MaineHealth

Testimony of Colleen Foley-Ingersoll, M.Ed., BCBA, MaineHealth
In Strong Support of LD 2120, “An Act to Fund the Delivery of Educational Services to Children with Special Needs as Required by State and Federal Law in Special Purpose Private Preschools”
Wednesday, January 31, 2024

Senator Rafferty, Representative Brennan, and distinguished members of the Joint Standing Committee on Education and Cultural Affairs, I am Colleen Foley-Ingersoll, Senior Director of the Developmental Disorders Services at Maine Behavioral Healthcare, a member of MaineHealth. I am a Board Certified Behavior Analyst and Special Education teacher and I have spent my 30 year career in Massachusetts and Maine providing direct services and supervising early childhood special education programs. I am here today to testify in strong support of LD 2120, “An Act to Fund the Delivery of Educational Services to Children with Special Needs as Required by State and Federal Law in Special Purpose Private Preschools” on behalf of MaineHealth.

We operate the Glickman Lauder Center of Excellence in Autism and Developmental Disorders, which serves individuals and their families through a continuum of care, including our Preschool and Early Intervention Program. Our preschool is a full year, center-based program that serves twenty children three to five with autism. Staff have expertise and advanced training in autism and applied behavioral analysis and utilize a multi-disciplinary team approach. Children receive up to six hours per day of individualized instruction in communication, play, socialization, self-care, cognitive development, and motor skills. Skill acquisition, maintenance, generalization and behavior reduction are taught using scientifically validated methods of applied behavior analysis. The classrooms are highly structured and have support embedded, including visuals (symbols, schedules, text), sensory equipment, movement breaks, video modeling, activity schedules, and augmentative and alternative communication supports. Strong family engagement, training and education are also central to the preschool program. Our goal is that every child who comes out of this program at 5 years old, despite the severity of their autism, is able to communicate, regulate, and has learned how to learn.

Research has shown that children who receive early, intensive treatment using the principles of Applied Behavior Analysis (ABA) demonstrate improvement in cognition, language and adaptive skills, with the greatest gains demonstrated by children who began receiving the intervention before age 3 (Eldevik, et al.,2008). Providing early and intensive services for toddlers and preschool-age children when the brain has neuroplasticity results in better outcomes. Currently, our program has 38, three to five year olds with autism on our waitlist. The impact of children not receiving services is profound. There are many examples, but today I will share with you one little boy’s journey to services. He was diagnosed with autism and ADHD and found eligible for specially designed instruction or special education by a team at CDS at 3 years old. He sat on waiting lists from 3 years old to just before his 5th birthday this September when finally, his name came to the top of our special purpose preschool program’s waitlist.
While he waited, his parents enrolled him in 2 different childcare settings without support so they could continue to work. The childcare programs asked for help as they were unable to keep him and the other children safe, but when none was provided, they ultimately asked the child to leave their programs. This little boy understands that he had to leave due to his “naughty” behavior. This has had a lasting impact on his sense of belong and self-esteem. When he entered our preschool, he was quite challenging, but given intensive services, he has flourished. But, imagine where he would be now, if he had these services when he was 3 and 4 years old. We can’t turn back time, but we can do things better in the future. We need invest in services during these critical years when intervention is likely to be the most effective.

Our center also operates a K-12 special purpose program for children with autism and significant behavioral challenges. The way we treat both of these age groups with the best-evidence approach is the same, the same staffing, the same clinicians, and the same intensive treatment – the same cost. However, children in our K-12 program, have had two sources of funding – MaineCare and tuition dollars from the Department of Education (DOE) or the child’s school district. This co-funding enables providers to meet the medical and educational needs of children with autism and significant challenges and have enough reimbursement to provide intensive evidence-based treatment. This inequitable situation led to our preschool program losing over $500,000 over the past two fiscal years. Young children in Maine with autism and other special needs have very limited access to evidence-based treatment programs, and programs that offer these intensive services are incurring large losses, like we have and risk closing. CDS has historically been underfunded and if LD 2120 is not passed, programs will be fiscally unsustainable and forced to close, placing more young children of Maine with disabilities onto waitlists.

Lastly, effective special purpose private schools rely on highly trained direct care staff. For programs to retain effective staff, we must pay competitive rates and provide annual raises that at least keep up with the cost of living. Our ability to hire and retain staff directly impacts our ability to increase capacity and expand our program. The funding from LD 2120 will support hiring and even more importantly, retaining staff.

In closing, young children with autism and other significant needs in Maine deserve to have the same access to co-funding by CDS and MaineCare for special education services and treatment as older children. I urge you to support the legislation before you today and I would be happy to answer any questions you may have.

MaineHealth is an integrated non-profit health care system that provides a continuum of health care services to communities throughout Maine and New Hampshire. As part of our vision of “Working Together so Our Communities are the Healthiest in America,” MaineHealth provides a range of behavioral health services throughout our footprint. These range from community based outpatient therapy, medication management, substance use treatment and care management to inpatient treatment in four community hospitals and Spring Harbor Hospital.