

# ***Connecticut Birth to Three System***

**Early Autism: Advances in Research  
and Clinical Practice**

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**Early Childhood**



# Connecticut Birth to Three System

## Part C of IDEA

### Eligibility: Significant Delay in Development

- diagnosed condition or
- -2 S.D. in 1 area or -1.5 S.D. in 2 areas

### Numbers for 2016

- 9,099 Children Referred
- 5,411 Found eligible
  - 10,288 Served over the year
  - 5,000 Approximately - Daily



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# Connecticut Birth to Three System

## Part C of IDEA

- **35 contracted provider programs**
  - 3 for children who are deaf/hard of hearing
  - 6 for children with autism spectrum disorder
  - 27 - general accepting all children
- **Approximately 1,200 staff members**



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# Children with Autism Spectrum Disorder

- All Children screened for ASD after 16 months of age
  - 447 had an autism assessment completed by B3 program
- Child must meet DSM 5 criteria
- Children referred with an existing ASD diagnosis =
  - 127 (FY16)
  - 31 (FY 15)
- 1,314 Children with ICD 10 for ASD over the course of FY 16
  - 500 Children monthly approximately with ASD



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# Connecticut Birth to Three System

*Guiding families to support  
their child's development  
and connect to their  
community*



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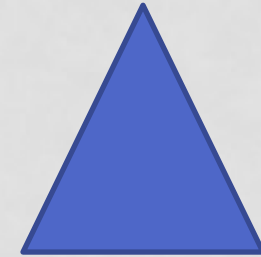
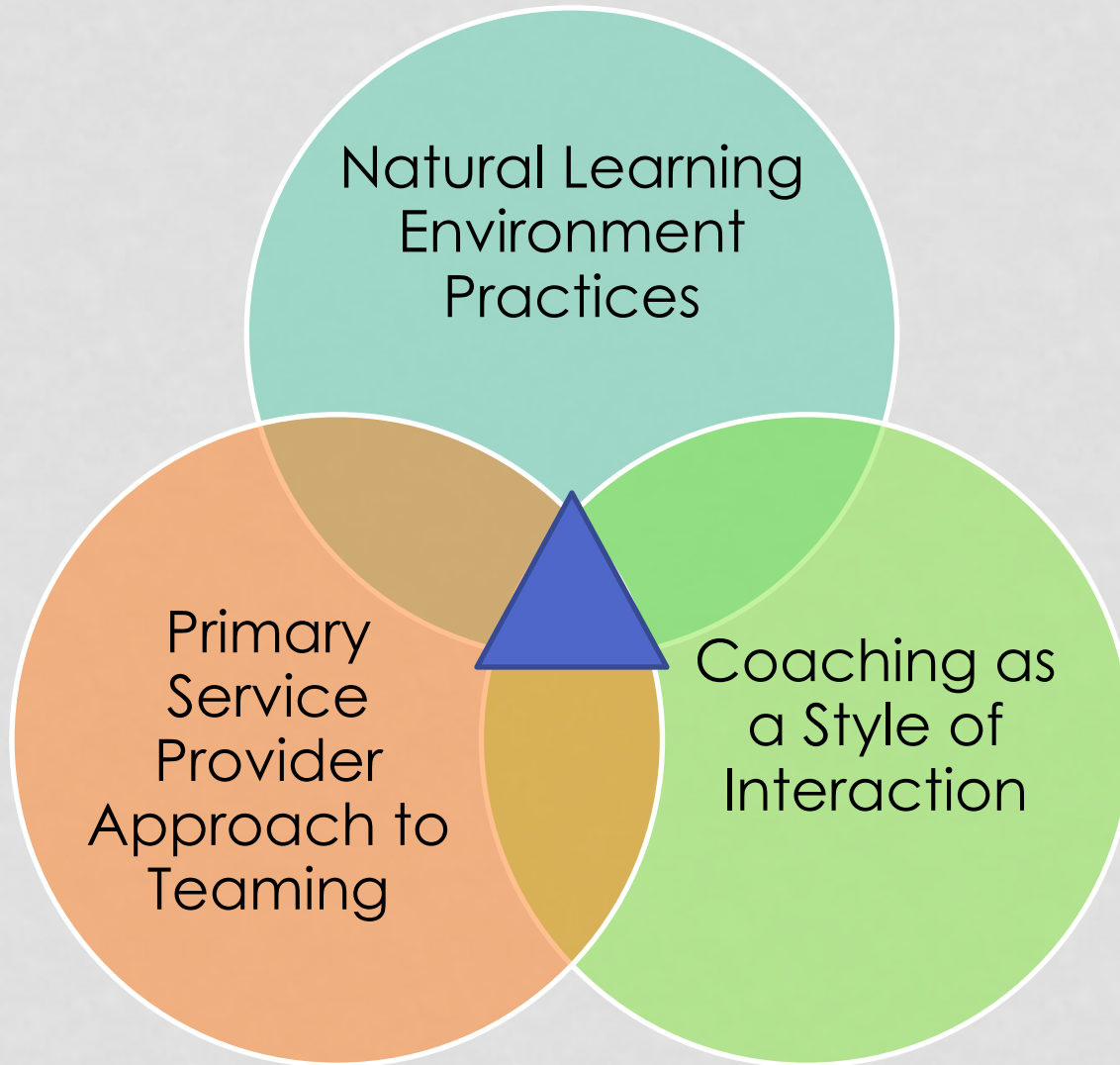
Part C early intervention builds upon and provides supports and resources to assist family members and caregivers to enhance children's learning and development through everyday learning opportunities.



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# What does Birth to Three look like?



Increased Participation, Confidence and Competence:

- Parent
- Child

# Developing the Individualized Family Service Plan (IFSP)

- **Gather information from assessments of health and developmental status.**
- **Identify Parent & family concerns and priorities**
- **Identifying supports being used or needed outside of the Birth to Three System**
- **Identify specific Intervention in natural environments and measurement of objectives**



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# Assessments and Measurable Outcomes

- DENVER
- VB-MAPP
- HELP
- Parent priorities/IFSP goals
- Behavior of social significance
- Reports/evaluations & recommendations from outside professionals
- Measurable objectives including criteria for mastery.
- Teaching strategies/steps developed to include prompting levels, schedule of reinforcement, ABC's

# Evidence Based Practice/ABA

- Antecedent Based Intervention
- Discrete Trials
- Positive Reinforcement
- Joint Attention Intervention
- Modeling
- Naturalistic Teaching Strategies Incidental Teaching
- Pivotal Response Training
- Augmentative & Alt. Communications (PECS, ASL)
- Positive Behavior Interventions & Support (PBIS)
- Visual Supports
- Prompting
- Fading
- Shaping
- Generalization
- Task analysis
- Chaining



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# Using ABA in the Natural Environment

- Building positive trusting rapport with parents & child
- Child Interests
- Coach parents in how to practice targeted skills throughout their day & within daily routines.
- Building joint attention and communication
- Playing with toys appropriately and expanding interests
- Building skills to increase peer engagement
- Decreasing maladaptive behaviors
- Environmental changes
- Maintenance
- Generalize skills across people and places

# Data, Data, Data ...

- determine effectiveness of intervention strategy and make necessary changes if needed
- Taken at every visit and analyzed routinely
- Rate/Frequency Data
- Durational
- ABC data
- Percentage
- Trials to criterion
- Probe data

# Putting it all Together

- Coaching as a style of intervention
- Using principles of ABA within the Natural Learning Environments
- Measurable outcomes
- Data Collection
- Evidence Based Practice
- Family needs and Priorities
- Community Participation/Peers
- Transition



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# Services Planned vs. Delivered

- **Planned services on IFSP =**
  - 40 hours/month Avg.
  - Range 3-90 hours/month
- **Hours of Services delivered**
  - 30 hours/month Avg.
  - Nationally 75% of planned hours are delivered
- **Visit Locations:**
  - Child's Home- 85% Community-15%



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# Transition from Birth to Three

The average length of enrollment between a child's initial IFSP and exit was slightly less than one year (**11.67 months**).

Reason Families left in FY16	# of children	% of all exits (5,302)
Child turned three years old	3,298	62%
Parent withdrew their child	956	18%
Attempts to contact unsuccessful	472	9%
No further services needed by child	346	7%
Moved out of state	222	4%
Deceased	8	<1%

# Of the 3,298 children who left at age 3 and were referred to their local school district:

Result of Referral	of children	% of exits at age 3
<u>Eligible</u> for preschool special education	2,355	71%
<u>Not eligible</u> for special education but referred to another program	398	12%

Status of remaining children was unknown at time of exit.



# Planning for Transition

- Birth to Three Service Coordinator responsible to:
  - Arrange conference with school district and/or others as appropriate at least 90 days before 3<sup>rd</sup> birthday.
  - Inform parents of the steps necessary for eligibility determination and program planning. Plan for changes to the service model
  - Assist family to look at all community resources for supports and services.



# Early Intervention vs. Special Education

## Part C – EI Services

- Special Education or Developmental Services
- Speech & Language
- Occupational Therapy
- Physical Therapy
- Behavior Intervention
- Audiology
- Assistive Technology
- Health
- Nutrition
- Transportation
- Vision Services
- Etc.

## Part B – Special Education

- Special Education
  - Delivered by:
    - Educator
    - Speech & Language

# Resources

- **Office of Early Childhood**
  - <http://www.ct.gov/oec/site/default.asp>
- **Connecticut Birth to Three System**
  - <http://www.birth23.org/>