

Surveys of Advisory Committee Levels of Agreement LD 255 & LD 386

Respondents in general

- LD 255 8 or 12 respondents (67% response rate)
- LD 386 11 of 15 respondents (73% response rate)

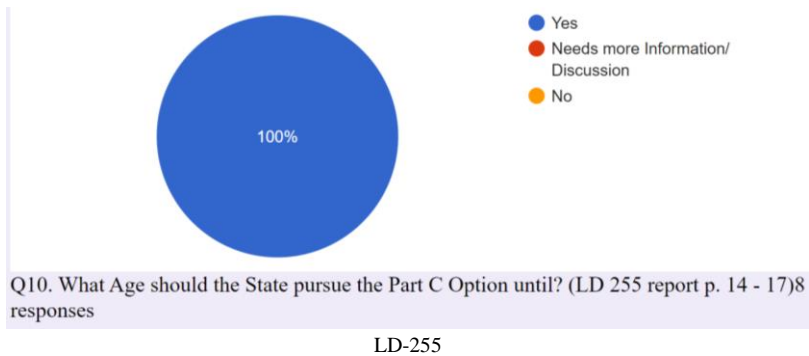
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Full Agreement

- **Pursue Extended Part C Option:**

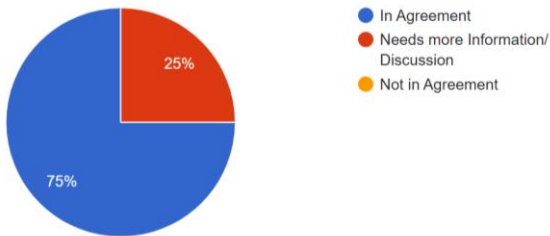
- LD 255: Q9. *Do you think Maine should pursue the Extended Part C Option?* (LD 255 report p. 14 - 17): 100% In Agreement (note age to transition is mostly NOT in agreement)



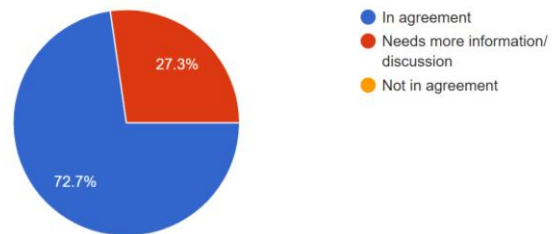
Mostly In Agreement

Centralized Billing:

- LD 255: *Q1. Are you in agreement with the State implementing a Centralized Billing System (CBO) for all eligible children from birth through grade 12?* (LD 255 report p. 2 Table 1): 75% In Agreement. 25% Needs more information/discussion.
- LD 386: *Q1. Are you in agreement with the State implementing a Centralized Billing System (CBO) for all eligible children from birth through grade 12?* (LD 135 report & LD 386 report p. 2 & 13): 72.7% In Agreement, 27.5% Needs more information/discussion



LD 255



LD 386

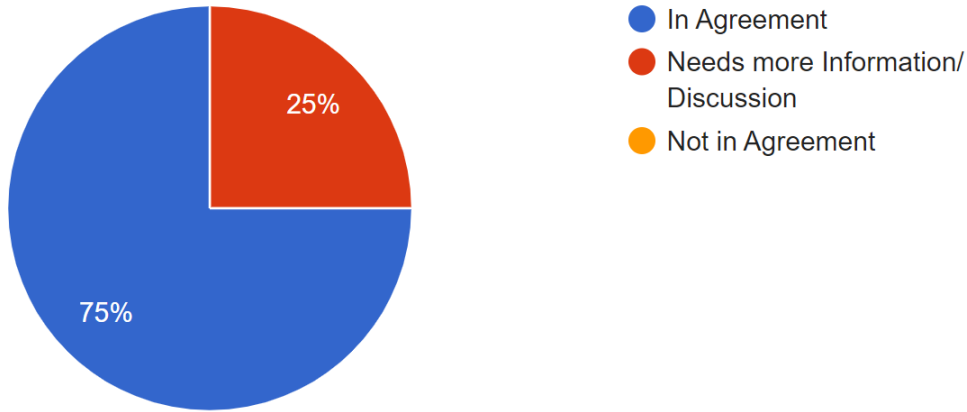
Comments

- The creation of a centralized billing process that is critical to maximize federal funding. The centralized billing system should be created by DHHS/MaineCare with input from the DOE, SIEU, schools, and providers. The centralized billing system should be accessible to schools and providers through appropriate training and education to encourage utilization of the system.
- I do believe we need a CBO to assist in districts billing MaineCare but I believe it needs to be completely independent from MDOE.
- I agree that the DOE should work to develop a CBO, but it appears they are leaning to a 3rd party billing structure; who would pay for this?
- Needs to be overseen by DHHS or MaineCare. Needs 3rd party broker assistance as well.
- This is a complex, inter-Dept collaboration that needs to happen and I'm not sure there is enough process in place to make sure DHHS and DOE are working in a collaborative manner on this. What is DHHS role in this?
- While it does seem like a logical move, I don't feel I have enough expertise in this area. I had assumed there was a separate committee examining this proposal in more detail. As a contracted provider, I do bill CINC and also Mainecare for two section 28 students. Mainecare had quite a learning curve, so I understand why some public schools have not wanted to deal with it.

Mostly In Agreement

State Intermediate Education Unit/Independent Quasi State Agency to manage Part C

- LD 255: Q2. Are you in agreement of an State Intermediate Education Unit (IEU)/independent Quasi-State Agency to manage Part C? (LD 255 report p. 3-5): 75% In Agreement, 25% Needs more information/discussion.



LD 255

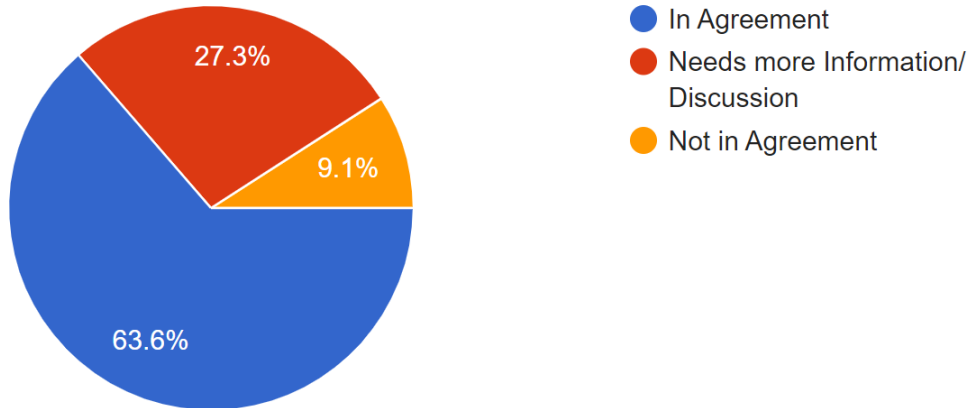
Comments:

- Need clear oversight where there isn't even a perceived conflict between the IEU/service providers and the State.
- Sarah Forster provided the advisory committee with an entire meeting regarding the SIEU. I have concerns with the oversight of SIEU as I believe there is not enough oversight being put in place which would be completely independent of MDOE.
- Given the information shared, it is apparent that any previously identified issues have been addressed.
- Agree that an SIEU that has an independent governing board should manage Part C services. I would still need to see more details on the board make up, appointments, and the statutory language relating to proposed changes.
- I don't have enough detail to give a hard yes or no.

Mostly In Agreement

Curriculum/Assessments for Part B 619

- LD 386: Q8. *Are you in agreement with the plan for curriculum and assessments? The Department of Education does not recommend changes to the current system of curriculum and assessments. If the State of Maine adopts universal preschool a system of universal screening will likely be considered and proposed to the Legislature, including any screening process considerations for students already identified under IDEA. Universal preschool is public preschool provided at no cost to all children in the preschool age range in a catchment area. (LD 386 report, p. 6, Section D & p. 9 Section 7)* 63.6% In Agreement, 27.3% Needs more Information/Discussion, 9.1% Not in Agreement



LD-386

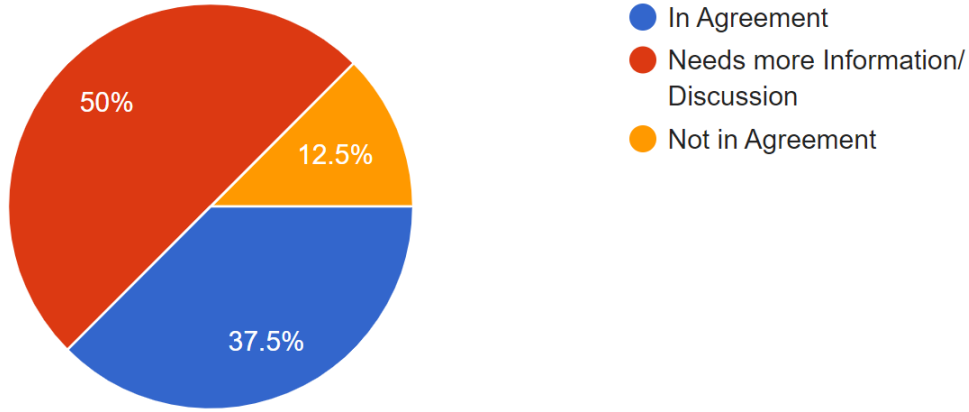
Comments:

- The advisory committee was not provided with any information regarding the plan for curriculum and assessments nor was there any discussion.
- Development needs to be included in the curriculum to ensure social/emotional skills progress. This is as important an indicator for kindergarten readiness as number sense. It is not appropriate for every SAU to go and research their own curriculum, there should be some clear guidance provided.
- Schools that have Pre-K already provide this and it can be embedded into practices for 3&4 year olds.
- I don't recall spending much time discussing curriculum or assessments during the meetings. The state should require a standardized screening tool be utilized across all SAUs.

Need More Information/Discussion

DOE Oversight to Quasi State/Intermediate Education Unit

- LD 255: Q4. Are you in agreement with the State's current plan to provide oversight to the Quasi-State/Intermediate Education Unit? (LD 255 report p. 3-5) 50% Needs more information/discussion, 37.5% In Agreement, 12.5% Not In agreement,



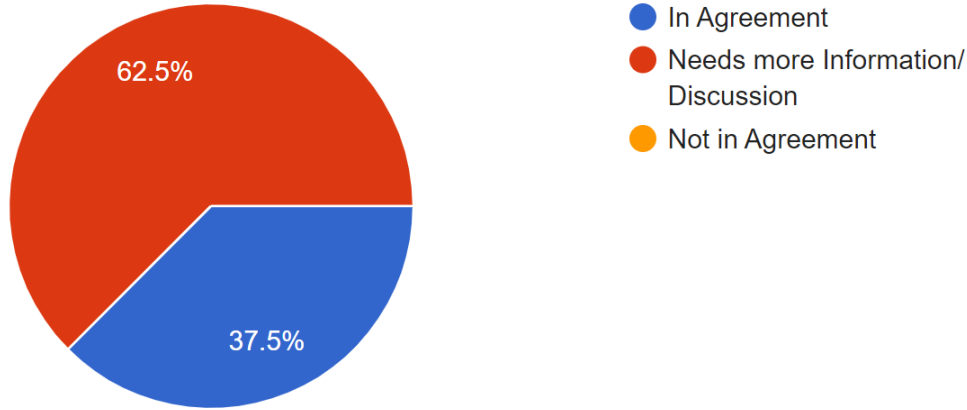
Comments:

- With the information provided to the Advisory Committee I do not believe enough is being done to ensure oversight will be completely independent from MDOE. I strongly believe this needs to be the case in order for the oversight to be effective.
- The Committee only heard that DOE was already doing it. We need to have a discussion about what quality measures look like as opposed to just compliant measures.
- I like the development of a Board, but would like to know how/who is elected to the Board.

Need More Information/Discussion

Fund Quasi-State Agency/IEU

- LD 255: Q5. Are you in agreement with the State's current plan to the fund the Quasi-State Agency/Intermediate Education Unit? (LD 255 report p. 3-5) 62.5% Needs more information/Discussion, 37.5% In Agreement



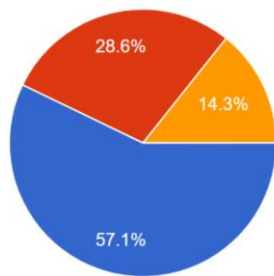
Comments

- Concerned about increasing property taxes
- I don't see much detail other than it will be funded through federal and state. My question is will it be funded in a way that fixes the lack of resources in the current system.
- There was no information provided to the advisory committee which allowed us to understand how the SIEU will be funded.
- I am concerned that sustaining this agency with only Part C will be difficult. The agency should have enough flexibility to meet demands for young children - I am fearful that without a clear plan - we might just run into the same types of problems of high costs and low numbers. Essentially we need to think about economies of scale.
- I'm unclear what the plan is for funding.

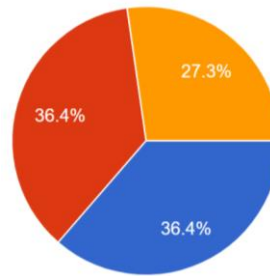
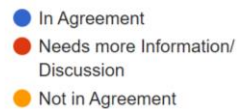
Need More Information/Discussion

Hybrid Transition Model

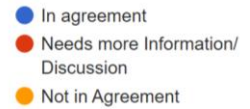
- LD 255: Q6. Are you in agreement with the Hybrid Transition Model? (LD 255 report p. 17 Table 3) 57.1% In Agreement, 28.6% Needs More Information/Discussion, 14.3% Not in agreement
- LD 386: Q5. Are you in agreement with the Hybrid Transition Model? During the period of transition of Part B services, a Hybrid Transition Model will be in place. In the Hybrid Model, CDS shares responsibility for the provision of service with SAUs. They collaborate to deliver services based on an SAU's individual need and existing resources, including, but not limited to, special education services, related services, transportation, and administrative tasks. The Hybrid Transition Model will be in place until July 1, 2026. (LD 386 report p. 9 Table 2, p. 10 Table 3, p. 13 Table 4) 36.4% Needs More Information/Discussion, 36.4% In agreement, 27.3% Not in agreement



LD 255



LD 386



Comments:

- I worry this model hasn't considered the longevity of CDS staff and their concerns about when to make their next career moves. There could be a mass exodus in staff and therefore the hybrid model will not have enough CDS staff to support the transition.
- Despite what MDOE presented it is my recollection that this option was the least supported option when the informal straw polls were held. I do not have a good understanding for how this operation will actually play out within our SAU's. I have witnessed this model play out within a local district and it has been extremely confusing for families and is failing the children. CDS is passing the buck to the district and likewise CDS is passing the buck back to the district. Leaving the family and child in flux with a lack of services.
- Community service providers should not be a temporary part of the transition, they should be long-term partners.
- The plan seems reasonable to allow for the SAU's to transition with support.
- I don't understand this model
- I do like the Hybrid model, and feel that if process is truly individualized based on the need and level of readiness of each SAU, with flexible timelines, it should hopefully work well.
- I worry about the transition of CDS staffing, loss of staff, and how thin does CDS get while the SAU's are taking on the services. What protectors can be put into place, so there is not a mass exodus from CDS at the onset and then SAU's have no guidance and support in this hybrid model. Staff are going to have to consider their future livelihoods. Will there be enough staff within CDS to carry this out? Also, how is this conveyed to parents and how will parents know who to communicate with. While this could go well in SAU's who have the capacity to really engage parents, I fear again, this plan is too vague and parents risk getting lost in the shuffle.

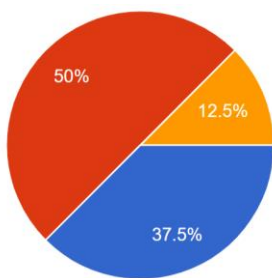
Need More Information/Discussion

Hybrid Transition Model (Comments Continued)

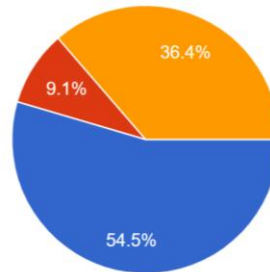
- I don't see a sufficient plan with the necessary resources to support the model.
- During the informal straw poll of the advisory committee this model received the least amount of support. I believe this model will not provide the structure which is needed and provides SAU's and CDS with too much flexibility and not enough oversight to ensure children will receive their services and will not be harmed.
- I would agree with this only in the circumstance that the Ed Committee did not move forward with the transition of 3&4-year-olds by 2023.
- While I believe in the hybrid transition model, I am concerned with FAPE and administrative oversight moving to SAU's in 2023 without a detailed implementation plan covering required components in detail, a funding plan, readiness/needs/transportation assessment, etc.

CDS Employees during and after transition

- LD 255: Q7. Are you in agreement with the MDOE's current plan regarding existing CDS employees during and after the proposed transition period? (LD 386 report, p.8, #5) 50% Needs more information/discussion, 37.5% In agreement, 12.5% Not in agreement
- LD 386: Q12. Are you in agreement with the State's current plan regarding existing CDS employees during and after the proposed transition? (LD 386 report, p.8, #5) 54.5% In Agreement, 36.4% Not in Agreement, 9.1% Needs more Information/Discussion



LD 255



LD 386



Comments:

- It was not clear at all with the information provided to the advisory committee what MDOE's plan was to assist CDS employees during and after this transition.
- There has been no discussion about this. I am very concerned that without clear assurances we are going to lose talented early childhood experts. We need to look at how retirement will work, how current credentialing works and if it needs to be adjusted, and we need to ask the current employees their thoughts.
- Unfortunately, when business' and corporations change or shift, it will be hard for the employees. I am sure that it will be tough transition for everyone involved.
- I don't feel there was enough discussion or concrete plans on what this would look like. I worry for CDS staff and private contractors that not enough has been put in place to support them and secure their livelihoods. They work so hard and deserve more guarantees.

Need More Information/Discussion

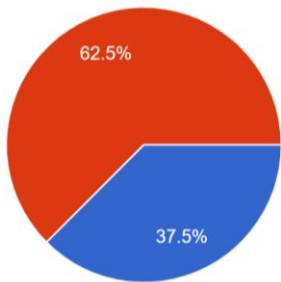
CDS Employees during and after transition (Comments Continued)

- I do worry that we will lose valuable long- time employees who just aren't at the time of life where they want to undertake additional education or certifications.
- I appreciate the funding to support CDS staff in gaining certifications needed if they wish to seek employment with and SAU, however, this plan is still very vague, doesn't provide the details of what the retirement and pension options are. It would be very hard for CDS staff to look at this plan and know they are protected.
- The advisory committee did not receive any information about what the plan for current CDS employees would be during and after the transition. Other than being told that it would be necessary for SAU's to engage with these employees to have a successful transition.
- We need to have clear understanding what is going to happen to existing early intervention professionals. What certification they need for SAUs. Should they have special certification, perhaps we train them as developmental therapists? Something should be done so we don't lose these talented professionals.
- The Resolve stated "The Implementation Plan must include a plan to protect current CDS employees from any negative or unintended consequences related to retirement and pensions and the federal windfall elimination provision and government pension offset". I have not seen a plan that addresses these components.
- We spent little time during the meetings discussing the impact of the transfer of FAPE to public school on CDS staff and how this change would impact staff. A detailed and robust plan to support and retain existing CDS staff members is perhaps one of the most important requirements if we hope to better serve children and families, improve the current system, and ultimately transfer responsibility for FAPE for four year olds to SAUs. We will not make progress on many of the other areas of need until we focus on this issue.

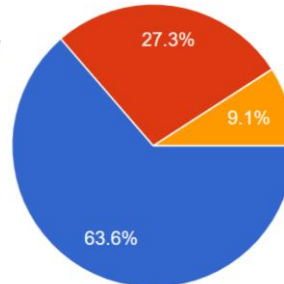
Need More Information/Discussion

Data System Part C & transition Part B

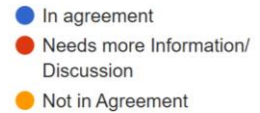
- LD 255: Q8. Do you have any comments you would like to make regarding Data Systems for Part C, including transition to Part B? (LD 386 report, p. 6, Section E & LD 255 report, p.14) 62.5% Needs more information/discussion, 37.5% In Agreement
- LD 386: Q13. Are you in agreement with the MDOE's current plan regarding Data Systems for Part B 619? (LD 386 report, p. 6, Section E) 63.6% In Agreement, 27.3% Needs more Information/Discussion, 9.1% Not in agreement



LD 255



LD 386



Comments:

- We didn't talk about this. Will Part B be a different data system than Part C? It is now... How will they talk together? How will the data systems be integrated, or not integrated, with centralized billing? This is a big, critical conversation.
- The advisory committee never discussed nor received information regarding the Data Systems.
- CINC creates duplicate work for programs using an EMR. CDS staff have candidly said they don't read provider notes.
- Feels like the assessments of these data systems should have been conducted prior to making a plan instead of just a broad plan of 'we will continue to assess.'
- The advisory committee did not have any discussion about current data systems and how they may need to be changed. It was acknowledged that the different SAU's often times use different data systems but there was no information provided as to how this issue would be resolved.
- Fiscal impact of a transition and new systems should be addressed also.

Need More Information/Discussion

Lead Agency for Part C

- LD 255: Q11. *Do you have any insights about who should be the Lead Agency for Part C? Do you have questions?* Responses
 - I would love to see an agency created independent of MDOE and DHHS which provided our Early Intervention Services, Offices of Child & Family Services, Child Protective Services, MaineCare Services, and Children with Special Health Care Needs. I truly believe this is the best possible way to ensure children who receive services from these agencies will best be served. Second to this option I would highly recommend the lead agency for Early Intervention be moved from MDOE to DHHS.
 - DOE
 - I think DHHS should be the lead agency. They have Help Me Grow, Head Start, Child Care, Child Services, etc....
 - With growing attention and need to serve resources to children under 6 years of age, Maine is past due to develop a Dept. for Early Childhood or an office that would bring early childhood services under one entity that can coordinate between DHHS and DOE. The disconnect of services and education programs for young children in Maine leaves those utilizing the services the most confused. Many states have already established separate entities. I would offer New Mexico's Dept of Early Childhood with the inclusion of Part C and Part B oversight as a model to explore.
 - I think the revised SIEU should be the lead agency with DOE providing needed regulatory and due process supports.

MOU

- LD 255: Q12. *Do you have any comments regarding to what the future MOUs should have within them? (LD 255 report p. 3 & p. 24 Appendix C)* Responses
 - Need to restructure so there is an individual MOU with every department. The MOU with DOE needs to be different with MaineCare, then Child welfare, CSHN, or Head Start!
 - We should have multiple MOU's between our Early Intervention offices and the multiple systems of care and agencies our families are navigating, not one overarching agreement with DHHS. These should include but not limited to the Office of Child and Family Services, Child Protective Services, MaineCare, and Children with Special Health Care Needs.
 - Information that may be added due to these LD's
 - MOUs should be individualized per department. A Head Start MOU should look VERY different than the MOU for MaineCare, or for that matter Child Welfare / Newborn Hearing or CSHN / or OCFS.
 - With multiple partners, MOU's should be detailed to provide the uniqueness of the collaboration served. For example, in child care partnerships with SAU's, MOU's all look different based on the partnership model.
 - I don't understand why a draft of the updated MOU can't be shared with members of the advisory committee and members of the Education Committee. Are there additional MOUs beyond DHHS?

Need More Information/Discussion

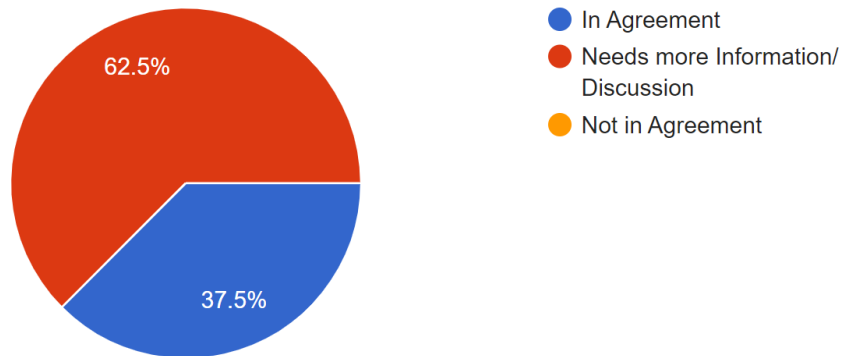
16 Required Components

- LD 255: Q13. *Do you have any comments or questions regarding to the 16 required components of Part C under the MDOE plan?* Responses
 - #1 We need to redefine our definition of developmental delay as it is part of the reason for the very strict criteria to qualify for early intervention services. #2 Currently the Early Start Coaching Model is the only option being offered to families of children with ASD in Part-C. While this model does work for some families it does not work for all families and therefore is not an individualized and available to all families. #5 & #6 Child Find still needs additional improvements to ensure that we are not only identifying children but also finding them eligible for services. #7 211 is not a comprehensive central directory of EI services. #12 It is clear that a CBO is needed to ensure timely reimbursement of services. #15 As a member of the SICC the parent participation is dismal and grossly outweighed by provider participation.
 - Yes - I have been hearing that families are only provided one service type. That is incongruent with early intervention disability research. It is important that there is an opportunity to talk about this. Do we know kids are getting what they need?
 - I am not well versed but do know from hearing from families and practitioners that the coaching model is not equitable for children and families. Practitioners who want to provide direct service are told no, while families who are under-resourced cannot translate the coaching model to their child. If we do not front load and invest in hands on services in the earliest years, we are spending more money in the long run. Every young child and family should be allowed direct services. Also, we didn't talk about eligibility in the advisory committee, however, this is a BIG concern of mine. I have had children diagnosed and refused services in my teaching years. I've had a child with CP who had to use private insurance to get PT and OT at ages 3 and 4. This should not happen and I question the legality.
 - I still do not completely understand this issue and need further discussion.

Need More Information/Discussion

Childfind

- LD 255: Q14. Are you in agreement with the MDOE's plan for ChildFind? (LD 255 pg 7-8) 62.5% Needs more Information/Discussion, 37.5% In Agreement



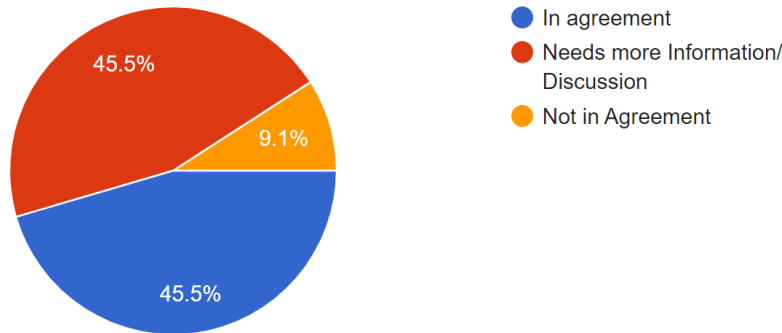
Comments:

- More information is needed in regards to how Maine is going to not only continue to improve its ability to find children but to also make them eligible for services.
- A resource map should be created of providers working with 0-5 year olds not only through CDS but MaineCare, private insurance, and private pay.
- We haven't had any discussion about this.
- I'm wondering why we haven't talked about Help Me Grow implementation as part of Child Find, again I feel a real disconnect in what is happening in DOE and what is happening in DHHS.
- How much will the Help Me Grow system be a part improving Child Find?

Need More Information/Discussion

CDS Maintains Fiscal responsibility for full cost first two years ending July 1, 2025

- LD 386: Q3. Are you in agreement that CDS maintains fiscal responsibility for the full cost of provision of preschool services, including transportation and costs of due process for two years (ending July 1, 2025). (LD 386 report p. 1 & 13) 45.5% Needs more information/Discussion, 45.5% In Agreement, 9.1% Not in Agreement



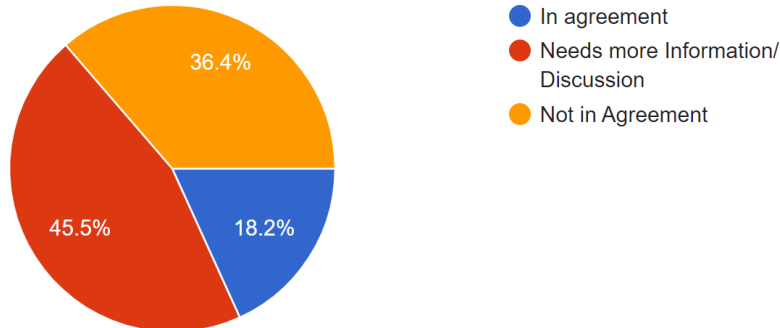
Comments:

- It is nice to see the costs provided up front for two years, but will these costs factor in the lack of resources currently existing in the system to give SAU's a true sense of what an equitable, inclusive system of Part B 619 looks like, especially staffing that would need to be built up over time and not readily available in the first two years. Are costs then fully blended into the school funding formula?
- Again, I don't really feel qualified to give input on fiscal management issues, but trust that those with more financial knowledge have researched this thoroughly.
- Whereas CDS has been working at a deficit for many years there was not enough information provided to me during the advisory committee as to where this funding would come from.
- Perhaps I am not understanding this fully- with the hybrid model if the SAU has started taking on the responsibility of at least some of the children but the funding of services is from CDS this seems very confusing. So the IEP is written by the SAU but then billing would be sent to CDS if the services are contracted with outside providers? If services are provided directly in a school preschool program would that mean that CDS would reimburse the school for that child being in a program and receiving special ed services? Again, I may be misunderstanding this.
- Worried about after -
- Until 2026 is needed.
- CDS should maintain fiscal responsibility throughout the hybrid model through 2026. I am also concerned with moving the FAPE obligation and administrative oversight to SAU's in 2023. There should be an approved implementation plan and legislation, with a 2026 timeline for the transition.
- As many have stated, the funding should not be through the school funding formula. There must be a way to ensure that state funding to support special education services to SAUs is directly spent on identified children and not used to support a need in some other area because of a lack of local funding. Should the funding look like Title 1 funding from the feds? Based on an annual student count of identified children? I didn't feel like there was much discussion about possible funding solutions

Need More Information/Discussion

States understanding of Resources SAU will need to take on Part B 619 services

- LD 386: Q4. Are you in agreement with the State's current understanding of the resources SAU's will need to take on Part B 619 services? (LD 386 report p. 4 Section 2) 45.5% Needs more information/discussion, 36.4% NOT in agreement, 18.2% In Agreement



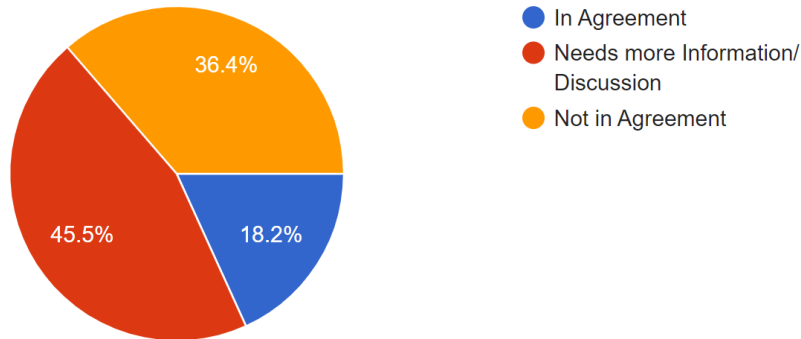
Comments:

- There has been no assessment of the resources that SAU's will need. The report makes the assumption that "SAU's..are able to extend the provision of FAPE to 3-5 year olds; they have an established infrastructure, developed capacity and can recruit and retain qualified staff because of competitive salaries and organizational stability". I am concerned that this statement is wrought with false assumptions; no assessment of capacity or staffing needs has been conducted, SAU's have unfilled positions in an ongoing workforce crisis.
- Our SAU's across Maine are all very unique in their demographics, resources, and structure. While needing to tailor a plan that has flexibility for the resources needed, being too flexible is where harm can be done and inequity can plague the system. Preschool aged children are in a very unique and fragile stage of development. School systems haven't traditionally been designed to meet the needs of this population of students. I'm not sure if SAU's have been given a broad survey to identify their readiness and give feedback to the resources they would need. Something like that would have been helpful to identify a more detailed plan for these proposals and given me more to give feedback on. I'm fearing we are missing the voice of many SAU's around the need for resources.
- They have supplied a comprehensive list of all of the resources and considerations, however each one of these represents an immense amount of work that I don't think the SAU's are prepared to undertake at this time. I know that there has been representatives for SAU's on the advisory committee, but I would like to know if details of the transition has been shared with all the SAUS so they know the work that is involved.
- There was no information provided to the advisory committee nor any discussion about MDOE's understanding of the resources and needs SAU's will have to take on Part B 619 services.
- Not sure how SAU's will ever understand what resources are fully required until it starts happening, which is part of what makes this process so tricky. Transitioning incrementally will be key.
- The committee has not received any information. We need an opportunity to really dig into what resources mean - and who needs what. Staffing, space, curriculum...
- I can't locate an analysis of the necessary resources required to support the transfer in the report.

Need More Information/Discussion

Transportation

- LD 386: Q6. Are you in agreement with the State's current plan for transportation for children in Part B/619 to receive services? The plan for transportation is embedded in the capacity study currently underway but will continue through the readiness assessments created by the DOE team and will be included in the detailed survey conducted by MEPRI. (LD 386 report, p. 5, Section C) 45.5% Needs more information, 36.4% Not in agreement, 18.2% In Agreement



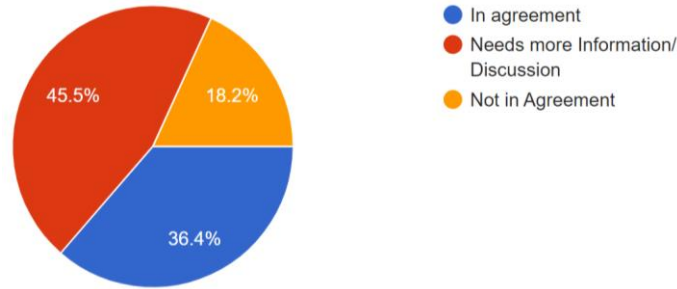
Comments:

- There is no plan. Assessments and surveys should have been done prior to convening the advisory group so the data could be used to inform a plan.
- The advisory committee was not provided with any information about the plan for transportation nor was there any conversation about the plan for transportation.
- Transportation is a huge concern with a lot of considerations, which they have detailed, and hopefully will help the SAU'S work through. I would be interested in seeing the detailed survey once it is complete.
- I am just not sure what the study will show so don't know how to feel about what the transportation will potentially look like as this is not yet identified.
- The plan is essentially to wait and see. This is WAY too important to wait and see. We need a plan. This has been brought up every time this issue has come to the Committee. (years)
- The DOE has not presented a detailed implementation plan around transportation. The report states that a study is currently underway, yet MEPRI hasn't developed the survey yet. The report recognizes "significant considerations" that are not yet addressed. These include "additional costs affecting local SAU budgets, vehicle allocations including bus requirements for young children, staffing for transportation, and considerations for transporting children to services outside their enrolled district." It is encouraging that the DOE plans to work directly with transportation directors, and seek information from parents and other stakeholders as the transition is being planned.
- I don't recall any significant discussion about transportation of three and four-year-old children.

Need More Information/Discussion

DOE plan to provide oversight/quality to SAU

- LD 386: Q7. Are you in agreement with the MDOE's current plan to provide oversight to SAUs and quality improvement for Part B 619 services? Administrative oversight of special education services is provided by the entity that is responsible for the provision of a Free and Appropriate Public Education (FAPE). Planning for the transition of administrative oversight is included in the timeline provided in this report and includes options to continue to support administrative tasks associated with special education by CDS utilizing the Hybrid Transition Model. (LD 386 report, p. 5 Section B) 45.5% Needs more Information/Discussion, 36.4% In Agreement, 18.2% Not in Agreement



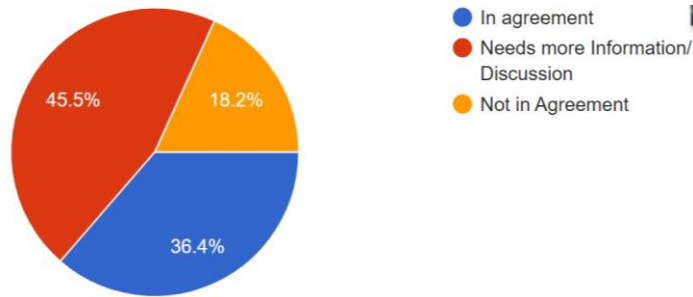
Comments:

- In the hybrid model, how do we ensure there is capacity from CDS to support the SAU's in oversight?
- Having the agency that is not currently meeting the needs of our 3-5-year-old population would be providing the oversight of this enormous transition does not make sense to me. MDOE should be included in the process but there should be a 3rd party providing the oversight.
- Again, if it is supported by the Hybrid model as outlined, and individualized, it should hopefully work out.
- For some districts to move forward- they will be ready to assume administrative oversight. There should be an option to take that on.
- The plan is essentially to wait and see. This is WAY too important to wait and see. We need a plan.
- Given a transition of FAPE obligation to the SAU, yes, the DOE provides oversight to SAU's in the provision of special education services. It's the transition of the FAPE obligation and services that I'm concerned about due to a new 2023 goal for FAPE to SAU, and a lack of a detailed implementation plan that should extend to 2026, throughout the hybrid model.
- I would strengthen and fund the new SIEU and have it provide administrative oversight, improve the existing system (again - fix Medicaid/billing) in conjunction with the new governing board, while SAUs are expanding public preschool services for four-year-olds.

Need More Information/Discussion

State's Plan to assess SAU readiness:

- LD 386: Q9. Are you in agreement with the State's current plan to assess SAU readiness to take on Part B 619 services? The Maine DOE is required by statute to collect basic building inventory data yearly. This data will support our understanding of capacity statewide. MEPRI has agreed to assist in developing an in-depth survey to understand preschool readiness in partnership with the development of a readiness assessment and in consideration of the SAU readiness tool presented by the Public Consulting Group. (LD 386 report p. 2, p 9. Section 7 & p. 13) 45.5% Needs more information/discussion, 36.4% In Agreement, 18.2% Not in Agreement



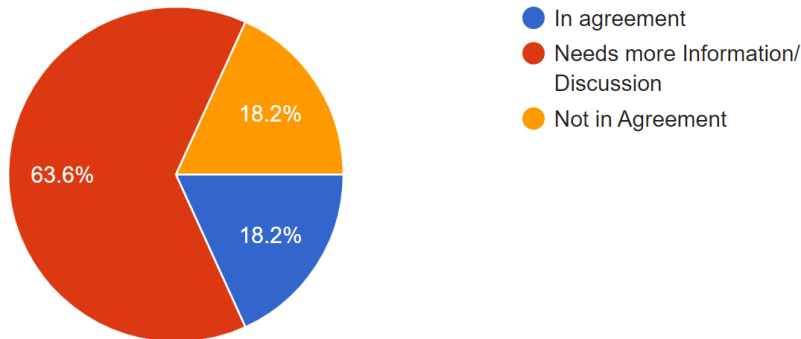
Comments:

- There is no mention in this plan about readiness to partner with child care programs and ensure least restrictive environments. Mass expansion of public pre-k that doesn't require utilizing partnerships with existing programs that already serve 3 and 4 year olds will harm community child care businesses. School districts have and still continue to overlook these potential partnerships even with wonderful efforts of MDOE's early learning team resources. There must be a requirement to first establish eligible partners then build from the lack of resources. We cannot risk communities losing their infant and toddler child care due to publicly funded pre-k expansion that excludes child care. This can be done as a mixed delivery and allow children with IEP's to remain in their trusted child care programs and receive services in those settings.
- I like the idea of the independent project manager to oversee the process. Again, with a concern that the timeline not be rushed, but proceed on an individual basis as each SAU is ready.
- Other than being told that MDOE had been working on a readiness assessment the advisory committee were not provide with this assessment nor was there any discussion about what the assessment should include.
- This should not present a delay for schools who are ready to move forward and be offered to schools who want to access it.
- The plan is essentially to wait and see. This is WAY to important to wait and see. We need a plan.
- I am not clear how ready school districts are in terms of facilities
- Although the DOE has recommended that FAPE obligation and administrative oversight move to the SAU next summer, there has been no assessment of readiness to date and the 2023 goal is not appropriate. I do agree with MEPRI developing a detailed survey and feel it should include the ongoing benchmarks to reach/monitor throughout a transition, through 2026.

Need More Information/Discussion

How Private Providers will be utilized Part B 619

- LD 386: Q10. Are you in agreement with the State's current plan of how private providers will be utilized in Part B 619 services? (LD 386 report p. 4 Section 2) 63.6% Needs more information/Discussion, 18.2% Not in agreement, 18.2% In Agreement



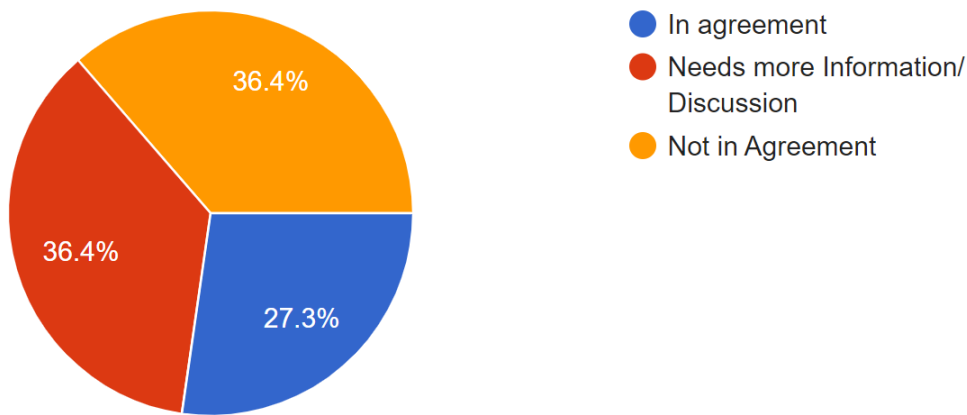
Comments:

- As a provider, this is a big concern for me. I'd like more details and discussion. (i.e. would FAPE be a set 3 days for 4 year olds or more individualized, what about preschool choice for parents, children who are currently in a program out of district, LRE payments for providers -would this be our regular fees or a different contracted rate?
- I don't see an answer to that in the plan.
- The advisory committee was told that SAU's would have to use private providers in order to ensure needs of children were met. However, there was nothing provided to the committee showing that there would be MOU's or other agreements in place to address the role of private providers.
- This does not seem to take into account therapies, but rather the actual preschool classroom need. There are many ancillary services provided (OT, SLP, PT, etc) and those don't appear to be mentioned. The Additional SAU/Community partnerships states 14 community partners with CDS but this most certainly does not account for all of the outside clinics/providers that are contracted with CDS. How are these services accounted for?
- It is unclear how private providers will be used - and they NEED to be incorporated in the plan. There should be clear guidance of how and when private providers are incorporated. Perhaps sample contract language.
- Although the DOE team verbally states that public-private partnerships are critical in meeting the needs of all children, there is no regard for the transition and impact on families, childcare providers, private providers, head start (the system of care) in the DOE recommendations. At the 3/2 legislative work session, we were shown slides for the first time that seemed to imply a time-limited or temporary contracting period with private providers, stating "during a hybrid model of providing oversight in the provision of FAPE the SAU's will continue to contract with providers to meet the service needs...if they are unable to provide preschool programming. During the period of transition of Part B services, a hybrid model will be in place. In the hybrid model, CDS shares the provision of service with SAU's...Community and private partnerships will be utilized during the transition period under a hybrid model. The hybrid model will be in place until July 1, 2026." I do not agree that public-private partnerships should be time-limited.
- I don't recall much discussion or information in the report relating to the role of private providers to support SAUs or Part C. I would like to see additional information collected regarding the capacity and availability of private providers and SAU staffing. We constantly here about the lack of speech and language pathologists. Do we have current data relating to the number of existing SLPs to serve this age group? Do we know where there are significant needs in the state? Are any of the existing workforce studies being conducted with ARPA funds examining the lack of SLPs, OTs, child psychologists, or child psychiatrists?

- **Need More Information/Discussion**

DOE's Plan to ensure Least Restrictive Environment

- LD 386: *Q11. Are you in agreement with the State's current plan to ensure Least Restrictive Environment for children receiving Part B 619 services? (LD 386 p. 7 Section F)* 36.4% Not in Agreement, 36.4% Needs more information/discussion, 27.3% In Agreement



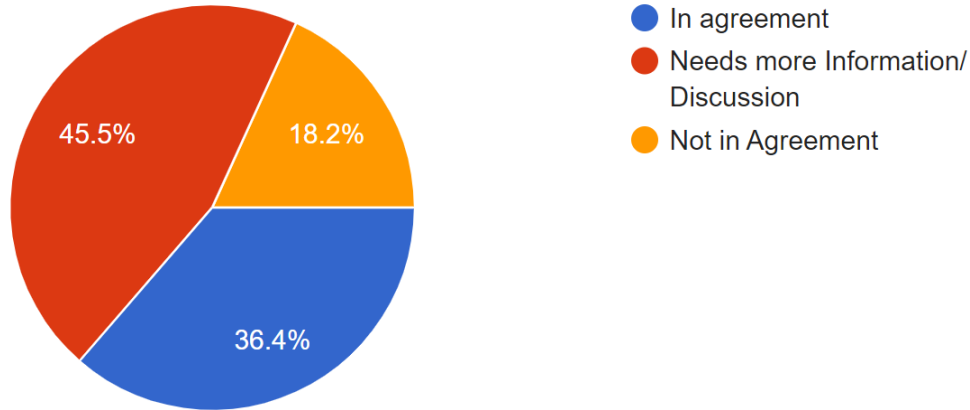
Comments:

- I feel that the 4-year-olds should have been done in conjunction with the public PreK Initiative in order to insure LRE. I am concerned that the new programs that are being developed by CDS end up being more special purpose programs with fewer than 50% children without IEPs. I feel that the threes were added afterwards, took the SAU's by surprise and now SAU'S have put public Pre-K on the back burner while they deal with the CDS transition
- LRE was not ensured under the current system and I do not see language ensuring that LRE will be honored for children and families when transferred to the SAU's.
- On multiple occasions the advisory committee raised their concerns about the possibility of regionalized programming being instituted when transitioning both 3 & 4-year-olds to SAU's and how this may negatively impact the LRE. There was nothing provided to us which would provide assurance that the LRE would be the first consideration when devising IEP's for 3 & 4-year-olds.
- Will families have any choice in where their child will receive services in the LRE?
- I am very concerned that SAU will simply be so overwhelmed they just regionalize and segregate children under the framing of not having enough staff.
- I am concerned that DOE slides shared 1/24 indicated that when age 3-5 moves to SAU, the LRE assumption starts with the SAU mainstream setting. This disregards the current system of care, parent choice, itinerant services in childcare/natural setting, full day services via eligibility for mainecare services, private programs with opportunities for typical peers, and appears to make assumptions that there will be typical children in and SAU's universal public prek program, which many SAU's do not provide.
- There is not enough information in the plan relating to ensuring children are served in the least restrictive environment. I was hoping to learn more about possible plans to support SAUs in working with existing providers/private special preschools to improve LRE in those settings.

Need More Information/Discussion

Health and Safety Part B 619

- LD 386: Q14. Are you in agreement with the MDOE's current plan regarding Health and Safety of children served through Part B 619? (LD 386 Report, p. 7, Section F) 45.5% Needs more Information/Discussion, 36.4% In agreement, 18.2% Not in agreement



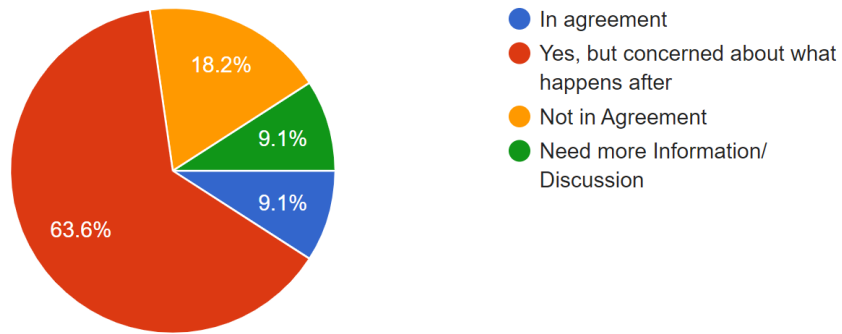
Comments:

- Again, a comprehensive outline, but a huge topic-dual licenses for providers-as a contracted provider who also provides childcare we are subject to OCFS rules as well as DOE and it can be confusing for a new provider. If we want to encourage childcare programs to become LRE providers, then we need to support them navigating the system.
- Unfortunately, the discussion of health and safety never occurred at the Advisory meetings to my knowledge. I appreciate the outline of the health and safety measure already put into place through licensing, MDOE early learning team oversight, and SAU processes. However, there are things to think about such as background checks that currently aren't answered here. This is an opportune time to bring cohesion to our background check requirements so that people can move through the systems of CDS, SAU's and child care programs without needing to have different requirements. Also, there has not been plans around health and safety with transportation.
- The advisory committee had no discussions about the health and safety plan for 3 & 4-year-olds.
- We haven't even begun to talk about how restraint and seclusion might be implemented for these littles. Honestly, the numbers of restraint start in Kindergarten or first grade... I would hate for it to start even earlier... Also - are there little toilets? How about nurse availability? etc.
- The report (absent an implementation plan) simply states "health and safety considerations of note as SAU's assume responsibilities...include building capacity and safety, parking and safe vehicle movement, appropriately-sized playgrounds, classroom, and bathroom equipment and facilities, access to rest time and rest area, and overall processes and procedures that involve providing a safe educational environment.." This is not a plan. All of these areas should be included in a readiness assessment and in fiscal planning as appropriate.

Need More Information/Discussion

Fully Fund SAU Part B 619 until July 1, 2026

- LD 386: Q15. Are you in agreement with MDOE's plan to fully fund the transition until July 1, 2026? (LD 386 report, p. 13)
 - 63.6% Yes, but concerned about what happens after,
 - 18.2% Not in Agreement,
 - 9.1% Needs more information/Discussion,
 - 9.1% In agreement



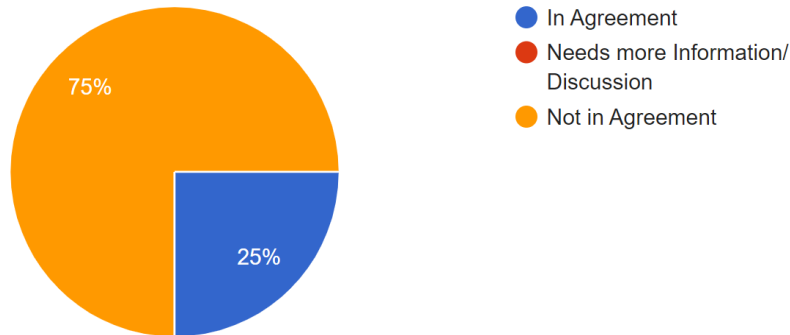
Comments:

- I am concerned with the how as CDS is currently operating as a deficit and what happens after July 1,2026. Will this fall on the shoulders of the taxpayers?
- School districts will want to know what happens next.
- Worried about property taxes going up.
- The report states that CDS maintains fiscal responsibility ending July 2025. There is no specific funding plan as requested in the resolve "the implementation plan must provide specificity regarding funding through the State and the MaineCare program that does not flow through the EPS funding formula". No specificity has been provided. I am concerned that the fiscal formula to fund these services, and the impact to municipalities, SAU's, private/community partners, are critical to understand, develop, and approve prior to agreeing to a transition date.
- I don't believe a sufficient plan exists to accomplish an appropriate transfer.

Mostly NOT in agreement

Transition 3 year olds to SAU

- LD 255: Q15. Are you in favor with SAU's being in charge of FAPE for 3 and 4-year-olds by July 1, 2023? (LD 255: Not referenced; LD 386 report, p. 1, 4, & 13) 75% NOT in agreement, 25% In Agreement



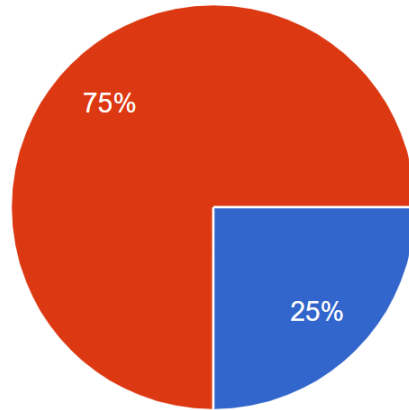
Comments:

- This timeline is much too quick and forces SAU's into the hybrid transition model which is by far the weakest model for meeting the needs of children.
- Four year olds should be transitioned first.
- 1, I am not in favor of 3 year olds going until all is working out for 4 year olds. 2. 2023 is really soon - and I am afraid SAUs won't even yet understand all the complexities. Start with 4-year-olds AND make sure there is universal Pre-K
- This is an extremely short timeline that I just found out about in the last week.
- I believe we must improve the current Part C and Section 619 system, such as centralized billing/MaineCare, prior to moving responsibility to SAUs.
- Not 3 year olds, too soon

Mostly NOT in agreement

What AGE should Part C Option be until

- LD 255 Q10. What Age should the State pursue the Part C Option until? (LD 255 report p. 14 - 17):
 - 75% Not in Agreement with plan – believe it should be the school year after 4th birthday
 - 25% In Agreement with Plan – believe it should be the school year after the 3rd birthday



- school year after 3 birthday
- school year after 4 birthday
- school year after 5 birthday
- Needs more Information/ Discussion
- I don't think Maine should pursue the Part C Option

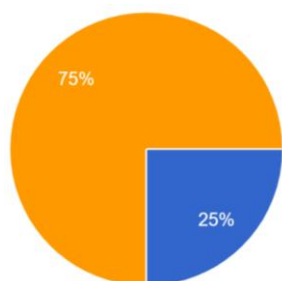
Comments:

- Families and children should access special education as soon as it is available to them.
- Since ME has to annually apply for the extended Part C Option I believe for at least the first few years, during this transition, we should extend it to the 4th birthday to give our families additional options to best meet the needs of their child. Each district in our state will be at very different places during this process and we need to ensure our children have as many options as possible to meet their needs including staying within Part C.
- We should have universal pre-K for 4 year olds but 3 year olds should be able to stay in which ever model is more developmentally appropriate. It should be parent choice.
- I think extending the Part C option to school year after the 4th birthday can help to transition services.

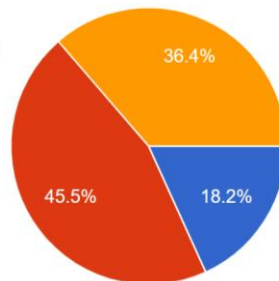
Mostly NOT in agreement

SAU's being in charge of FAPE by July 1, 2023

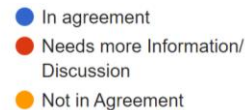
- LD 255: Q3. Are you in agreement that Maine should transition 3-year-olds to SAUs as of July 1, 2023. (LD 386 report) (There is no reference to 3-year-olds in LD 255 report) 75% Not in Agreement, 25% In Agreement
- LD 386: Q2. Are you in agreement that Maine should transition Free and Appropriate Public Education (FAPE) responsibility for Section 619 (3 & 4-year-olds) Services to SAUs July 1, 2023. (LD 386 report, p. 1, 4, & 13) 45.5% Need more Information, 36.4% Not in Agreement, 18.2% In Agreement



LD 255



LD 386



Comments:

- With expansion of public pre-k, I do feel beginning to transition 4 year olds is a logical step. However, in order for this transition to be done equitably and limit as many unintended consequences, the current proposals are too vague and I'm very concerned about children, families, and communities bearing the brunt of the unintended consequences.
- Four year olds should be transitioned first.
- This is an extremely short timeline that I just found out about in the last week.
- This timeline is much too quick and forces SAU's into the hybrid transition model which is by far the weakest model for meeting the needs of children.
- Not 3 year olds, too soon
- 1, I am not in favor of 3 year olds going until all is working out for 4 year olds. 2. 2023 is really soon - and I am afraid SAUs won't even yet understand all the complexities. Start with 4-year-olds AND make sure there is universal Pre-K
- I believe we must improve the current Part C and Section 619 system, such as centralized billing/MaineCare, prior to moving responsibility to SAUs.
- I understood from our initial meeting that 2023 was when the process would begin with some hybrid 4 year old programs, and that by 2026 they had hoped to have the process complete for 4's and some 3's. It was stated then (and in this report) that the timeline was very "fluid" and they realized some SAU's would not be ready by 2025-26. I know the superintendent (Howard?) shared that he was very concerned about the timeline since they budget way in advance. I know two principals in our district are still trying to figure out how to begin public preK programs, and both have said they will not be able start one next year. This would impact LRE for our part B students. I understand the concerns that delaying the timeline extends the uncertainty for CDS employees, may result CDS losing staff and would thus impact their ability to provide services.
- I do not believe, based on the information I was provided, that our SAU's will be prepared to provide the necessary oversight to ensure all 3 & 4-year-olds will have access to FAPE by July 1, 2023.

Mostly NOT in agreement

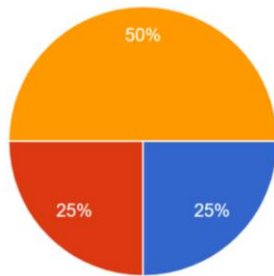
SAU's being in charge of FAPE by July 1, 2023 (Comments Continued)

- First get 4 year olds settled. The best thing to do is really take additional money and invest in universal pre-k for all so that we can ensure there is capacity in every area.
- In agreement if all of the variables that are still unknown are answered there is a clear and understandable path for families and providers when this happens
- This was presented to the MADSEC (Maine Administrators of Services for Children with Disabilities) Executive Committee and Representative Board met on Friday and had lengthy discussions regarding L.D. 255 and L.D. 386. Special Education Directors in Maine schools have significant concern with the unmet need of 3- and 4-year-old children with disabilities across the state and are in agreement with the transition of the duty of FAPE to SAUs for this age group of children. We recognize there will be challenges and have specific questions to be answered, but feel that with support from MDOE Special Services and the Legislature, we can make the transition occur successfully and provide the needed special education early intervention services that our young children are currently not receiving consistently.
- Unclear what this would look like in terms of funding.
- Throughout the process, I understood the timeline to transition to SAU's was 2025-2026 school year. As recently as Feb 24th, the special services team told all special education directors in Maine that "there has been no legislation to formally transition 4 or 3 year olds to SAU's and this will not happen for 3-5 years". When the DOE shared this new 2023 date with the advisory committee on 2/28, I was concerned that it was moving faster than expected, without a detailed implementation plan as required by the Resolve, and that the SAU's were being mislead about the timeline. The DOE report acknowledges that "administrative oversight of special education services is provided by the entity that is responsible for the provision of FAPE" which means that the DOE timeline through 2025 for "consideration of transition to SAU oversight" is actually now "due" for completion by 2023 under this new timeline.
- Maine should fix and strengthen the existing system for providing FAPE to children before moving responsibility to SAUs. We need to make improvements better utilize Medicaid through a centralized billing system, child find, and families waiting for services/lack of providers. How will funding be supported after the initial few years mentioned in the plan? What will that funding source look like?

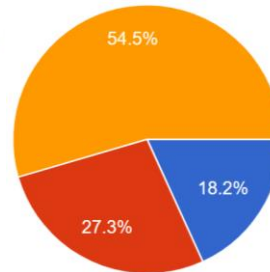
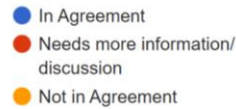
Mostly NOT in agreement

Families will be able to navigate/understand rights

- LD 255: Q16. Do you believe that that families will be able to navigate/understand their rights in these proposed models? 50% Not in Agreement, 25% Needs more Information, 25% In Agreement
- LD 386: Q16. Do you believe that families will be able to navigate/understand their rights in these proposed models? 54.5% Not in Agreement, 27.3% Need more Information/Discussion, 18.2% In Agreement



LD 255



LD 386



Comments:

- Families are already confused by the differences in DOE and medical model services. We really need to have a comprehensive plan when we introduce changes to the system.
- I don't see families centered anywhere in this report.
- As a member of the advisory committee with professional knowledge I had a difficult time understanding how this process is going to work and meet the needs of families. There is no way that families will be able to successfully navigate this process and therefore I fear the needs of our children will not be close to being met.
- Not possible to answer with so many unknown variables at this point.
- It is too hard now. The committee hasn't had the opportunity to discuss this - but even now it is really difficult for families to navigate it all. For example, families of 0-2 year olds have just received the diagnosis, gone through a lengthy evaluation process, may be navigating medical professionals as well as additional therapies AND early intervention. Then at 3... boom. they are off to another group? Talk about a roller coaster ride...
- Parents need more support regardless of where the responsibility for services lie within the system. We need to involve parents in designing supports and ensuring they understand the system and what their rights are under IDEA and Maine law.
- It is vital that we are proactive in getting families clear, comprehensive, understandable explanations of the process and how it will affect them. They need to know where they can find information, and who they can contact with questions and concerns. If this is not done, misinformation will spread, and there will be a lot of stress, upset and a feeling that they have not had a chance to be heard. I went through "downsizing" of CDS several years back (from 15-16 admin sites to 9) and families here in Damariscotta were very upset their site was being "taken away" without any explanation. CDS state officials ended up holding meetings fielding questions from upset families, providers, and therapists. I don't want that to happen again. (The Damariscotta office ended up staying open, after everyone's input!)
- I do not see families referenced much at all in the plan.

Mostly NOT in agreement

Families will be able to navigate/understand rights (Comments Continued)

- My daughter is 4 and was diagnosed with autism just shy of her second birthday, so I am fairly inexperienced with this process. Therefore, I struggled with the complexity of the content. I worry other parents may come across difficulties in understanding how this process works, especially ones like me who are new to parenting a child with special needs.
- I am a family member who also has the advanced knowledge of working within the industry. There is no doubt in my mind that it will be very confusing for families and that (especially during the years of transition) children's needs will be unmet and harm will be done.
- This will be made available and part of the transition plan to support community understanding of the transition.
- Since there are still so many questions that I don't understand about what this will fully look like, it doesn't seem logical to be able to answer if families will be able to understand it.
- Without a detailed implementation plan, or draft legislation/changes to share with and prepare families, the process remains unclear. I am concerned with the incredible disruption to families, childcare, providers, if their voices remain unheard/unaddressed.
- Learning your child may have a delay or a disability is almost always devastating for parents. As we can all attest, there is nothing simple about special education and Medicaid. I think the vast majority of parents are overwhelmed and intimidated by the process of understanding how CDS or Medicaid works and accessing services. Very few families, particularly of young children, understand FAPE, LRE, or all of the other acronyms used to describe services they are entitled to so their child can lead an independent life. We must do a better job to include the voices of parents as we consider changes that impact them and the future of their children. Parents need support to participate in a process such as an advisory committee that can be intimidating - especially if you are the only parent in the room. We should consider that most meetings are scheduled at times when working parents may be unable to take time off from work or they may need support to access to child care so they can participate. If we want to improve the system we should ensure their experiences, needs, and viewpoints are an integral part of the process. A robust survey of parents and their experiences could help to inform and improve how the state is delivering services.