

Testimony Provided by Dr. Michelle Hathaway, Senior Director
The Margaret Murphy Centers for Children, John F. Murphy Homes, Inc.

I am Testifying In Support of LD 1309

*An Act to Clarify Requirements for Payment of Tuition for Children with Disabilities by the
Department of Education's Child Development Services System*
Joint Standing Committee on Education and Cultural Affairs
April 13, 2023

Good afternoon, Senator Rafferty, Representative Brennan, and members of the Committee on Education and Cultural Affairs. Thank you for the opportunity to offer testimony in support of LD 1309.

My name is Michelle Hathaway, Senior Director of the Margaret Murphy Centers for Children, owned and operated by John F. Murphy Homes, Inc. As the founder of MMCC, I have grown our Children's Services to include seven special purpose private schools, providing education to children in our Saco, Randolph, Auburn and Lewiston locations. Our schools provide intensive educational and clinical services to the children in Maine who are considered to have the highest level of need- behaviorally and developmentally. Although known for our work with children with autism, our students have a wide range of developmental disabilities, emotional and behavioral disorders, and rare genetic disorders. We are willing and able to accept the children with the most severe of needs- and our students find great success with our highly trained, teachers and clinicians who specialize in providing the highest level of educational and clinical services.

As I speak, we provide services to nearly 250 children in the State of Maine. Unfortunately, at this time, only twenty of this children are children with special needs, between the ages of two to five. This is why I am here today, to speak in support of LD 1309.

Early Intervention has always been a passion of mine. I began working in this field almost 30 years ago...and spent many hours working with babies, toddler and pre-schoolers. I opened the Margaret Murphy Centers and expanded that work to include students through the age of 22....but I have long maintained a deep passion for the youngest of our students. Their first introduction to therapy and education must be done well and with developmentally appropriate practices, or we run the risk of turning them off to the very education and learning opportunities that may change their lives in so many positive, meaningful and measurable ways. Although they may be two when they enter our doors, we are planning for their success as adults.

When working with young children, in the field of early intervention, the research is clear that the work we do is critical. Brain plasticity and rapid growth allows us to develop new connections and to actually change the brain...and allow for connections and growth not as readily made just a few short years later in their lives. This time period for intervention and education allows for opportune growth and change...skill acquisition, emotional regulation, communication...all necessary and life-long skills. In many cases, early intervention in turn reduces the further need for lifelong care and often, intervention can be reduced or stopped completely....all due to the work done before the age of six.

Current lack of early intervention services in the State of Maine is a travesty to children and families. It is a critical issue that will lead to lifelong and negative impact for the many children who are grossly

underserved or not served at all....with children on wait lists for well over two years...and counting. The impact to families, to communities and to our already, over-taxed service system will be felt with tremendous impact. We are already receiving frantic calls and pleas for help as these children enroll in kindergarten for the Fall. It is with harsh realization, and the recognition of what has already been lost, that our School Administrators are now scrambling to provide for children who have not even begun to access desperately needed services. I want to be clear today that although the impact of COVID led to an accelerated decimation to our system, we have been breaking for many years. The topic before you today has been on the table for nearly a decade...and COVID finally pushed us off the cliff of a crisis that was long looming.

Why is there now such a critical shortage of early intervention providers in the State of Maine? We simply cannot afford to operate within the long antiquated, broken funding system within the birth to five realm. I will attest, as will many others before you, that we have systematically, and with regretful intentionality, decreased our classrooms for pre-schoolers with special needs shrunk our enrollment sizes, and in many instances, closed early intervention programs altogether. For those of us still in operation, holding on to our philosophical beliefs and desire to make life changing impact, we are hoarding money away from other programs, short changing staff in pay and benefits, and running fund raisers and capital campaigns as a side hustle to foot the loss we experience due to lack of sufficient provider payment, and specifically, the absence of tuition.

Children, with significant diagnosis' of autism or cerebral palsy or global developmental delay or Rhett's Disorder found themselves suddenly without treatment in the last two years, as programs across the State had struggled to re-open after COVID, operated for a few months, and then began to close-permanently. Even with months of notice, as providers fell further into debt, families were unable to secure other pre-school programs as they frantically searched for alternatives. As a provider, I closed our pre-school wait list two years ago, capping at 80 children, because I knew we would never move those kids into our system. There wasn't enough time for 20 slots I had reduced our program to. As a provider, this eats away at me, many days and nights. I know what the cost of this will be to families and children across the State.

As a clinician, I know that when a child receives a diagnosis, such as Autism, it is also comes with the caveat that a family needs to act quickly. The accepted recommendation, endorsed by years of research and tied explicitly to best, long term outcomes, is to access, minimally, 25 hours of intensive educational services each week. The sooner, the better. Most parents, while wading through the waves of grief, denial, anger and sadness....must try to secure a desperately needed pre-school placement for their child. In Maine, and for many years now, those parents have found themselves, and their child, on an extensive wait list...a wait list that has in many cases been years long without much movement. Years. Imagine knowing that your child desperately needs a critical service and knowing that it isn't accessible. Although we have many families who frequently call us on our waitlist, one particular mother has called once a week, without fail, for two consecutive years- 25 months in fact. Two years. He turns five this summer and we told her this week that we can finally enroll him at the end of the Summer. I truly don't know if the her tears on the phone were of relief, or despair at the years already lost. I want to be clear that we encouraged her to take any spot, anywhere, that came along...and not a single placement has opened in two years that has been able and willing to take him in.

The lifelong impact to this child, for delayed intervention and education, will likely never fully be known. I assure you, that any clinician will predict, with certainty, that this delay will lead to different prognosis and outcome. The severity just cannot be fully measured.

We are here today because there is a solution. The good news is that there are providers still hanging on. We, as an agency, are open. We want pre-k students. We maintain a waitlist of pre-k students who still are need of placement despite having closed the list two years before. With appropriate reimbursement, we are willing to invest in our infrastructure, our staff and our facilities so that we can enroll many more students. We are willing to do this with speed and efficiency if we are reimbursed to do so. If the structures for k-12 programming reimbursement were in place at the pre-k level, we would have a more robust and expansive early intervention system. Tuition dollars would allow this. Tuition payments support the necessary costs of Special Ed teachers, materials, equipment, specialty training, and in full honesty, electricity and oil. We literally have to keep the lights on to educate children. We are asking for the critical funding that would allow us to provide for a population that we are passionate about...and for a population of children in our State that desperately need our educational services and opportunity. The quality of their lives and the opportunities in their future depend on it.

With respect and gratitude for your consideration,

Michelle Hathaway, PsyD., BCBA

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