

Birth to Three Supports

Information for the
CT General Assembly Public Health Committee
Task Force to Study Rare Disorders
November 17, 2017

Eileen McMurrer, M.Ed.
Child Find and Public Awareness Coordinator
CT Birth to Three System
CT Office of Early Childhood



Learning Objectives

As a result of this presentation, members will gain knowledge about Birth to Three:

- Referral and Intake Process
- Eligibility requirements for supports
- Ensuring follow up
- Ensuring adequate access/marketing
- Interface with outside health care providers (local and academic centers)
- Education for Staff/Training and Ongoing Education
- Emotional/Financial Support for Parents/Caregivers
- Transition to school and community supports



What is Birth to Three?

A system of supports for families to help them:

- meet the needs of their infants and toddlers who have developmental delays or disabilities, and connect to their community

Part C of IDEA, federal law Individuals with Disabilities Education Act and **C.G.S. §17a-248**

The CT Office of Early Childhood is the Lead Agency.

- 36 contracted agencies
 - each serves a specific set of towns: strengthen LEA relationships, know community challenges and resources
 - 3 types: general, autism-specific, hearing-specialty



Referrals and Intake

Child Development Infoline (CDI) is the single access point

Three referral paths:

- www.birth23.org/referrals
- phone 800-505-7000
- fax referral form or medical records to 860-571-6853

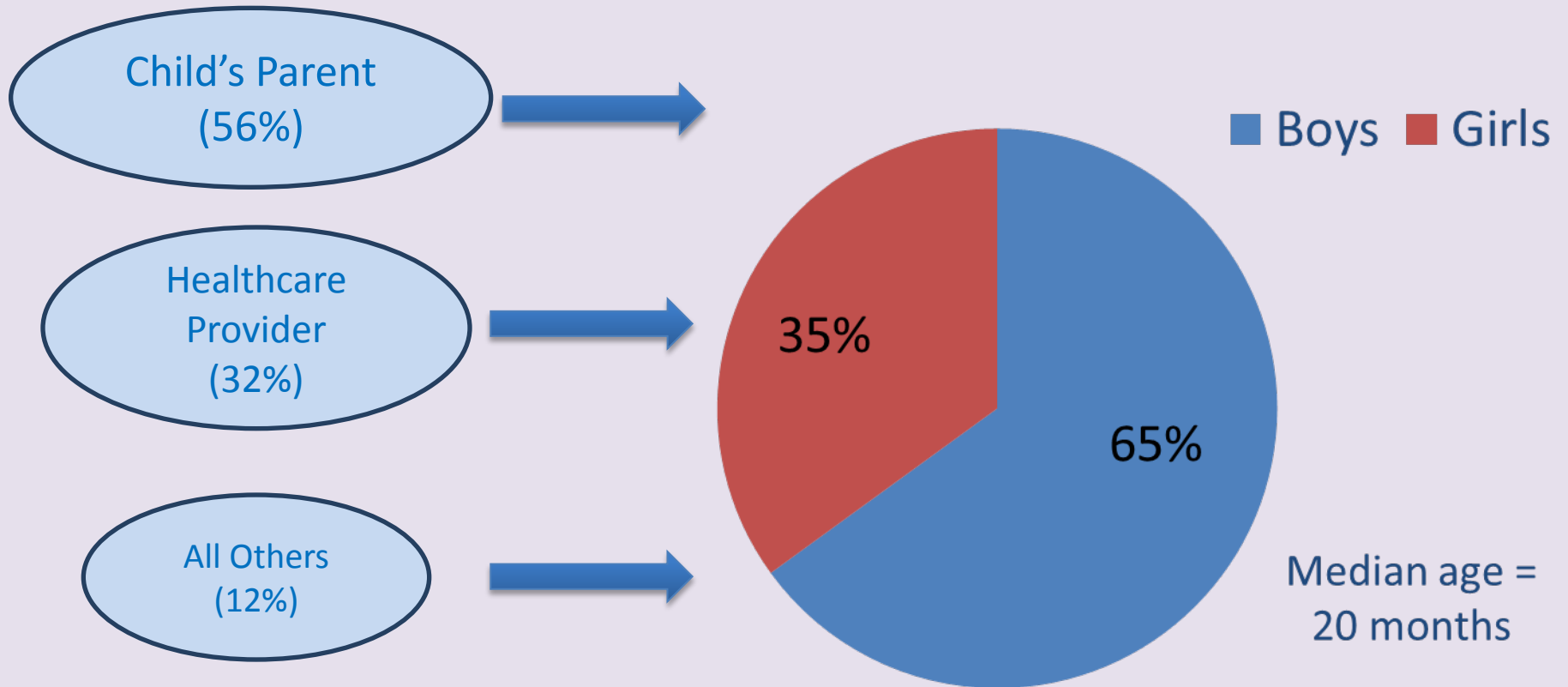
Anyone can refer.

Only the **Parent** can give consent to proceed with the referral.

- **Health care providers** = vital partners in supporting family acceptance of the referral, the evaluation result, and engagement with their Birth to Three team.



Over 12,000 contacts to Child Development Infoline resulted in 9,455 referrals



FY17 data

Initial Evaluation

Looks at Family's strengths

Looks at Child's strengths and needs



- **Free for the family:** ask their consent to bill insurance
- **Easy for the family:** two B23 professionals come to the family's home or the child's early care setting
- **Fun:** looks like “play”, but uses standardized instruments
- **Multidisciplinary:** two staff with varied training (*e.g., PT and SW*)
- **Valuable:** Parent learns about child development and how to help their child succeed (*whether the child is eligible or not!*)
- **Effective:** accurate, meaningful measurement of child's development

Who is Eligible?

Families are offered early intervention services when their child is:

1. Experiencing a **significant developmental delay** (-2 SD) in one domain or - 1.5 SD in 2 or more of the following areas:
 1. Physical development, including motor, vision, hearing
 2. Communication development
 3. Social or emotional development
 4. Adaptive skills
 5. Cognitive development (90% in FY17)
- OR**
2. **Diagnosed as having a physical or mental condition** that has a high probability of resulting in developmental delay, e.g., Down syndrome, ELBW, spinal muscular atrophy, deafness, Zika (10% in FY17)



Not Eligible... Follow up!

“Not Eligible” does not mean “Not Delayed”

- ASQ developmental monitoring (*Ages and Stages Questionnaires*)
- Child Development Infoline = access other resources
(*e.g., Help Me Grow, community activities and agencies*)
- Re-refer after 90 days if still concerned
- Refer to school district if close to 3yrs old
 - CDI has school district contacts
 - CT Parent Advocacy Center helps families 0-18/21yrs



Professional Service Providers

More than 1,200 individual staff statewide

- Service Coordinator for every family
- SLPs, OTs, PTs, developmental therapists
- Mental health clinicians
- Audiologists
- Applied behavior analysts

...and others who coach the family on how to teach their eligible child during regular daily routines

Continuing education and professional development trainings

- from Birth to Three: early motor development, family supports, trauma-informed care, best practices in early intervention
- from professional organizations related to licensure or accreditation
- Coursework completed at higher education



Best Practices in EI

Activity Based Teaming

- Support the parent to improve the child's functioning during regular daily routines and activities
- LOTS of practice with a familiar, nurturing caregiver

Primary Service Provider = => better child outcomes and increased parent satisfaction

Coach the parent or caregiver

- First, understand the Parent's perspective, then,
 - share information on research supported practices
 - model and demonstrate techniques
- Parents try new strategies during everyday activities
- Reflect together on how the strategies are working and adapt for this unique child



NOT!!!



Coordination of Care

Ongoing coordination between Birth to Three and medical providers is essential for optimal service provision and child and family outcomes.

- Contracted Birth to Three Medical Advisor: Dr. Ann Milanese
- Governor-appointed State ICC rep, CT-AAP: Dr. Carol Weitzman

Medical outreach strategies include:

- **Professional Organizations:** CT-AAP webinars; CPHA, CT-AAA, CT Perinatal Assn presentations, poster, resource table dialogue and handouts
- **Yale:** Pediatric Grand Rounds, Specialty Centers Nurse Managers, NICU discharge planners
- **CT Children's Medical Center:** Autism Symposium, Nursing Governance Committee
- **Middlesex Hospital:** residents shadow a home visit, pre- and post- homework
- **EPIC trainings** through Child Health and Development Institute – coordinated messaging
- **Community practice workshops** in Hartford, Danbury, Westport, New Britain, Stamford
- MOU with DPH to receive **PHI for auto eligible children:** track referral/enrollment; piloting a fax-back form for PCPs of eligible, non-referred lead poisoned children



Communication: B23 and PHCPs

- **Lost to follow up** (referral to CDI, parent no response – letter sent to referral source so PCP can discuss with the parent)
- **Which program serves my patient?**
 1. Ask the parent
 2. Ask CDI: Fax signed parent consent to 860-571-6853
 3. Check B23 website (by type of program: <http://www.birth23.org/programs/> or by family's town of residence: <http://www.birth23.org/towns/>)
- **EI and Medical Provider Update form**
- **IFSP, other records** are shared with parent consent



Funding Sources

FY 2017 Revenue- All Funding Sources

State Funds ¹	\$47,426,198
Total Federal IDEA ² funds	\$4,725,023
Commercial Insurance Receipts	\$2,083,241
Parent Fees	\$1,368,420
Total System Expenditures	\$55,602,882

¹ \$14.5 million transferred from CT Department of Social Services pending changes related to Medicaid billing

² \$1 million transferred from CT Department of Education, IDEA Part B Child Find funds

Family Contributions

- Sliding Fee based on family size and income (*annual adjusted gross income of \$45,000 or above*)
 - not affected by amount or type of service, or the number of enrolled children in a family
 - fees range from \$8 - \$272 per month
 - Documented extraordinary expenses can reduce the family fee
- Consent to Bill Insurance is requested, whether private or public



All Families Have Rights

- Under IDEA, the parent has a right to:
 - confidentiality
 - give informed written consent
 - file a written complaint
 - request mediation or a due process hearing
- In CT, most towns have more than one Birth to Three program so families have the option to transfer.
 - e.g., Hartford: 6 general, 2 autism-specific, 3 hearing specialty



Family Support & Leadership

- Birth to Three Family Liaison toll-free 866-888-4188, language line phone interpretation >120 languages
- CT Parent Advocacy Center
- Guide By Your Side, others (*e.g., Family Support Network, Parents Available To Help, CT Hands and Voices, AG Bell, Autism Speaks, The Tiny Miracles Foundation*)
- Parent Handbooks, online videos, brochures
- State Interagency Coordinating Council parent advisors

Transition

Part C services must end at age 3 years

Transition planning with the Parent:

- begins right away as a conversation
- Family Goal on every initial IFSP and every annual IFSP review
- Parent Transition meeting at least 90 days before 3rd birthday

Coordination with the School District (LEA)

- electronic Notifications (Child Find), no parent consent required
- Referral to LEA, with Parent permission
- Joint planning; possibly shared home visit, school visit, assessment
- “FAPE at Three”: IDEA, Part B, section 619 (early childhood special education) eligibility determination required

Life After Three

Not all parents choose school supports.

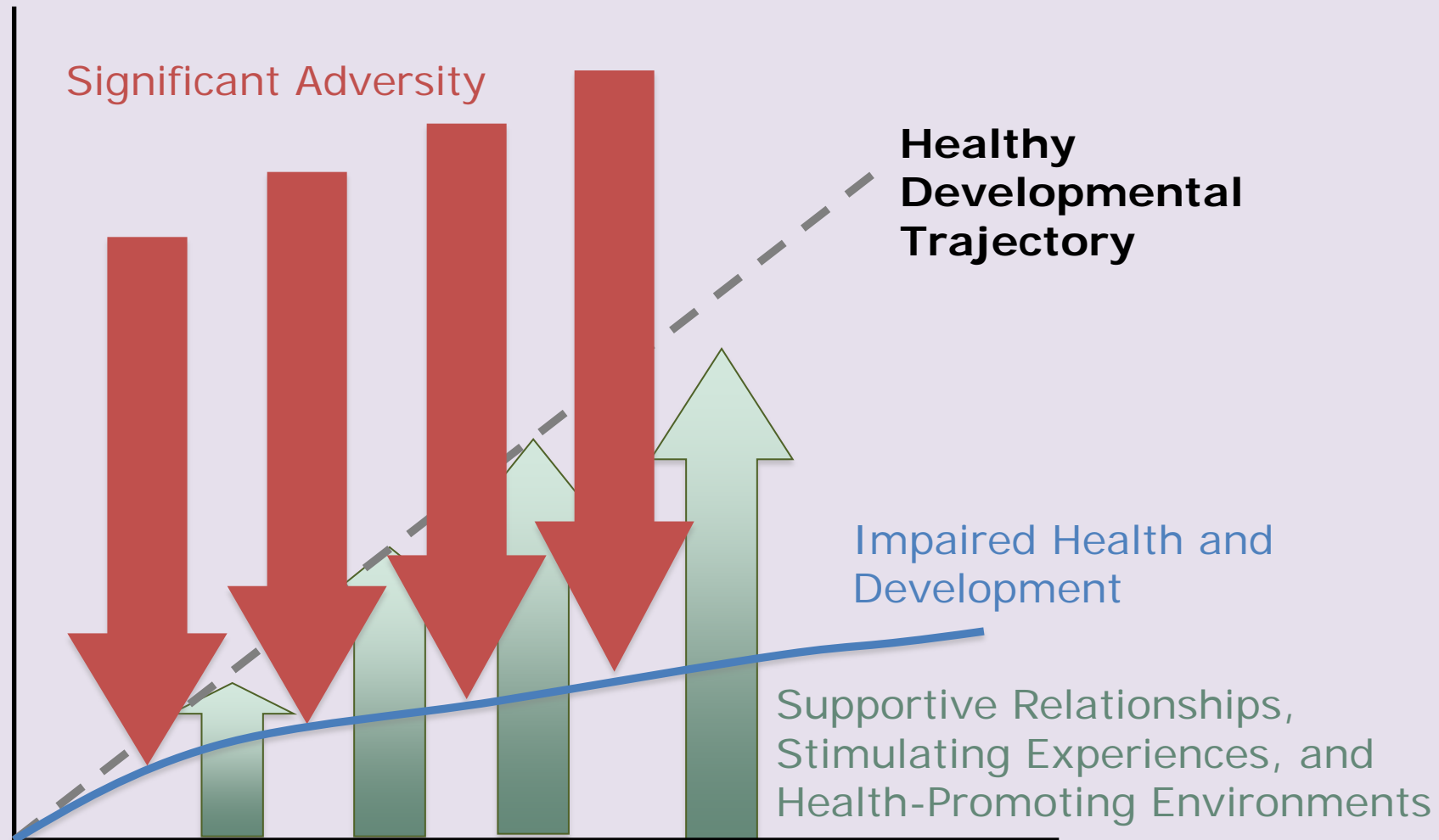
Not all children are eligible
for 619 supports.

- Service coordinators work with the family to identify community options and empower the parent to find a good match for their hopes and needs.



Examples: Head Start, library story hour, faith-based programs, high quality child care

Current Conceptual Framework Guiding Early Childhood Policy and Practice



Website: www.birth23.org

Connecticut Birth to Three About Referrals Families Providers Programs

Children have a lot to learn in the first three years

Birth to Three supports families when they have concerns about their children's development

I'm new to Birth to Three 1.800.505.7000
I'm in Birth to Three 1.866.888.4188

Find Information
Search Birth to Three [Get Info](#)

Make a Referral

1 Child Development Infoline

If the child you are referring does not live in Connecticut, or will turn 3 years old within 45 days, do not complete the online form. Call the Child Development Infoline about other options to address your concerns.

[1-800-505-7000](tel:1-800-505-7000) [Visit Site](#)

2 Online Referral Form

Anyone with concerns about a young child's development may make a referral to the Connecticut Birth to Three System. Only the parent or guardian can accept their child's referral and schedule a developmental evaluation.

[Go to Form](#)

3 Fax Your Referral

Download the form below and fax to 800-571-6853 to make your referral. Birth to Three, Health Care providers and Families all work together to meet children's needs.

[Download Form](#)

Questions?

eileen.mcmurrer@ct.gov

maggie.adair@ct.gov

Referrals

Child Development Infoline

www.cdi.211ct.org

800-505-7000