

February 27, 2024

Re: Testimony NFNA LD 345

Chair Rafferty, Chair Brennan, Distinguished Members of the Joint Standing Committee on Education and Cultural Affairs:

My name is Alan Cobo-Lewis. I live in Orono. I am director of the Center for Community Inclusion and Disability Studies (CCIDS) at the University of Maine. I am also the parent of two 23-year-olds, one of whom has autism. I also co-chaired one of the several task forces empaneled by the Legislature over the years to make recommendations and propose legislation about Child Development Services.

CCIDS is Maine's federally funded University Center for Excellence in Developmental Disabilities (UCEDD, pronounced "YOU-said"), authorized by the federal Developmental Disabilities Assistance and Bill of Rights Act of 2000 ("DD Act"). The purpose of the national network of UCEDDs is to provide leadership in advise federal state and community policy leaders about, and promote opportunities for individuals with developmental disabilities to exercise self-determination, be independent, be productive, and be integrated and included in all facets of community life. Part of the federal mandate of CCIDS is to educate and advise policymakers, including members of the state legislature. Consistent with CCIDS responsibilities under the DD Act and consistent with University of Maine Board of Trustees policies [212](#) and [214](#), I am submitting material pertaining to LD 345 for myself and for CCIDS, not for the University of Maine or the University of Maine System as a whole.

For convenience, attached to this written testimony is the written testimony I submitted last week on Part W of the supplemental budget, giving a broad overview of several issues. Today I will dive in a little deeper on two specific issues: inclusion and data.

1 Inclusion

I appreciate the emphasis on inclusion of children with disabilities in the [Department's LD 1528 report](#) to the Committee (13 relevant hits on the words "inclusive" and "inclusion"). I suggest that children with disabilities—and all children—would benefit if LD 345 or Part W were amended to reflect that emphasis.

1.1 Inclusion Credential

I also want to bring to the Committee's attention and to the Department's attention the role that the University of Maine System could play in meeting the need for inclusion. In addition to the degree-granting teacher prep programs, three relevant resources are:

- The [Micro-Credential in Inclusive Education PreK-12](#) (\$50 for one-day in-person summer institute 2 CEUs). Developed jointly by personnel from CCIDS and University of Maine at Farmington
- [Maine Inclusion Credential](#). Developed by in a collaborative relationship among Maine Roads to Quality Professional Development Network, CCIDS, Maine DHHS Office of Child and Family Services. Has inclusion-specific training and cohort support to develop the portfolio for the credential.
- Inclusive Practices Training Used For Preschool Development Grant (PDG). Training & Technical Assistance for Public Preschool (Pre-K) Programs. See [MDOE Newsroom announcement](#).

1.2 Inclusion Specialists

To support the emphasis and implementation of increasing LRE through inclusion, each CDS Regional Support Hub should offer regional inclusion consultation. This could be through direct employment or contract. Inclusion consultants are specialists with expertise in inclusive environment assessment; providing training related to inclusive practices; and creating and supporting implementation of technical assistance plans to support inclusion, as well as the broader early care and education system. An inclusion consultant for the 3-5-year-old group should have expertise in inclusion in both early care and public school environments and practices. Services available to SAUs by regional inclusion consultants should include, at a minimum:

- Administration of Readiness Assessment
- Individualized planning, training, and other technical assistance to help SAUs and their community meet the requirements of the Readiness Assessment
- Training with wraparound technical assistance, using Maine-based initiatives that support broad knowledge of the span of birth-5 and public school inclusive practices with required staff participation of people who will interact with children with disabilities (leadership, special education teachers, general education teachers, educational technicians, and discipline-specific providers of related services)
- Advising SAUs as to expectations for inclusive, high-quality inclusive early childhood programs, including program standards that define inclusion
- Assisting SAUs to address any challenges creating barriers to inclusion
- Supporting the assessment and implementation of principles of “universal design for learning” appropriate for educating all of Maine’s 3-5-year-olds with and without disabilities
- Maintaining, referring, and providing access to a hub of expanded universal resources such as offered through Maine’s Expanding Inclusive Opportunities (MEIO) Initiative (see [MEIO toolkit](#) at CCIDS)

1.3 Inclusive Programming

Community resources (child care) can help SAUs achieve the capacity required to serve 3-5-year-olds with disabilities. Statute can be written to clarify that public resources can be used to subsidize non-disability-specific slots in those programs so that children with disabilities can be served in an inclusive setting (so the setting doesn’t have to convert to a segregated “special purpose” program). This would be especially helpful where public pre-K lacks capacity.

2 Data and Monitoring

Moving responsibility for early childhood special education to SAUs presents an opportunity, but it is critical that CDS or DOE have robust monitoring and data reporting in place to ensure that the current crisis is addressed rather than being hidden. Statute should either define specific metrics (the most critical of which is % of children receiving all the services on their IEP) or require DOE to undergo major substantive rulemaking to refine such metrics and the processes through which they will be applied. (Emergency major substantive rules could also be authorized if necessary to meet timelines envisioned by the Committee.) Data should be posted publicly and shared with the Committee on at least an annual basis.

February 21, 2024

Re: Testimony NFNA LD 2214 Part W (the sections on transferring responsibility for Early Childhood Special Education from CDS to SAUs)

Chair Rotundo, Chair Sachs, Distinguished Members of the Joint Standing Committee on Appropriations and Financial Affairs, Chair Rafferty, Chair Brennan, Distinguished Members of the Joint Standing Committee on Education and Cultural Affairs:

My name is Alan Cobo-Lewis. I live in Orono. I am director of the Center for Community Inclusion and Disability Studies (CCIDS) at the University of Maine. I am also the parent of two 23-year-olds, one of whom has autism. I also co-chaired one of the several task forces empaneled by the Legislature over the years to make recommendations and propose legislation about Child Development Services.

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I appreciate the Administration's efforts to improve services and supports to young children with disabilities, especially since so many Maine children are going without the Free Appropriate Public Education in the Least Restrictive Environment (FAPE in the LRE) to which they are entitled under state and federal law. While Part W represents a start, there are several significant issues with the language that must be addressed in order for these children to finally **receive and benefit from** FAPE in the LRE.

1 Support Hubs, Not Service Hubs

Part W proposes to transition CDS sites to "service hubs" aligned with superintendent districts. This designation reinforces discussions I have heard in some circles about starting up regional segregated programming, denying children with disabilities access to the LRE in which their typically developing peers receive an education. In her February 1 briefing to the Education Committee, Commissioner Makin spoke with some admiration of Ohio's OCALI model, which would actually represent "**support hubs**"—giving SAUs the **resources** they need in order to provide FAPE in the LRE—resources including training (including training in inclusive education), technical assistance, and access to consultation such as from board certified behavior analyst (BCBAs) or on effective use of assistive technology including augmentative communication (aug com). I suggest that Part W be amended throughout to change "service hub" to "support hub" to reflect this more inclusive vision and that the responsibilities of the support hubs be more fully articulated in Part W to reflect this responsibility.

2 Monitoring

Existing 20-A MRSA §7209.4.E requires significant programmatic reporting by CDS on issues including unmet needs and partially met needs. Such monitoring and data reporting is critical—it is largely responsible for highlighting the unmet needs that so many young Maine children with disabilities are currently experiencing. While Part W does not repeal this section itself, Part W would render it inapplicable in SAUs that take over responsibility for providing FAPE in the LRE. To ensure continued monitoring and reporting (including sharing data with the Legislature and the public), Part W should be amended to require CDS or DOE to collect and report detailed information—with the same level of specificity as in existing CDS statute—on the extent to which children in early childhood special education are receiving all the services and supports on their Individualized Educational Programs (IEPs). Without such a system, we will never know whether Part W solves the problem or just sweeps it under the rug.

3 Unmet Needs

On a related note, current unmet needs among 3-5-year-olds with disabilities are substantial—failing these Maine children and putting Maine out of compliance with the federal Individuals with Disabilities Education Act (IDEA). Part W should include provisions—including appropriations—to address this ongoing crisis. This means (i) compensatory education to children with past, present, and future unmet needs, (ii) an articulated and funded plan to end those unmet needs, and (iii) an ombuds process to assist families of children experiencing such unmet needs.

4 Breaking State Government Silos, Accessing Community Resources

So many early childhood experiences occur outside of school—including in child care programs regulated by DHHS. Inclusive programming should make use of such settings, and the support hubs should support such settings when they are helping SAUs fulfill their obligation to provide FAPE in the LRE. Part W should be amended to make such requirements explicit.

5 MaineCare and Private Health Insurance

With parental consent, MaineCare can cover some programming available as part of early childhood special education. In addition, state-regulated health insurance is required by law to cover “autism treatment” including behavioral interventions (and federally regulated insurance frequently provides similar coverage). These offer significant resources to help the state meet its obligations to provide FAPE in the LRE. But billing MaineCare and private health insurance is not simple. And ensuring fully informed parent consent can be delicate. Part W should be amended to require the support hubs or DOE to accomplish these tasks for SAUs.

6 Conclusion

With suitable amendments, Part W could set young Maine children with disabilities up for future success. And appropriate monitoring and reporting could give us all the data we need to be able to confidently celebrate that success with validity. It is my hope that the Legislature will work with stakeholders from the disability community to craft such amendments (amendments to Part W and/or refined language in LD 345, which the Education Committee has scheduled for public hearing next week and which could be used as a vehicle for language improved from what Part W currently proposes).