3
Plymouth	33	26	15	39	2
Pomfret	12	10	6	17	3
Portland	28	22	17	35	3
Preston	11	9	<6	7	2
Prospect	26	24	9	19	3
Putnam	40	30	17	31	4
Redding	23	21	16	23	2
Ridgefield	73	68	37	79	3
Rocky Hill	40	33	29	61	3
Roxbury	<6	<6	<6	<6	1
Salem	18	18	8	16	2
Salisbury	<6	<6	<6	<6	1
Scotland	<6	<6	<6	<6	2
Seymour	37	29	27	67	2
Sharon	<6	<6	<6	<6	1
Shelton	137	112	79	174	4
Sherman	6	6	<6	9	2
Simsbury	58	46	34	77	3
Somers	14	12	10	30	3
South Windsor	70	59	44	85	4
Southbury	25	22	15	32	2
Southington	115	101	58	135	3
Sprague	7	<6	<6	7	2
Stafford	26	25	15	40	2
Stamford	540	481	323	611	4
Sterling	9	6	<6	11	2
Stonington	19	14	11	21	2
Stratford	166	132	115	224	4

TOWN NAME	REFERRALS	EVALUATED	DETERMINED ELIGIBLE	SERVED	NUMBER OF PROGRAMS
Suffield	38	32	20	44	3
Thomaston	30	22	19	31	2
Thompson	33	30	20	29	3
Tolland	34	30	18	44	3
Torrington	119	91	65	138	3
Trumbull	127	111	76	139	3
Union	<6	<6	<6	<6	2
Vernon	126	108	70	126	4
Voluntown	8	6	<6	6	2
Wallingford	125	108	74	156	4
Warren	<6	<6	<6	<6	1
Washington	<6	<6	<6	<6	2
Waterbury	674	531	424	782	4
Waterford	46	39	26	55	2
Watertown	62	50	38	79	3
West Hartford	203	171	110	206	6
West Haven	180	140	123	225	4
Westbrook	7	6	<6	7	2
Weston	29	26	18	45	3
Westport	62	54	35	76	3
Wethersfield	85	69	46	100	4
Willington	13	11	6	18	2
Wilton	57	52	35	73	2
Winchester	19	16	15	33	1
Windham	98	79	69	128	3
Windsor	99	93	51	99	4
Windsor Locks	44	38	27	48	3
Wolcott	31	26	20	51	2
Woodbridge	22	18	14	33	2
Woodbury	21	19	9	24	2
Woodstock	24	22	10	15	3

Note: Children can be referred at birth and remain in the system until age three. Therefore, the number of eligible children and IFSP can be larger than children referred to Birth to Three in the fiscal year.

THE BIRTH TO THREE TEAM AT THE OEC INCLUDES:

Nicole Cossette, Early Intervention Director, Part C Coordinator

Koleen Kerski, Professional Development

Sabrina Crowe, Professional Development

Amanda Kach, Part C Data Manager

Elisabeth Teller, Family Liaison / General Supervision and Monitoring Coordinator

Sophia Lampe, General Supervision and Monitoring

Rebecca Smith, Education and Outreach

Jayne Smalls, Secretary

Mary Coyle, Associate Accountant Supervisor

Matt Mahony, IT System Developer

Ari Burger, IT System Developer

Connecticut Birth to Three System www.birth23.org

450 Columbus Boulevard, Suite 205, Hartford, CT 06103

Information and Referrals - Child Development Infoline

Ph. 1-800-505-7000 Multilingual/phone interpretation service

Central Directory

2-1-1 (Voice/TTY)

Funding provided under Part C of the Individuals with Disabilities Education Improvement Act of 2004, through the United States Department of Education, Office of Special Education Programs, and the State of Connecticut.

In compliance with the Americans with Disabilities Act (ADA), this publication is available in alternative formats. If you need assistance, please call 860-500-4410 or e-mail CTbirth23@ct.gov.



Connecticut
Birth to Three
System

