



# ANNUAL DATA REPORT

**FISCAL YEAR (FY) 2025**  
JULY 1, 2024–JUNE 30, 2025



## ACKNOWLEDGMENTS

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 assistance on behalf of Connecticut's children who are part of the Birth to Three system.

### **Fiscal Year (FY) 2025 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 recognize Leona Adamczyk for her significant contributions over the past several years. Leona has been a fierce advocate for all children and has led the ICC with a focus on children and families. She has served on numerous committees and collaborated with others to ensure that the system remains stable and supportive for all children, from referral to exit from the Birth to Three system. Leona has also played a vital role in helping and onboarding parents to the ICC, continuing to be a source of support for them. Although she has stepped down from her role as co-chair, the ICC is grateful for the countless hours of work she dedicated to this position.

The ICC would like to also thank Asia Clermont and Sally Chamberland for being willing to share their stories within this report.

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## 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 2025 Fiscal Year and the number of towns served by each as of 6/30/25.

PROGRAM	CHILDREN	NUMBER OF TOWNS
Abilis Birth to Three	317	2
American School for the Deaf	111	<i>Statewide</i>
Beacon Services of CT	1932	93
Benchmark Infant and Toddler Services	2327	42
Building Bridges, LLC	904	23
Cheshire Public Schools - Darcey School	97	4
Children's Therapy Services	472	18
Creative Interventions	1069	60
CREC Birth to Three	318	11
CREC Soundbridge	45	<i>Statewide</i>
EASTCONN Birth to Three	370	21
EdAdvance Birth to Three	929	39
HARC - Steppingstones	459	15
New England Center for Hearing Rehabilitation	*	<i>Statewide</i>
Project Interact, Inc.	42	9
Reachout, Inc.	298	3
Rehabilitation Associates of Connecticut, Inc.	2440	48
SARAH, Inc. - KIDSTEPS	1549	50
Mentor South Bay	835	16
TheraCare	522	4

*\*NECHEAR does not provide service coordination, therefore they do not have a countable number of IFSPs, however they act as a statewide Birth to Three Deaf/Hard of Hearing Support Program.*

Connecticut’s Birth to Three system is committed to supporting infants and toddlers with developmental delays and disabilities to develop and grow through supporting families in their child’s natural environment using their everyday routines and activities. Eligible children are birth through age three, who have certain medical diagnoses or those showing signs of developmental delays in one or more key areas as outlined below:

- **Cognitive abilities** (learning, problem solving and remembering);
- **Communication skills** (talking, understanding and expressing ideas, following directions, pointing);
- **Social or emotional behaviors** (expressing emotions and having healthy relationships);
- **Physical development**, including seeing, hearing, moving, and general health; and
- **Adaptive skills** (self-help or daily living skills)

The chart below shows how many children in Connecticut had an Individualized Family Service Plan (IFSP) on December 1st of each year over the past 10 years.

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	↑
12/1/2023	6753	↓
12/1/2024	7350	↑

As the number of children and families supported increases from year to year, the system continues to face challenges related to workforce shortages.

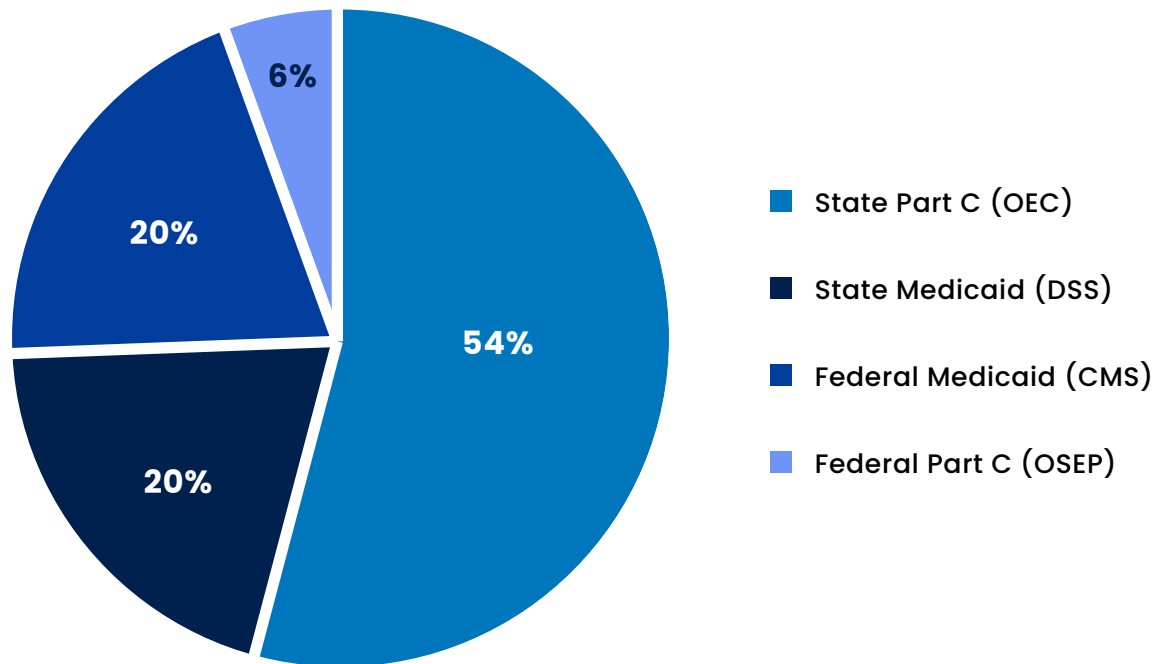
### LEGISLATIVE SESSION

The Connecticut Birth to Three Rate Study, conducted by Public Consulting Group (PCG), outlined the cost analysis and recommended rate increases necessary to stabilize the system and ensure adequate provider reimbursement. In response, the Governor’s proposed budget for the 2025 legislative session closely aligned with these recommendations, including funding levels that would have supported the rate increases identified in the study. However, the final legislative appropriations differed from the Governor’s proposal. The legislature approved an increase of \$2.8 million in the Office of Early Childhood (OEC), state line item and \$2.9 million in the Department of Social Services (DSS) line item to support a rate increase, along with a \$1 million reduction to the General Administrative Payment (GAP) line item, reallocating those funds toward the rate increase. While these changes were extremely helpful in supporting and stabilizing the system, the final appropriation fell short of fully funding the rate increases recommended in the Rate Study and originally included in the Governor’s budget.

## CURRENT FUNDING STRUCTURE

The table below outlines the state fiscal year 2025 (7/1/2024-6/30/2025) by actual funding categories. Of the 69.6 million dollars that the Birth to Three system received, 54% of those monies were funded through the state legislature, 40% funded through Medicaid, and 6% by federal Part C dollars received through the US Department of Education, Office of Special Education Programs (OSEP).

**FY25 Actuals 69.6 (Fiscal)**



## SYSTEM NEEDS

As outlined in the FY24 Annual Data Summary (located here: [Annual Data Summaries - Birth23.org](#)), the ICC and OEC collaborated on a comprehensive rate study cost analysis. The study's data was used to inform the system about the current cost of delivering Early Intervention services, particularly since rates had not been adjusted since 2017. Although funding was increased for FY27 during the FY25 legislative session, the allocation is not sufficient to raise the rates to the levels recommended in the report.

As a result, the system continues to face significant challenges in employing the professional disciplines necessary to support families across Connecticut's Early Intervention system. Recruitment and retention of high-quality early interventionists remain ongoing concerns. Anecdotal reports indicate several contributing factors, including the funding structure, pay scale, and the substantial number of responsibilities placed on staff.

Because the system operates under Part C of the Individuals with Disabilities Education Act (IDEA), programs must comply with a wide range of regulations. These requirements can feel burdensome to staff, and without adequate funding, programs struggle to hire and retain the workforce needed to effectively serve Connecticut's children and families enrolled in the Birth to Three system.



## 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, as the natural environment. In FY25, 99% of children supported within the system received support in their home or community setting. This is essential in providing parents and caregivers with 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 service provider based on the family's priority and the child's needs.
- Using coaching as a style of interaction with families to build their capacity to enhance their child's development.
- Providing support during activities and routines within the child's typical day in their natural environment.

Natural learning 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 other activities, and attending childcare centers. When the Birth to Three interventionists provide supports in the childcare centers there is a stronger bridge between the center's ability to support the child and a reduction in challenges in the center. This leads to children remaining in the center for longer periods of time and parents being able to work.

Natural environments include the childcare setting. For Birth to Three many visits happen in an early childhood classroom or within a childcare center. One parent shared:



My provider also stayed patient when scheduling and working either with myself or my daughter's daycare to schedule services. The director of my daughter's daycare was somewhat picky about when she was able to come and provide services but our provider was able to navigate all that beautifully and did not let it interfere with providing services in any way.<sup>1</sup>



## FAMILY STORIES

Each year, the Connecticut Birth to Three System surveys a group of families to assess their experience in the system. This survey evaluates family outcomes and looks at the percentage of families who report that Early Intervention Services have helped the family know their rights, effectively communicate their child's needs, and help their child develop and learn. Families who completed the survey have been involved with Birth to Three for a minimum of six months and not yet exited. Providers received surveys in July 2025 to distribute to their families. Families had the option of completing a paper or online survey. Surveys were returned to the Lead Agency by September 1, 2025. This year, the family survey was primarily offered online and translated into multiple languages. There were paper copies for families who preferred paper. During 2025 there was a significant increase in the number of families who responded to the survey.

When asked if Birth to Three helped them in understanding their rights, helping their child develop and learn, and effectively communicating their child's needs, one parent shared:



Yes, absolutely – especially with my son I was worried with his growth and development. Because of my service providers I learned to lean on his strengths to help his weaknesses. For example, he loves numbers so I was able to share with his preschool team that if you focus there you can then bring in communication. I learned this through Birth to Three.<sup>2</sup>



The family survey is analyzed utilizing a statistical methodology to determine whether the family was able to meet the outcomes of Indicator 4 of the Annual Performance Report. Of those families who responded to the survey, 89.5% of respondents reported they knew their rights under Part C of IDEA, 87% were better able to communicate their child's needs, and 93.8% reported they were better able to help their child develop and learn.

There were many comments compiled from the family survey. Families reported that they had a positive experience within the Birth to Three system. Some families identified concerns related to feeling anxious about their child's transition at age three. Conversely, some families reported that there were disruptions to services due to a workforce shortage. Some families reported turnover in the workforce left a gap in services. The staff turnover disrupts the continuous supports to families. This continues to highlight the need to support the recruitment and retention efforts. Birth to Three is an invaluable resource to families. Each interventionist in the field brings specialized expertise and suggestions to support families in helping their child develop and learn.

One parent shared:



My daughter is now a confident walker and has made such amazing progress. She was discharged this past week and it was a hugely proud moment for me that was such a positive experience with our provider. Our provider was so knowledgeable and always had a simple to execute but smart and clear suggestion on how to support the next step of getting my daughter to walk. Her suggestions were manageable and realistic.<sup>3</sup>

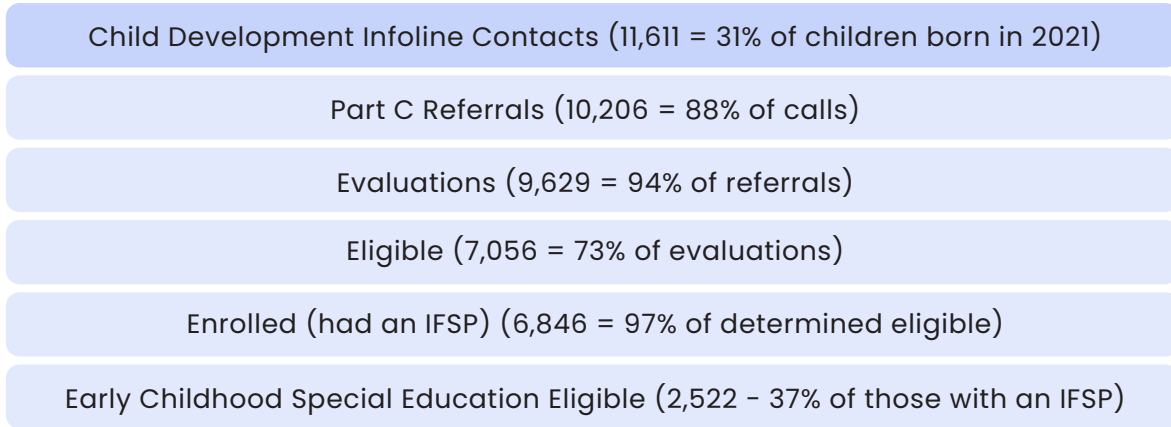


<sup>2</sup> AC - Parent Story

<sup>3</sup> SC - Parent Story

## BIRTH COHORT DATA

Birth cohort data examines the number of children born within a specific calendar year. This data is essential for evaluating the availability and impact of Birth to Three supports for families. In 2021, approximately 34,333 babies were born in Connecticut. Of the children born in 2021, a total of 6,846 children received Birth to Three services, which represents 20% of that birth cohort. This report focuses on the 2021 birth cohort, comprising all children born between January 1, 2021, and December 31, 2021, who turned three years old during the calendar year 2024.



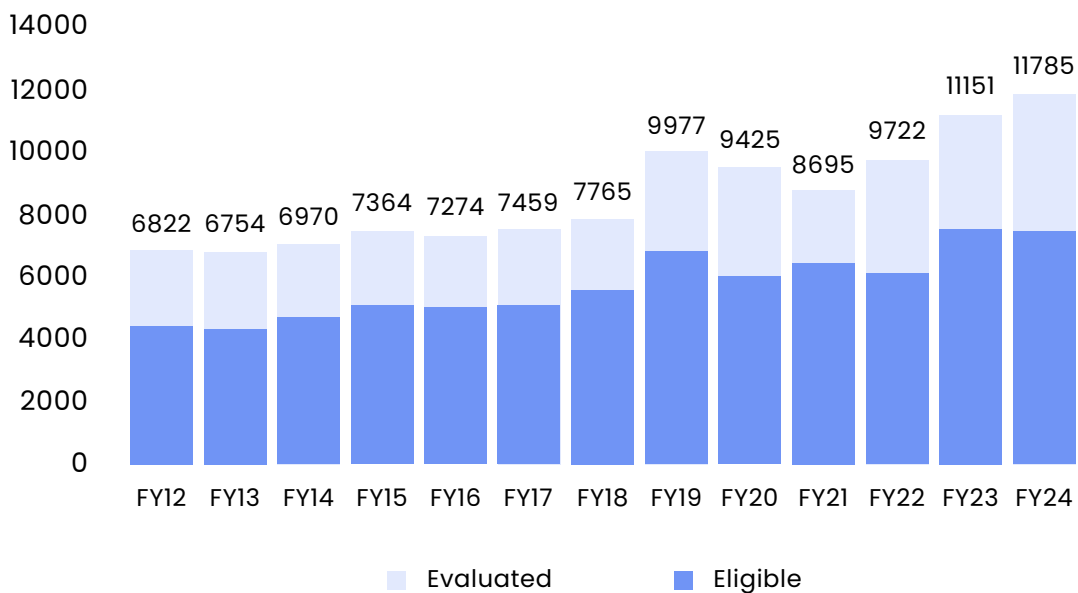
## CURRENT YEAR DATA:

While Birth Cohort data is a great way to evaluate the number of children supported by the system in any given cohort, the data is older due to the cohort looking at children who turned three in the previous calendar year. Over the last several years, the Birth to Three system has had an exponential increase in referrals to the Birth to Three system. To understand the current needs of the system, the section below provides data from FY25.

## ELIGIBILITY AND EVALUATIONS DATA:

In FY25, 13,051 eligibility evaluations were completed for children and their families. Of those 13,051 evaluations, 8,015 (61%) were determined eligible for Birth to Three supports. Over the last 14 years, the number of evaluations and eligible children has increased.

**Evaluated And Determined Eligible**



## LANGUAGE AND ACCESSIBILITY DATA:

Connecticut remains committed to supporting families in their native language with the use of staff who speak the native language and interpreters. In FY25, the system supported families who speak 38 different languages. The system also provides translation to all families so that written resources are accessible in their native language.

Below are the top 10 languages spoken in the household in FY25.

LANGUAGE IN HOME	COUNT OF CHILDREN
English	10,068
Spanish	2,191
Portuguese	171
Creole	85
Arabic	67
Urdu	35
Albanian	28
Bengali	24
Mandarin	24
Hindi	20



## WORKFORCE DEVELOPMENT:

### Early Interventionist Specialist Credential

During the FY25 year, the Lead Agency at the Office of Early Childhood proudly awarded its very first Early Interventionist Specialist (EIS) Credential to a provider in the CT Birth to Three System. The EIS Credential is a revised version of the Infant Toddler Family Specialist certificate which has been updated to align with current practices and pedagogy. This updated credential is a rigorous, yet self-paced, process for EI providers to demonstrate competence in their knowledge, application, and implementation of evidence-based EI practices. This milestone of awarding the credential represents a significant advancement in the state's commitment to ensuring high-quality, evidence-based early intervention services for infants and toddlers and their families. Earning this credential reflects the interventionists' dedication for professional excellence, ongoing learning, and commitment to the delivery of high-quality services to families and children.

### Natural Learning Environment Practices and Service Coordination Trainings:

The Birth to Three system hosts a multitude of trainings throughout the year. In alignment with Early Intervention requirements and pedagogical perspectives, the OEC provided training for Service Coordination and Natural Learning Environment Practices (NLEP).

Service coordination under IDEA Part C is a required early intervention service that ensures families of infants and toddlers with developmental delays or disabilities can access and organize the support they need. Each eligible child and family is assigned a service coordinator

who acts as the primary service provider for that family, helping them navigate the system, understand their rights, and connect with appropriate resources. The coordinator facilitates the development of the Individualized Family Service Plan (IFSP), monitors service delivery, provides information and referrals, and assists with transition planning when the child approaches age three. By coordinating services across multiple providers and agencies, service coordination creates a family-centered, culturally responsive approach that reduces stress and promotes positive outcomes for both the child and family. The Office of Early Childhood trained 108 early intervention personnel resulting in 98 newly certified Service Coordinators.

Connecticut's Birth to Three system remains dedicated to providing supports and services in Natural Environments with a Family-Centered focus. Two Natural Learning Environment Practice (NLEP) trainings were offered with a total of 108 attendees. Capitalizing on the knowledge acquired in the NLEP trainings, two 2-day trainings were offered to support the move toward developing implementation skills to fidelity in the Caregiver Coach and Mentor Coach trainings supported by the Family, Infant, & Preschool Program (FIPP). These trainings are followed up by a minimum of 6 months of technical assistance (TA) in order to reach fidelity. The 2-day Caregiver Coach training was attended by 110 Early Intervention staff. The 2-day Mentor Coach training was attended by 29 new trainees and several auditing Early Intervention staff.

*The Trauma of Homelessness; The Impact on Very Young Children and Families* was attended by 34 early intervention staff.

### **Music Therapist Discipline Addition:**

The CT Birth to Three system is equally excited at the incorporation of Music Therapy as a recognized discipline within the Birth to Three system. This addition further aligns the state with services that are outlined in Part C of IDEA. With this, music therapy has been incorporated into many IFSPs when teams deemed it appropriate to support a child's and family's outcomes. Music therapists are considered professional providers throughout the system, and all follow the Birth to Three approach inclusive of NLEP, Primary Service Provider (PSP) and Coaching, and Assistive Technology (AT) as appropriate.

### **EXIT AND TRANSITION DATA**

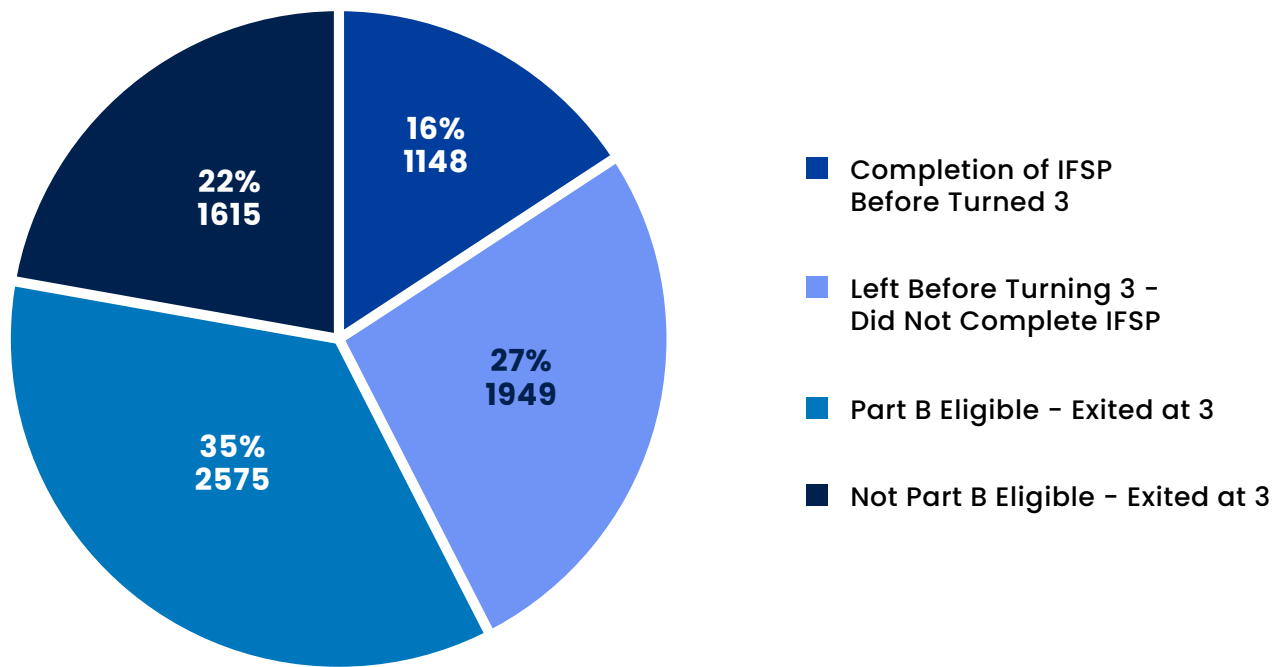
Exiting the Connecticut Birth to Three System occurs when a child transitions out of early intervention services, typically at age three or earlier if the family chooses to discontinue services. This process includes a transition plan developed with the family as part of the Individualized Family Service Plan (IFSP), ensuring a smooth move to appropriate next steps such as preschool special education under IDEA Part B, community programs, or other supports. The service coordinator facilitates this process by sharing information about available options, coordinating meetings with the local school district if appropriate and with family consent, and ensuring families understand their rights and choices. The goal is to provide continuity of services and support so that the child and family are prepared for the next stage of development and education. During FY25 7,577 children exit the Birth to Three system.



## EXIT DATA FY25

\*ESCE – Early Childhood Special Education

### Exit Data 7/1/24–6/30/25



One family shared her story on exiting Birth to Three and the transition process:



My transition process went very well. I wish I could have kept my son's team – they were great and went above and beyond. They gave me practical advice. As an example, if he is going on a school bus, one suggestion was to get him on a bus so that he can understand. Overall, for transition, I am a teacher, but a high school teacher, so I did not know what the process included. My providers were understanding when I said I feel like I should know this, and they said This is the first time you went through this. We don't expect you to know. We are here to help.<sup>4</sup>



In 2021, the state implemented Early Intervention Services (EIS) over 3, which supports children who turn 3 over the summer and may have a gap in services before the school year begins. Since then, numerous families have taken advantage of the extended option. One family shared their experience when asked if EIS Over Three helped their family. They responded:



Absolutely, I was worried about what would happen if he did not have services for 2 months, and there would be a lot of loss, and starting school would be hard for him. Thursday, he exited Birth to Three and started school on Monday, and it was a seamless transition.<sup>5</sup>



<sup>4</sup> AC - Parent Story

<sup>5</sup> AC - Parent Story

## GENERAL SUPERVISION DEVELOPMENT

The CT Birth to Three system has released the Determination Report of Outcomes and Program Priorities (DROPP). This report is part of the Connecticut Birth to Three System's responsibility, under the Office of Early Childhood, to maintain a unified general supervision framework. This framework incorporates all monitoring priorities, including embedded fiscal monitoring. It also supports the annual determination of each contracted Early Intervention Services program's performance based on these monitoring activities.

States must use the following four (4) determination categories outlined in §303.703 of IDEA when issuing annual program determinations:

- Meets Requirements,
- Needs Assistance,
- Needs Intervention, and
- Needs Substantial Intervention.

Throughout FY25, the Lead Agency assigned programs into year-long technical assistance (TA) groupings based on determination categories.

## FEDERAL PERFORMANCE

For the Federal Fiscal Year 2023, which runs from July 1, 2022, to June 30, 2023, Connecticut's determination was classified as "Needs Assistance." The state's Birth to Three system continues to demonstrate a strong commitment to quality and accountability. The most recent report (found here: [IDEA Determinations - Birth23.org](#)) highlights Connecticut's dedication to maintaining high standards, particularly in data quality, where the state has established robust data standards. The data presented showcases the progress made and the consistency maintained across child outcomes, emphasizing the system's effectiveness and the hard work of everyone involved.

The Annual Performance Report (APR) and State Systemic Improvement Plan (SSIP) is the federal report in which OSEP identifies the states determination. The state identified areas of noncompliance in the Annual Performance Report (APR) Indicators 1 (Timely Service Delivery), 7 (Timeliness of IFSPs), and 8c (Early Childhood Transition), the Office of Special Education Programs (OSEP) rated Connecticut's overall compliance at 87.50%, reflecting the system's ongoing efforts to meet federal expectations. Despite these strengths, there are clear opportunities for growth that could further enhance the system's impact:

### 1. Data Quality and Completeness

To raise the determination and maintain a strong system, the state can improve the completion rate, throughout the upcoming FY, of the Child Outcomes Summary (COS) while continuing to uphold the high standards of data quality and integrity.

### 2. Performance and Change Over Time

Although compliance and monitoring levels remain strong, the data reveals a lack of measurable improvement in child outcomes over time. This signals a need for deeper analysis and targeted strategies to support meaningful progress in developmental outcomes.

The Lead Agency has started working with the Interagency Coordinating Council (ICC) to determine next steps and support improvements in child outcomes at the state level.

## TOWN-BY-TOWN DATA

A town-by-town breakdown of children who received supports throughout FY25 can be found below. Suppressed data provided for towns with less than 6 children to protect confidentiality.

**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.

**Note:** Served is defined as having an active IFSP.

TOWN NAME	REFERRALS	EVALUATED	DETERMINED ELIGIBLE	SERVED	NUMBER OF PROGRAMS
Andover	11	12	<6	13	2
Ansonia	89	93	61	112	2
Ashford	9	10	8	12	2
Avon	37	37	20	52	3
Barkhamsted	7	7	<6	7	2
Beacon Falls	16	16	11	29	3
Berlin	48	53	35	64	2
Bethany	12	15	10	19	2
Bethel	67	68	48	92	4
Bethlehem	6	<6	<6	8	1
Bloomfield	79	77	49	82	3
Bolton	9	7	<6	15	2
Bozrah	7	7	<6	<6	3
Branford	76	81	47	80	3
Bridgeport	769	787	526	968	4
Bridgewater	<6	<6	<6	<6	2
Bristol	249	267	160	290	4
Brookfield	50	47	29	53	3
Brooklyn	21	19	12	35	2
Burlington	20	19	12	26	3
Canaan	7	7	<6	<6	1
Canterbury	24	22	9	15	2
Canton	19	20	11	19	1
Chaplin	6	6	<6	8	2
Cheshire	61	66	34	72	3
Chester	<6	<6	<6	<6	2
Clinton	34	32	18	34	2
Colchester	46	45	27	62	3
Colebrook	<6	<6	<6	<6	1

TOWN NAME	REFERRALS	EVALUATED	DETERMINED ELIGIBLE	SERVED	NUMBER OF PROGRAMS
Columbia	11	11	7	16	2
Coventry	43	38	27	49	1
Cromwell	34	33	22	49	3
Danbury	411	414	249	425	5
Darien	79	76	47	87	3
Deep River	6	6	<6	<6	3
Derby	60	57	37	72	2
Durham	28	29	23	38	2
East Granby	13	16	12	17	2
East Haddam	20	18	13	21	2
East Hampton	43	42	26	47	3
East Hartford	260	252	156	264	5
East Haven	106	110	73	136	3
East Lyme	44	42	27	49	5
East Windsor	30	32	16	29	4
Eastford	<6	<6	<6	<6	2
Easton	22	22	14	21	2
Ellington	53	55	38	67	3
Enfield	156	148	93	168	6
Essex	6	7	<6	8	2
Fairfield	181	180	105	202	3
Farmington	63	63	37	64	3
Franklin	<6	<6	<6	<6	2
Glastonbury	67	74	36	94	3
Goshen	<6	<6	<6	<6	1
Granby	33	35	19	31	3
Greenwich	196	196	95	203	3
Griswold	41	44	26	41	3
Groton	138	134	84	146	3
Guilford	61	60	40	77	2
Haddam	19	18	13	20	3
Hamden	180	180	118	240	5
Hampton	<6	<6	<6	7	2
Hartford	784	808	473	832	7
Hartland	<6	<6	<6	<6	2

TOWN NAME	REFERRALS	EVALUATED	DETERMINED ELIGIBLE	SERVED	NUMBER OF PROGRAMS
Harwinton	9	10	9	20	3
Hebron	28	27	16	29	2
Kent	6	<6	<6	6	1
Killingly	70	70	30	58	3
Killingworth	18	16	12	24	2
Lebanon	27	19	11	32	2
Ledyard	46	45	33	60	4
Lisbon	12	10	<6	15	3
Litchfield	16	15	8	13	3
Lyme	<6	<6	<6	<6	2
Madison	36	37	29	53	2
Manchester	256	250	152	285	5
Mansfield	33	35	21	33	2
Marlborough	18	17	9	24	2
Meriden	302	307	214	384	5
Middlebury	13	13	7	16	2
Middlefield	9	8	<5	10	3
Middletown	155	154	106	194	4
Milford	127	126	84	152	4
Monroe	48	44	27	63	3
Montville	47	48	26	57	4
Morris	<6	6	<6	<6	1
Naugatuck	120	118	69	123	4
New Britain	418	431	285	535	6
New Canaan	42	44	21	54	2
New Fairfield	54	46	26	52	2
New Hartford	19	16	13	17	3
New Haven	538	539	345	657	4
New London	132	129	80	103	3
New Milford	84	76	48	88	2
Newington	76	76	50	123	4
Newtown	65	67	40	83	3
Norfolk	<6	<6	<6	<6	1
North Branford	43	38	21	49	2
North Canaan	<6	<6	<6	<6	1

TOWN NAME	REFERRALS	EVALUATED	DETERMINED ELIGIBLE	SERVED	NUMBER OF PROGRAMS
North Haven	66	67	42	91	3
North Stonington	10	11	10	13	3
Norwalk	375	365	211	424	3
Norwich	208	200	114	207	3
Old Lyme	19	19	11	20	3
Old Saybrook	15	15	9	16	3
Orange	35	36	26	46	2
Oxford	38	37	29	49	2
Plainfield	59	58	35	63	3
Plainville	67	63	40	67	3
Plymouth	51	50	28	44	2
Pomfret	11	13	6	19	3
Portland	35	35	22	42	3
Preston	12	12	6	9	2
Prospect	26	27	15	27	3
Putnam	37	37	20	41	4
Redding	22	21	12	29	2
Ridgefield	69	72	38	80	3
Rocky Hill	55	55	30	54	3
Roxbury	<6	<6	<6	<6	1
Salem	16	15	<6	17	2
Salisbury	<6	<6	<6	<6	1
Scotland	<6	<6	<6	<6	2
Seymour	52	48	29	60	2
Sharon	<6	<6	<6	<6	1
Shelton	115	122	80	169	4
Sherman	9	8	6	9	2
Simsbury	68	65	36	64	3
Somers	24	23	12	24	3
South Windsor	75	76	44	81	4
Southbury	27	25	13	28	2
Southington	129	127	64	140	3
Sprague	9	10	<6	<6	2
Stafford	34	33	23	40	2
Stamford	562	585	357	657	4

TOWN NAME	REFERRALS	EVALUATED	DETERMINED ELIGIBLE	SERVED	NUMBER OF PROGRAMS
Sterling	10	12	7	13	2
Stonington	30	28	16	32	2
Stratford	180	177	116	234	4
Suffield	29	32	20	43	3
Thomaston	41	38	18	34	2
Thompson	32	33	19	38	3
Tolland	40	37	22	46	3
Torrington	131	134	86	144	3
Trumbull	118	119	91	163	3
Union	<6	<6	<6	<6	2
Vernon	112	119	70	144	4
Voluntown	<6	<6	<6	<6	2
Wallingford	113	121	73	158	4
Warren	<6	<6	<6	<6	1
Washington	<6	<6	<6	<6	2
Waterbury	729	744	454	827	4
Waterford	53	51	34	67	2
Watertown	58	57	37	79	3
West Hartford	195	195	89	177	6
West Haven	227	224	140	233	4
Westbrook	14	15	8	9	2
Weston	34	37	30	55	3
Westport	66	61	28	64	3
Wethersfield	99	101	70	123	4
Willington	21	20	9	18	2
Wilton	65	67	37	79	2
Winchester	29	24	13	25	1
Windham	119	123	80	146	3
Windsor	91	91	56	106	4
Windsor Locks	30	30	21	48	3
Wolcott	53	51	33	54	2
Woodbridge	20	19	11	27	2
Woodbury	23	22	11	21	2
Woodstock	21	23	15	24	3

**THE BIRTH TO THREE TEAM AT THE OEC INCLUDES:**

Nicole Cossette, Early Intervention Director, Part C Coordinator

Koleen Kerski, Professional Development Coordinator

Sabrina Crowe, Professional Development Coordinator

Amanda Brekke, Part C Data Manager

Elisabeth Teller, Family Liaison / Accountability and Monitoring Coordinator

Sophia Lampe, Accountability and Monitoring Coordinator

Rebecca Smith, Education and Outreach Coordinator

Jayne Smalls, Secretary

Mary Coyle, Associate Accountant Supervisor

**Connecticut Birth to Three System [www.birth23.org](http://www.birth23.org)**

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**Information and Referrals** - Child Development Infoline

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

**Central Directory**

2-1-1 (Voice/TTY)

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