

Rhode Island Executive Office of Health and Human Services Early Intervention Program



early intervention

supporting families and child development

SFY 2020



Early Intervention (EI) is a federal program defined in the Individuals with Disabilities Education Act (IDEA) section 34 CFR Part 303 (Part C). Part C of these regulations pertain specifically to infants and toddlers, birth to three. Each state has a lead agency responsible for the management and oversight of the EI system in their state. The Executive Office of Health and Human Services (EOHHS) is the lead agency for Rhode Island. The Office of Special Education Programs (OSEP) is the federal office responsible for ensuring that States comply with IDEA. On an annual basis EOHHS provides a comprehensive report detailing Rhode Island's compliance. The Annual Performance Report is available on line at:

<http://www.eohhs.ri.gov/ProvidersPartners/EarlyInterventionProviders/EICertificationStandards.aspx>

The report that follows is a summary of the Rhode Island Early Intervention 2020 Annual Performance Report.

Program Description

Rhode Island Early Intervention is a program designed to help families support the growth and development of their infants and toddlers, birth through 3, who are delayed in their development or have a diagnosed condition known to cause developmental delay.

Eligible families have children who have certain diagnosed conditions, significant delays in one or more areas of their development, or are experiencing circumstances that, without intervention, are likely to result in significant developmental delay. Developmental areas impacted may include cognitive, physical/motor, communicative, social/emotional, or adaptive skills.

Early Intervention services are provided in the child's natural environment, or settings that are natural or normal for the child's same age peers who do not have a disability¹. For most infants and toddlers, this is their home or childcare. Research tells us that children learn best by using the natural learning opportunities that occur within the everyday routines and activities in a child's and family's life. These activities provide ample opportunities for repeated practice over time, which is how young children learn. Within these activities, families engage with their children as they practice new skills and learn.

Once a child is found eligible for Early Intervention, providers assess what the family is already doing that promotes their child's development and what the family sees as challenges. The Early Intervention team then uses an interactive coaching style to share ideas and practice new skills with caregivers who then practice them with their child. Coaching in Early Intervention respects a family's competency and empowers them to support their child's development over time.

¹ IDEA Regulation §303.26

All children leaving Early Intervention go through a transition process that prepares them and their caregivers for what is to follow. For children who are not eligible for special education, or those leaving prior to age 3, the EI team will suggest community-based programs that support healthy child development. For children eligible for special education, the transition process helps families articulate their child's strengths and needs.

Early Intervention providers must incorporate the following principles and evidence-based practices in the provision of early intervention. These nationally recommended and adopted principles and practices are based on the seven "Key Principles" developed under the auspices of the Office of Special Education (OSEP) TA Communities of Practice.² They represent agreement by experts within the field of early intervention regarding a framework for how early intervention should be provided. Rhode Island has added an 8th Principle³.

- 1. Infants and toddlers learn best through everyday experiences and interactions with familiar people in familiar contexts.*
- 2. All families, with the necessary supports and resources, can enhance their children's learning and development.*
- 3. The primary role of the service provider in early intervention is to work with and support the family members and caregivers in a child's life.*
- 4. The early intervention process, from initial contacts through transition, must be dynamic and individualized to reflect the child's and family members' preferences, learning styles, and cultural beliefs.*
- 5. IFSP outcomes must be functional and based on children's and families' needs and priorities.*
- 6. The family's priorities, needs and interests are addressed most appropriately by a primary provider who represents and receives team and community support.*
- 7. Interventions with young children and family members must be based on explicit principles, validated practices, best available research and relevant laws and regulations.*
- 8. Support for families in developing strategies to understand, interpret and nurture their child's development is best achieved through the use of reflective practices.*



² Workgroup on Principles and Practices in Natural Environments (November 2007). OSEP TA Community of Practice-Part C Settings.

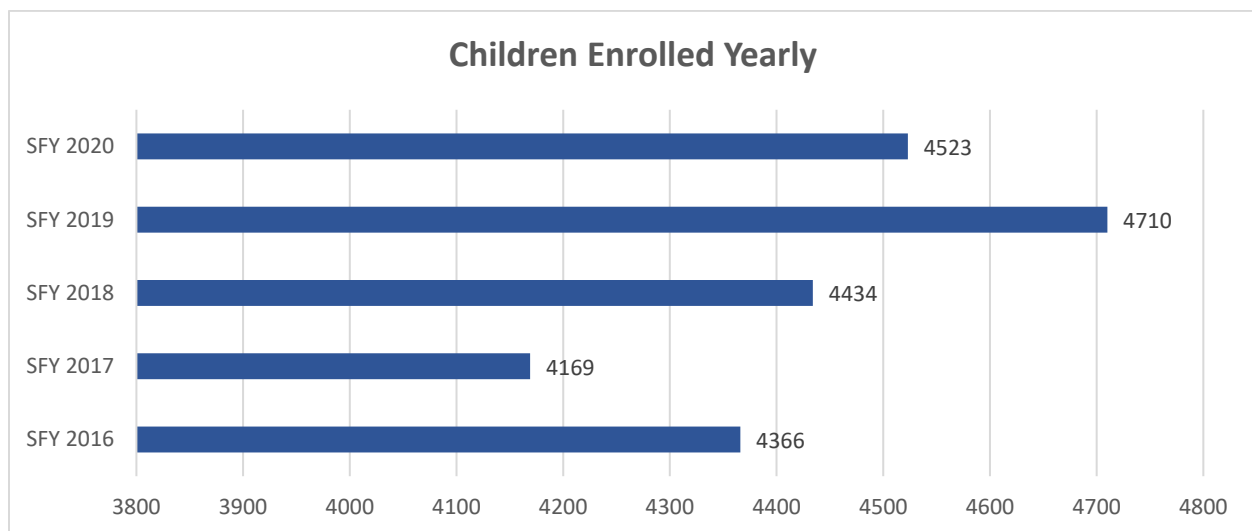
http://ectacenter.org/~pdfs/topics/families/AgreedUponPractices_FinalDraft2_01_08.pdf

³ New Mexico Department of Health; Family Infant Toddler Program, 8th Key Principle: Support for families in developing strategies to understand, interpret and nurture their child's development is best achieved through the use of reflective practices; Key Concepts - The Principle Looks Like/Does Not Look Like. <https://nmhealth.org/publication/view/general/3541/>

How Many Children Does Early Intervention Serve?

The end of SFY 2020 posed a new challenge for the Rhode Island Early Intervention system as it adjusted to the demands of the COVID-19 pandemic. The state, in collaboration with the 9 EI providers in Rhode Island, quickly developed processes and procedures to move to a telehealth model that ensured the continuation of Early Intervention services for families. In doing so, the individual Early Intervention providers also had to adjust to this new way of service delivery, while meeting the state Department of Health and the CDC's restrictions and guidelines of health and safety. EI Programs quickly transitioned to a fully electronic way of doing business, both in-house and with families; adjusted staffing patterns as referrals decreased; and, continued to ensure their programs met state and federal regulations.

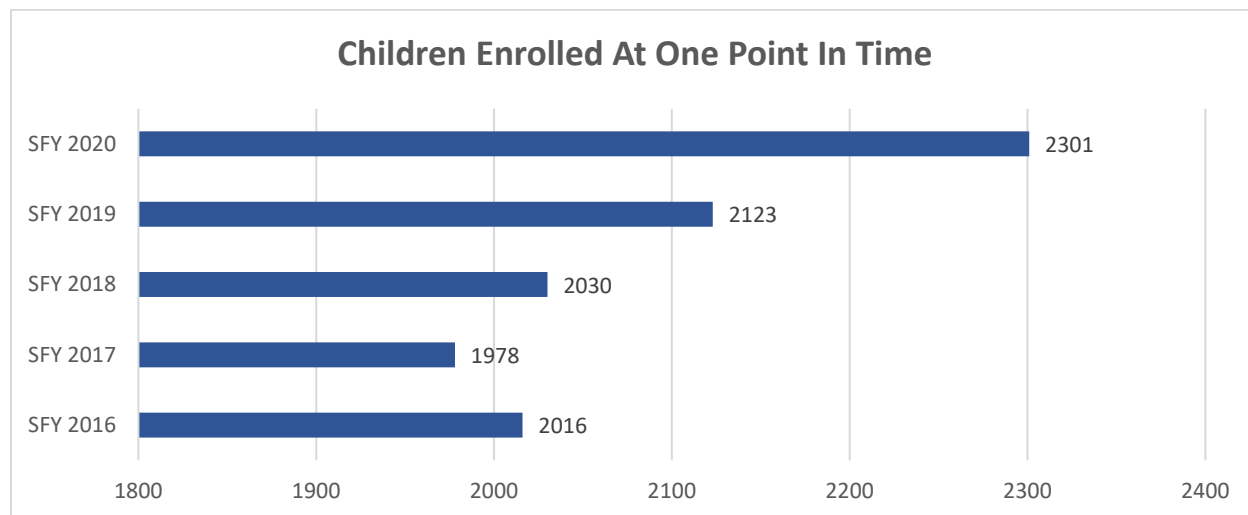
During SFY⁴ 2020, a total of 4,523 children were enrolled in Rhode Island's Early Intervention system. Enrollment was less in 2020 than 2019 as the COVID-19 pandemic began at the end of the third quarter. Providers continue to ensure and maintain high quality and compliance during the COVID-19 pandemic. The Rhode Island Early Intervention system adjusted to a hybrid service delivery model beginning in March 2020 that included the introduction of telehealth services as an option to ensure the health and safety of families and providers, while providing continuity of services. Unlike the decrease in enrollment in 2017 that was thought to have been a possible result of preventive programs such as the family visiting programs through the Rhode Island Department of Health⁵. Neither 2018 data nor 2019 data followed the same pattern. Expanded outreach efforts may have had an impact on the enrollment increases seen in 2018 and 2019.



⁴ SFY is the acronym for State Fiscal Year, July 1, 2019 – June 30, 2020.

⁵ Family Visiting Programs through the Rhode Island Department of Health include First Connections, Nurse Family Partnership, Parents as Teachers, and Healthy Families America

Children enter and exit EI throughout the year. While there was a total of 4,523 children enrolled throughout the year, on a given day⁶, enrollment was:



How do families become involved in Early Intervention services?

Most children are referred to Early Intervention by their parents. In most cases parents have heard about EI from their pediatricians. Other referrals come from hospitals, visiting nurses, DCYF, childcare centers, First Connections⁷ and others.

SFY 2020, Early Intervention received 3,547 new referrals.

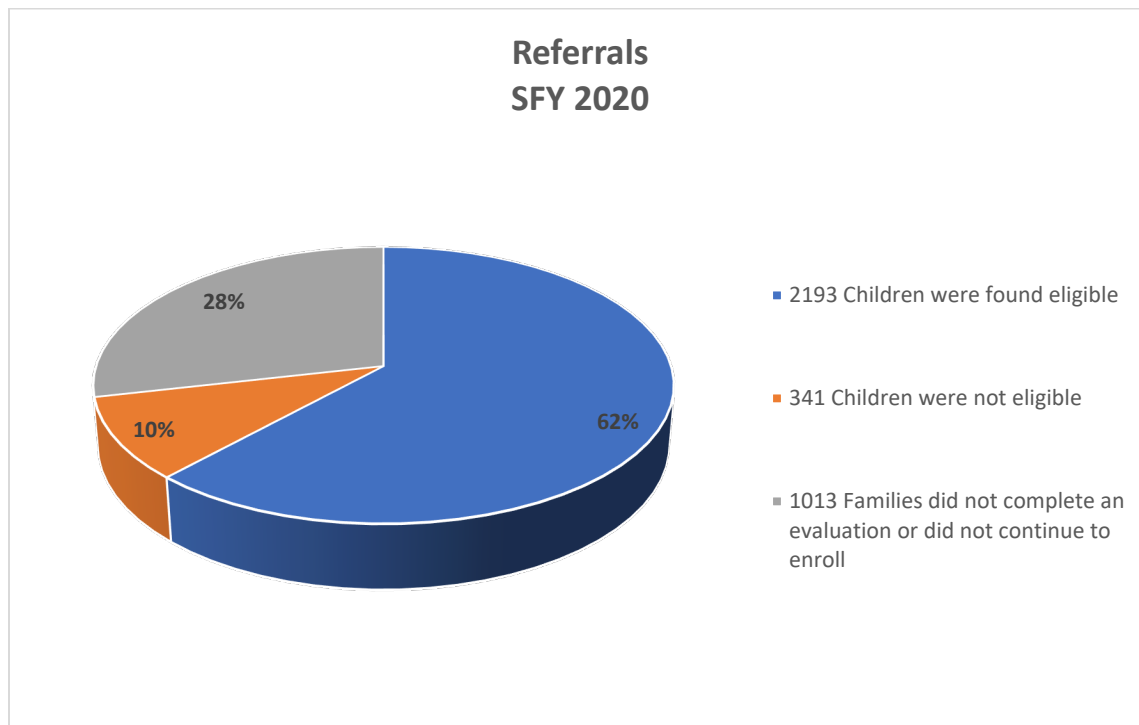
<u>SFY</u>	<u>Number of Referrals</u>
2020	3,547
2019	4,180
2018	3,965
2017	3,729
2016	3,753

Rhode Island's referrals decreased during SFY 2020. During the initial phases of COVID-19, visits to pediatric offices declined and childcare enrollment was limited. Family self-referrals are often encouraged by pediatricians and childcare providers, and the decreased contact with these entities resulted a decrease in self-referrals. An analysis of recent referral data indicates that current referral rates are returning closer to 2019 numbers, and in turn, RI expects its child count to return to 2019 numbers by the end of CY21.

⁶ Data collected on December 1, 2019 (SFY 2020)

⁷ First Connections is a program within the RI Department of Health that provides family visiting and screenings for newborns at risk.

What happens with the referrals made to Early Intervention?



In 2020, Rhode Island ranked 4th in the country for identifying and serving eligible infants and toddlers with disabilities.

Compared to All 50 States and District of Columbia	
Birth – 1 year ⁸ :	5 th
Birth – 3 years ⁹ :	4 th

⁸ 2.93% = 308/10,518 enrolled on December 1, 2019 (SFY 2020)

⁹ 7.14% = 2,301/32,224 enrolled on December 1, 2019 (SFY 2020)



“In conjunction with our son’s team. They helped to concretely translate my [concerns] into a plan.”

— Comment from 2020 Parent Survey

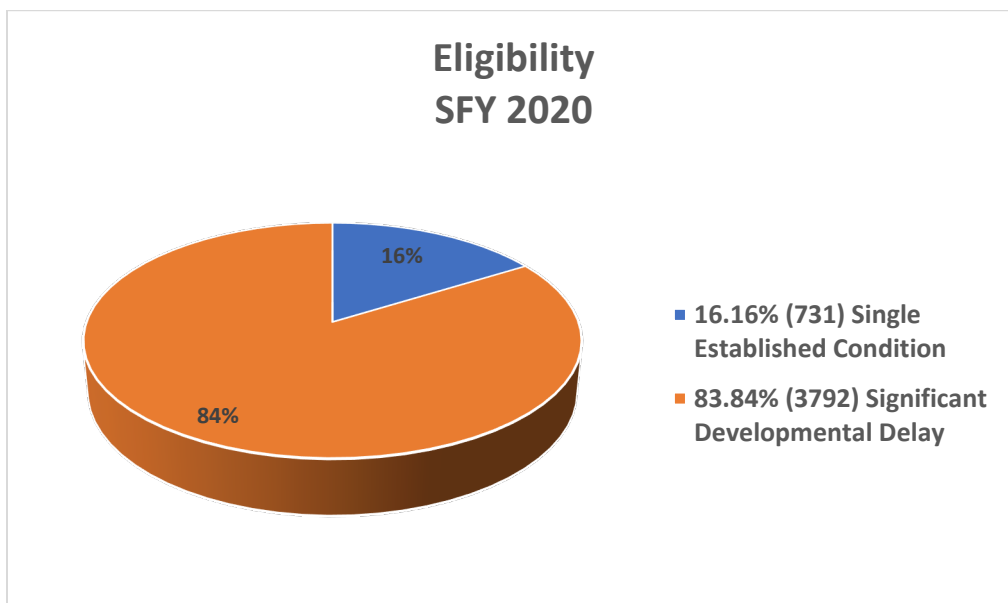
What makes a child eligible for Early Intervention?

Children can qualify for Early Intervention if they meet one of two eligibility categories.

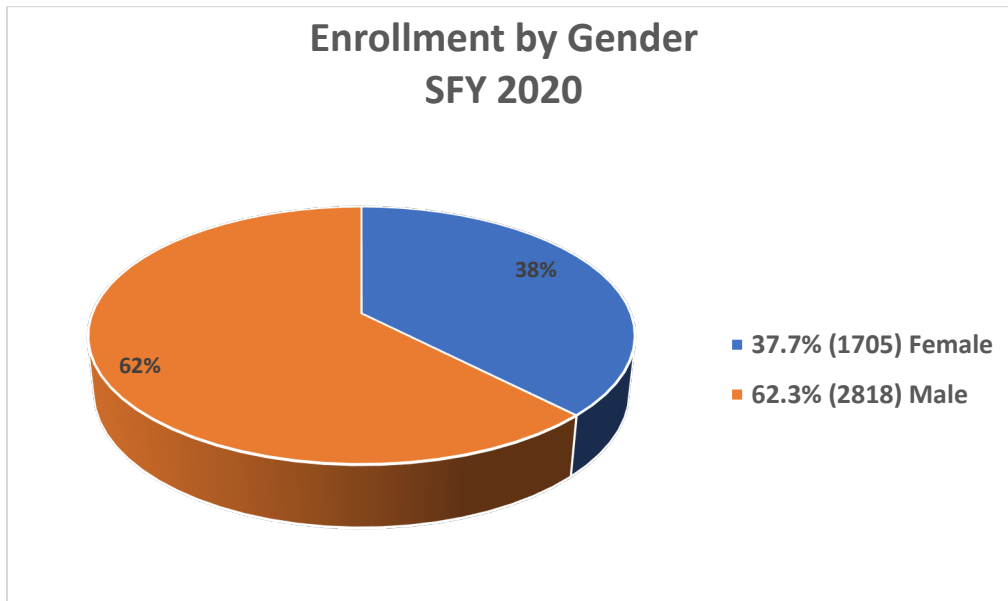
Single Established Condition: A diagnosed condition known to lead to developmental delay. Examples include very low birth weight, visual or hearing impairment, metabolic disorders, Autism Spectrum Disorder, Fragile X Syndrome or Down Syndrome.

Significant Developmental Delay: Evaluation results that are 2 standard deviations below average in at least one area of development or 1.5 standard deviations below average in two or more areas of development. The areas of development evaluated are (1) cognitive, (2) physical (including vision and hearing), (3) communication, (4) social/emotional, and (5) adaptive development. Sometimes the scores on an evaluation tool do not adequately document a child’s skills and functioning throughout his/her day. In situations like this, the evaluation team can use *informed clinical opinion* to determine that a child does have a developmental delay. The team can analyze the evaluation results and consider if a significant delay has not been captured by test scores, or if there are significant atypical behaviors or significant circumstances that have impacted

child/family functioning. Some examples might be significant trauma or losses, multiple placements outside the birth home, or a history of abuse or neglect.



Does a particular gender present greater enrollment in Early Intervention?



Children and families in Early Intervention come from many ethnic backgrounds...

Children Enrolled in Early Intervention, SFY20

<u>Race Ethnicity</u>	<u>Number</u>	<u>Percentage</u>
White	2512	55.54%
Hispanic	1401	30.98%
Black or African American	319	7.05%
Mixed Racial	155	3.43%
Asian	109	2.41%
American Indian or Alaska Native	26	0.57%

...and speak many languages.

<u>Language</u>	<u>Number</u>	<u>Percentage</u>
English	3962	87.60%
Spanish	495	10.94%
10 other languages	66	1.46%

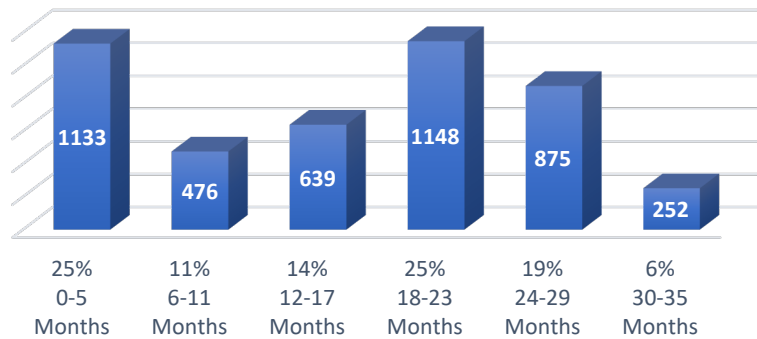
“Desarrollamos las metas con; Esfuerzo, dedicación, y mucho Amor.. también gracias a Interveracion Temprana que influyó mucho con su ayuda y dedicación! Puedo decir que hemos logrado como familia unas metas para bien para nuestros hijos.”
 (“We develop goals with: Effort, dedication, and a lot of Love... also thanks to Early Intervention who influenced a lot with their help and dedication! I can say that as a family we have achieved goals for the good of our children.”)

— Comment from 2020 Parent Survey

The Executive Office of Health and Human Services website (<https://www.eohhs.ri.gov/>) has additional data (*‘Early Intervention Providers’ → ‘EI Certification Standards, Policies and Reports’*) with links to reports regarding the performance of specific Rhode Island Early Intervention programs.

What is the average age of children who become enrolled in Early Intervention?

**Age at Referral for Enrolled Children
SFY 2020**



Who are the children we serve?

Children in Early Intervention come from every city and town throughout RI.

<i>Rhode Island City/Town</i>	<i>Number of Children in RI <3 yrs¹⁰ of Age</i>	<i>No. of Children Enrolled In EI</i>	<i>Percent of Children in EI Relative to Population < 3</i>
Barrington	366	66	18%
Bristol	507	43	8%
Burrillville	460	50	11%
Central Falls	1,028	134	13%
Charlestown	186	28	15%
Coventry	940	101	11%
Cranston	2,318	286	12%
Cumberland	970	158	16%
East Greenwich	299	53	18%
East Providence	1,560	136	9%
Exeter	166	16	10%
Foster	113	11	10%
Glocester	247	22	9%
Hopkinton	258	29	11%
Jamestown	85	7	8%
Johnston	816	103	13%
Lincoln	587	72	12%
Little Compton	68	2	3%
Middletown	502	65	13%
Narragansett	271	17	6%
New Shoreham	21	2	10%
Newport	820	72	9%
North Kingstown	728	86	12%
North Providence	851	112	13%
North Smithfield	290	51	18%
Pawtucket	2,959	346	12%
Portsmouth	429	66	15%
Providence	7,609	1030	14%
Richmond	235	19	8%

¹⁰ 2020 Rhode Island KIDS COUNT Factbook, Population under age 3 is based on Census 2000 and may not reflect increases or decreases in population. Enrollment data for this table is from calendar year 2020.

<i>Rhode Island City/Town</i>	<i>Number of Children in RI <3 yrs¹¹ of Age</i>	<i>No. of Children Enrolled In EI</i>	<i>Percent of Children in EI Relative to Population < 3</i>
Scituate	193	42	22%
Smithfield	402	60	15%
South Kingstown	640	66	10%
Tiverton	398	40	10%
Warren	296	38	13%
Warwick	2,322	269	12%
West Greenwich	178	23	13%
West Warwick	1,044	117	11%
Westerly	726	77	11%
Woonsocket	1,900	240	13%

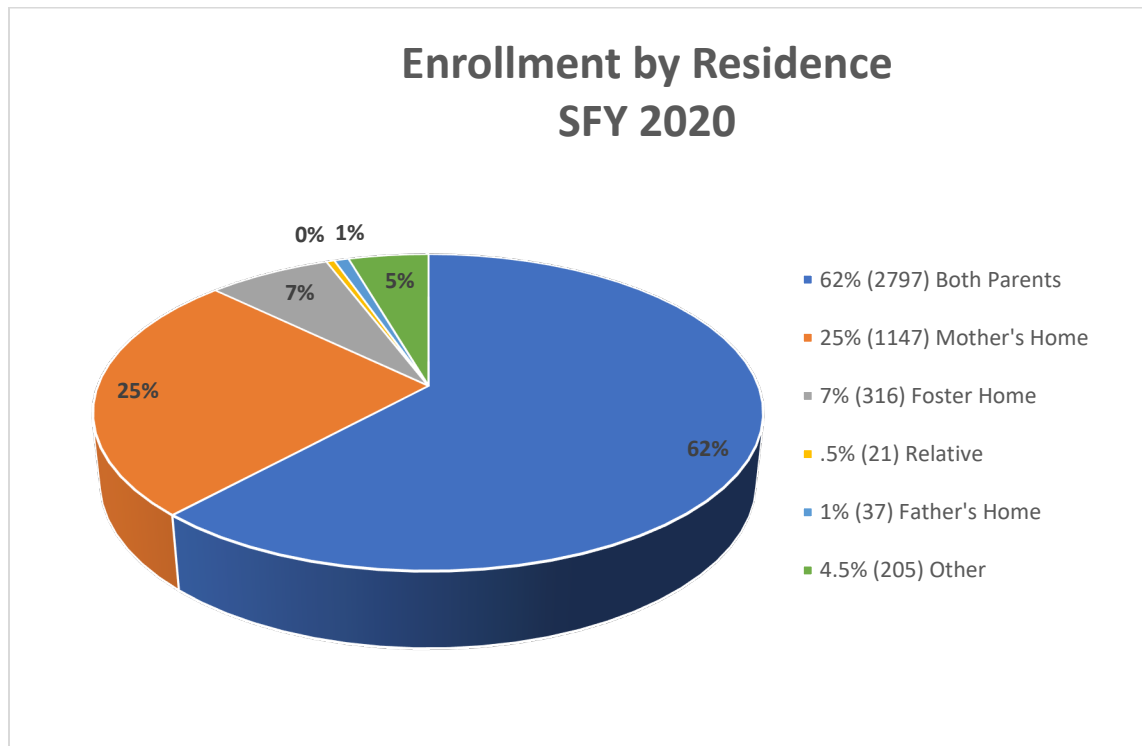
<i>Rhode Island City/Town</i>	<i>Number of Children in RI <3 yrs¹² of Age</i>	<i>No. of Children Enrolled In EI</i>	<i>Percent of Children in EI Relative to Population < 3</i>
Core Cities ¹³	13,496	1,750	13%
Remainder of State	20,292	2,405	12%
Rhode Island	33,788	4,155	12%

¹¹ 2020 Rhode Island KIDS COUNT Factbook, Population under age 3 is based on Census 2000 and may not reflect increases or decreases in population.

¹² 2020 Rhode Island KIDS COUNT Factbook, Population under age 3 is based on Census 2000 and may not reflect increases or decreases in population.

¹³ Core cities are Central Falls, Pawtucket, Providence, and Woonsocket as noted in 2020 Rhode Island KIDS COUNT Factbook.

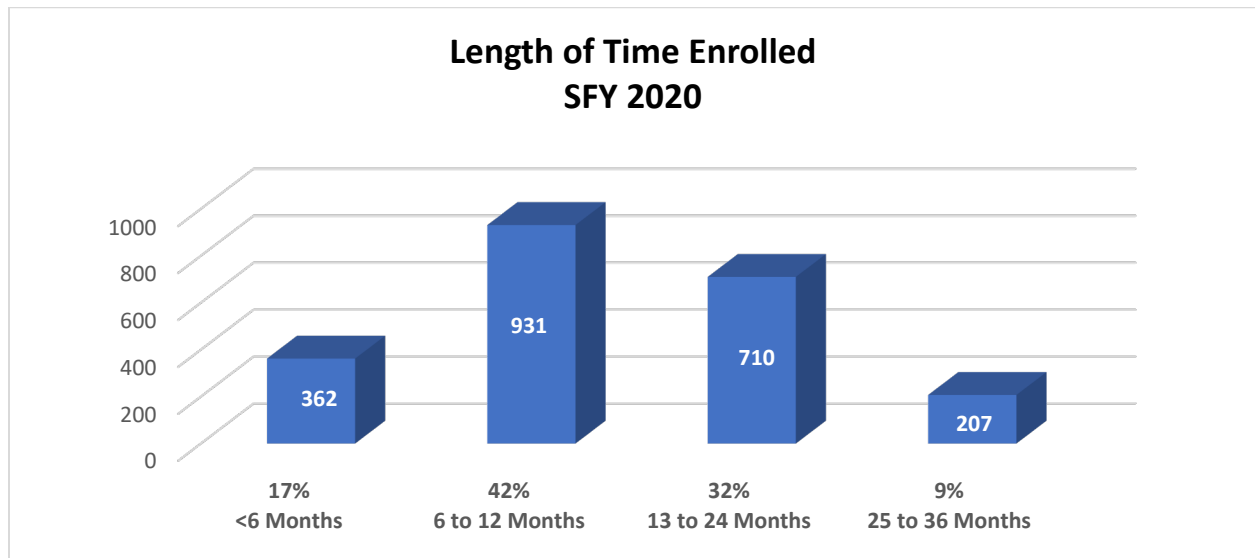
Who do most children in EI live with?



Most children lived in two-parent households (62%), while 25% of children in EI lived with a single parent and 7% resided in foster placement.



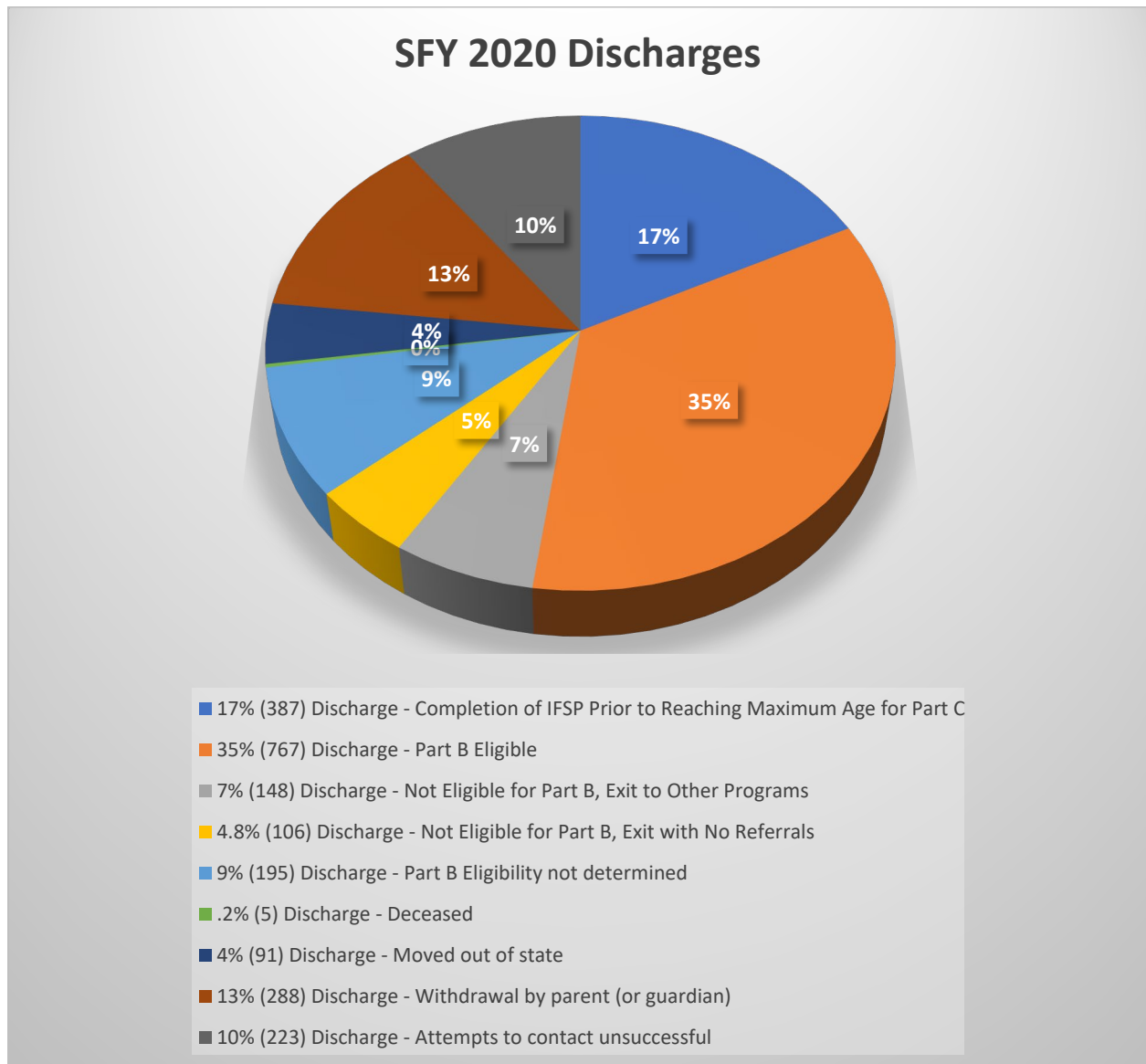
How long do most children stay in Early Intervention?



“All lessons I learned were important, being a first-time mom is very scary. Thank you to everyone for your help and advice.”

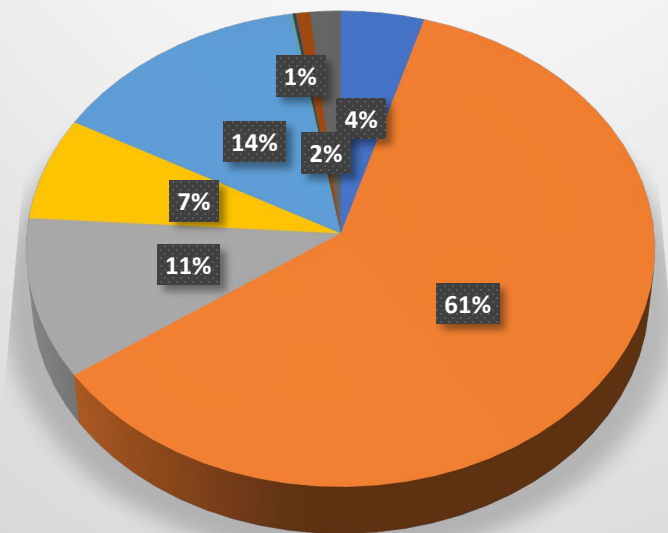
-Comment from 2020 Parent Survey

What are the reasons a child leaves Early Intervention?



Children and their families exit or are discharged from Early Intervention for many reasons prior to age three. 1,311 children exited Early Intervention before enrollment. Some did not qualify for EI and others moved or withdrew based on the family's choice. 2,210 children discharged after enrollment. Some no longer qualified for EI, some met their goals and no longer needed EI services, and others moved or withdrew based on the family's choice.

SFY 2020 Discharges at age 3



- 5% (54) Discharge - Completion of IFSP Prior to Reaching Maximum Age for Part C
- 61% (719) Discharge - Part B Eligible
- 10.2% (128) Discharge - Not Eligible for Part B, Exit to Other Programs
- 7% (83) Discharge - Not Eligible for Part B, Exit with No Referrals
- 14% (169) Discharge - Part B Eligibility not determined
- .1 (1) Discharged - Deceased
- .2% (2) Discharge - Moved out of state

When the child turns 28 months of age, the EI team and family meet and begin planning the transition process. Some children will transition to community-based preschools or other programs designed for young children. Others will qualify for Special Education services through their local school district. All children and their caregivers go through a transition planning process before they exit Early Intervention. 1,185 children left Early Intervention at age 3.

Of the children who were 3 years old when they discharged in SFY 2020, 61% qualified for Special Education Services and related services through their local school departments. Special Education regulations are outlined in IDEA Part B.

Children will...

- *Demonstrate positive social emotional development (including positive social relationships)*
- *Acquire and use knowledge and skills, including early literacy skills*
- *Use appropriate behaviors to meet their needs*



How Do We Measure Success?

National goals have been developed for Early Intervention which RI reports on annually. The goals are developing positive social relationships, acquiring, and using knowledge and skills, and taking appropriate actions to meet needs.

Our Early Intervention program provides services to infants and toddlers with a wide range of delays and disabilities, including children with severe disabilities and degenerative conditions. For children with severe disabilities, skills will grow slowly; some children may even lose skills. For other children, the interventions help them catch up with their peers. Our data shows a high percentage of children who had greater than expected growth during their time in the program and a substantial percentage of children who were within age expectations when they left Early Intervention.

Additional data shows that nearly all children acquired new skills during their time in the Early Intervention program (nearly all children made developmental gains—98.53% to 98.81% across all outcomes.)

Demonstrate positive social and emotional development including social relationships:

- ***98.53% of children made gains***
- ***49.87% made significant gains***
- ***46.42% left within age expectations***

Acquire and use knowledge and skills, including early literacy skills:

- ***98.67% of children made gains***
- ***55.58% made significant gains***
- ***36.40% left within age expectations***



Families will...

- *Understand their children's strengths, abilities, and special needs*
- *Know their rights and effectively communicate their children's needs*
- *Help their children develop and learn*

Using appropriate behaviors to meet their needs:

- ***98.81% of children made gains***
- ***62.10% made significant gains***
- ***46.42% left within age expectations***

During their time in Early Intervention, families grow along with their children. As providers, we see families go through the various stages of grief, anger, realization, understanding, acceptance, and empowerment.

Through this journey, we want to be sure parents leave EI with the knowledge, skills, and resources so they may continue supporting their child's development.

Family outcomes are assessed annually by responses¹⁴ to our parent survey, administered by RI Parent Information Network (RIPIN).¹⁵

92.48% of families told us that Early Intervention helped them communicate effectively about their child.

88.69% of families told us that Early Intervention helped them to understand their rights within the EI system.

89.98% of families told us that Early Intervention helped them understand how their child develops and learns.

"We absolutely love [EI TEAM MEMBER]!! She helped us in home and, since COVID, we have been doing virtual sessions. She has given us guidance on how to get our daughter to stand, to walk, to run(!) And now we are working on going up (and down) stairs."

¹⁴ 2020 survey response rate was 39.26%.

¹⁵ RIPIN is available to assist individuals, parents, and families by providing information, education, training and support.

What Are Other Measures We Report On?

We report annually to the Office of Special Education Programs and have included many of those measures earlier in this report. Below are additional measures for SFY 2020.

<i>The percent of infants and toddlers with an Individual Family Service Plan (IFSP) who receive the Early Intervention Services on their IFSPs within 30 days</i>	<i>95%</i>
<i>The percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community setting(s)</i>	<i>99%</i>
<i>The percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within 45 days</i>	<i>97%</i>
<p><i>The percent of all children exiting Part C who received timely transition planning to support the child's transition to Early Childhood Special Education and other appropriate community services by their third birthday including:</i></p> <ul style="list-style-type: none"> <i>• Development of an IFSP with transition steps and services at least 90 days prior to the toddler's third birthday</i> <i>• Notification to the Department of Education and the school district where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services</i> <i>• Transition conference held with the approval of the family at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Early Childhood Special Education services.</i> 	<p><i>99%</i></p> <p><i>100%</i></p> <p><i>100%</i></p>

Financing Early Intervention in Rhode Island

Total Cost: \$16.5m

Funds to implement required components of the EI system: **\$2.4M (14.5% of total cost)**

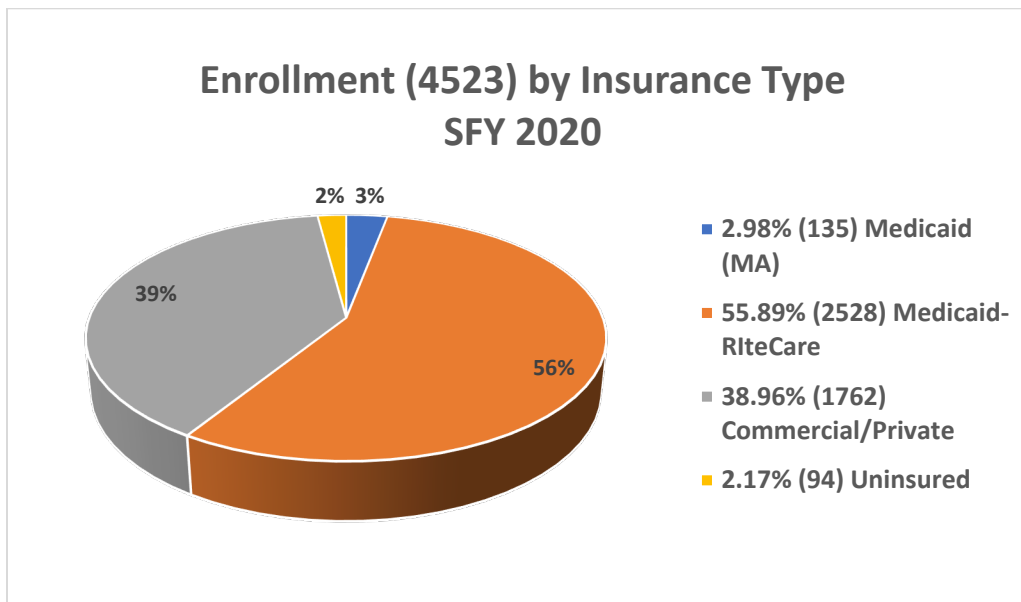
Direct services to children and their families: **\$14.1M (85.5% of total cost)**

Who pays for Early Intervention?

Early Intervention is paid for using a combination of state and federal funds and the use of public and private insurance. Rhode Island annually applies for and receives a Part C (Early Intervention) federal grant from the Office of Special Education Programs of approximately \$2.3 million. These funds are used to implement the required components of the EI system in RI, including: a comprehensive child find and referral system, public awareness, a comprehensive system of personnel development, general administration and supervision, a system for compiling data on the Early Intervention system, administration of the Early Intervention Interagency Coordinating Council, and the development and implementation of policies and procedures to meet the requirements of Part C of the Individuals with Disabilities Education Act.

Families receive all Early Intervention evaluations, services and supports at no cost. RI State Statute §27-18-64 requires private and public insurers based in Rhode Island and providing coverage for dependent children to cover the cost of Early Intervention services. Plans may not include deductibles, copays, or coinsurance.

Rhode Island residents may have employer sponsored health benefit plans or “self-insured” plans that are exempt from Rhode Island State law, but these plans must follow federal law. Any Early Intervention service not covered by health insurance or health benefit plans exempt from Rhode Island State law including deductibles, copays or coinsurance is funded using public and Part C funds.





**Rhode Island Executive Office of Health
and Human Services**

Jennifer Kaufman, Part C Coordinator
Chief, Family Health Systems
Part C Coordinator

Families can choose Early Intervention (EI) providers who serve the city/town in which they live. By utilizing one of these providers, families will work with professionals who have the best knowledge of services, activities, and educational opportunities within their community.

Rhode Island Early Intervention Providers

Children's Friend & Service
621 Dexter Street
Central Falls, RI 02863-2603
Ph: 401-721-9200

Community Care Alliance
8 Court Street
Woonsocket, RI 02895-3123
Mailing Address: PO Box 1700
Woonsocket, RI 02895
Ph: 401-235-7000
Referral Line: 401-235-6029

Easter Seals, RI
320 Phillips Street, Unit D #103
North Kingstown, RI 02852
Ph: 401-235-6029

Family Service of RI
134 Thurbers Avenue
Providence, RI 02905-4754
Ph: 401-331-1350
Referral Line: 401-519-2307

**Groden Center Early
Intervention**
610 Manton Avenue
Providence, RI 02909
Ph: 401-525-2380

Looking Upwards, Inc.
2974 East Main Road
Portsmouth, RI 02871
Mailing Address: PO Box 838
Portsmouth, RI 02871
Ph: 401-293-5790

Meeting Street
1000 Eddy Street
Providence, RI 02905
Ph: 401-533-9100
Referral line: 401-533-9104

Seven Hills Rhode Island
178 Norwood Avenue
Cranston, RI 02905
Ph: 401-921-1470

**J. Arthur Trudeau
Memorial Center**
3445 Post Road
Warwick, RI 02886
Ph: 401-823-1731

Early Intervention Supporting Partners

**Paul V. Sherlock Center on Disabilities
EI Training and Technical Assistance Center**
Rhode Island College
600 Mt. Pleasant Avenue
Providence, RI 02908
Ph: 401-456-8072 Fax: 401-456-8150
TDD: 401-456-8773

Rhode Island Parent Information Network (RIPIN)
300 Jefferson Boulevard, Suite 300
Warwick, RI 02888
Ph: 401-270-0101 Fax: 401-270-7049

Inter-Agency Coordinating Council

2020 ICC Membership

<p>Deborah Masland, Chair <i>Advocacy Representative, Director of Peer Support Rhode Island Parent Information Network</i></p> <p>Darlene Magaw, Vice-Chair <i>Provider Representative, Program Manager Community Care Alliance</i></p> <p>Jennifer Kaufman <i>Executive Office of Health and Human Services Chief, Family Health Systems Part C Coordinator</i></p> <p>Colleen Ann Polselli BA, BS <i>Special Needs Program Manager Office of Special Needs Health Equity Institute RI Department of Health</i></p> <p>Leslie Bobrowski <i>Personnel Preparation Director, Comprehensive System of Personnel Development Sherlock Center on Disabilities at Rhode Island College</i></p> <p>Joe Carr <i>Department of Children, Youth & Families Representative Early Childhood Specialist</i></p> <p>Carol LaFrance <i>Provider Representative Early Intervention Program Director Grodin Center Early Intervention Program</i></p> <p>Jacqueline Ferreira <i>Provider Representative Director, J. Arthur Trudeau Early Intervention Program</i></p>	<p>Evan Ortiz <i>Family Representative</i></p> <p>Christine Branch, Head Start <i>Disabilities Coordinator Tri-Town Community Action</i></p> <p>Dr. Yvette Yatchmink <i>Pediatrician Children's Neurodevelopment Center</i></p> <p>Victor Woods <i>State Insurance Agency Representative Health Economic Specialist Office of the Health Insurance Commissioner</i></p> <p>Pat Maris <i>Personnel Preparation Technical Assistance Specialist Sherlock Center on Disabilities at Rhode Island College</i></p> <p>Michelle MacIntosh <i>Family Representative</i></p> <p>Ruth Gallucci <i>Rhode Island Department of Education Education Specialist: Early Childhood Special Education</i></p> <p>Carolyn Souza <i>Provider Representative Children's Program Director Looking Upwards, Inc.</i></p> <p>LeeAnn Barrett <i>Rhode Island Kids Count</i></p> <p>Joanne Quinn <i>Autism Project of Rhode Island</i></p>	<p>Sandra Riviera <i>Family Representative</i></p> <p>Laurie Farrell <i>Provider Representative Director, Seven Hills Early Intervention</i></p> <p>Natalie Redfearn <i>Provider Representative Director of Programs Children's Friend and Service</i></p> <p>Tara Hayes <i>Family Voices Family Voices Manager Rhode Island Parent Information Network</i></p> <p>Sue Hawkes <i>Provider Representative Director, Easter Seals Early Intervention</i></p> <p>Casey Ferrara <i>Provider Representative Director of Early Childhood Programs Meeting Street</i></p> <p>Kristine Campagna <i>Manager, Newborn Screening and Early Childhood Programs Rhode Island Department of Health</i></p> <p>Monique DeRoche <i>Provider Representative Director of Early Intervention Family Service of Rhode Island Supervisor</i></p>
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Daniel McKee, Governor

Womazetta Jones, Secretary,
Executive Office of Health and Human Services

Jennifer Kaufman, Chief, Family Health Systems,
Part C Coordinator
Executive Office of Health and Human Services

Executive Office of Health and Human Services
Early Intervention Program
Virks Building, 3 West Road
Cranston, RI 02920



Funding provided under Part C, Individuals with Disabilities Education Act, through
the Department of Education Office of Special Education Programs.