

LD 1850 Amended

Part A

Sec. A-1.(formerly A-14) 20-A MRSA §7209, sub-§4, as enacted by PL 2005, c. 662, Pt. A, §30, is amended to read:

E. To report annually to the council and to the joint standing committee of the Legislature having jurisdiction over education and cultural affairs matters on the performance of the Child Development Services System. This report may include information on any expansions of the connections of child find and service delivery with school administrative units, with the Department of Health and Human Services and with medical providers. This report may include information on any expansion of the connection of child find with nurse midwives. This report may include information on the number of children screened in the programs in Title 22, sections 1532, 8824 and 8943, the number of such children referred to the Child Development Services System who were found eligible for early intervention and the number of such children referred to the Child Development Services System who were found ineligible for early intervention. This report may also include information on annual performance over at least a 5-year period of each individual regional site and of the entire Child Development Services System; may benchmark performance against state and national standards; may include information about performance in child find, service delivery, service coordination, eligibility and exit data for children leaving the Child Development Services System; and may describe strategies that the Child Development Services System has undertaken to maximize the usage of a broad base of community resources including private providers, public schools, resources from other agencies and other available resources serving children and families. The report may include a copy of the interagency agreements under section 7213. The report will be publicly posted on the website of the department.

Sec. A-2.(formerly A-18) 20-A MRSA §7209, sub-§8, as enacted by PL 2005, c. 662, Pt. A, §30, is amended to read:

G. Designate local personnel for training to commit funds for free, appropriate public education. Personnel who commit funds for free, appropriate public education must be trained and certified by the state intermediate educational unit established under subsection 3. The board of directors of a regional site shall determine and designate which trained and certified personnel may commit funds - ; and

H. Ensure, that children from birth until 6 years of age who are referred to the Child Development Services System also receive appropriate referrals for support outside of the system, including appropriate public and private programmatic resources, regardless of the child's eligibility for early intervention or free, appropriate public education.

Part B

Sec. B-1 (formerly C-3). Training and support to regional site boards. The Department of Education shall develop and present to the Joint Standing Committee on Education and Cultural Affairs and to the state advisory a plan for improving training and support to Child Development Services System regional site boards of directors. The Department of Education shall present the plan no later than 7 days after the effective date of this Act.

Sec. B-2 (formerly C-4). Unmet needs monitoring. To assess the continued provision of free, appropriate public education to children after transition to public school, the Department of Education shall develop a plan to review unmet needs in school administrative units monthly or bimonthly and implement a pilot plan among no fewer than 6 school administrative units, including a mix of small, medium and large districts. The department shall, no later than January 31, 2008, present the pilot plan to the Joint Standing Committee on Education and Cultural Affairs.

Sec. B-3 (formerly C-5). Data linkage. The Maine Education Policy Research Institute in the University of Maine System shall deliver a report on or before January 31, 2008 to the Joint Standing Committee on Education and Cultural Affairs on necessary technical and legal advances that would enable data linkage to facilitate research projects that would involve linkage of personally identifiable health and MaineCare data and personally identifiable education data in a way that would be in compliance with federal privacy law and regulation, including the federal Family Educational Rights and Privacy Act of 1974, 20 United States Code, Section 1232g (2006) and the federal Health Insurance Portability and Accountability Act of 1996, 42 United States Code, Sections 1320d to 1320d-8 (2006). The institute may consult with the Office of the Attorney General and with the Office of Policy and Legal Analysis for advice on identifying which, if any, state laws, rules or policies would have to be changed to enable or facilitate such studies within the bounds of federal law and regulation. This report must include design of a pilot study to test the technical advances outlined in this section and must also investigate the possibility of data linkage for assessing the effectiveness and efficiency of delivery of early intervention, education and health and human services to individuals with disabilities. The report may describe data linkage with a broad range of research questions. The report may address how to use data linkage studies to assess the effectiveness and efficiency of delivery of early intervention, education and health and human services to individuals with disabilities, including the number of case managers per child. A goal of such work is that the Department of Health and Human Services and the Department of Education work together to determine how data systems can be designed to facilitate analysis of data across departments.

Sec. B-4 . Transition policy. The Department of Education shall develop, in consultation with school administrative units and Child Development Services regional sites, a policy which articulates a consistent method for transition of children from the Child Development Services System to School administrative units. This policy will articulate the transmittal of records of both children previously and currently served by the Child Development Services System.

Sec. B-5. Interagency Agreement. The Departments of Education and Health and Human Services will revise the interdepartmental agreement. The agreement will articulate: the responsibilities for appropriate referrals to the Child Development Services System from the metabolic program under Title 22 § 1532, from the central registry for birth defects under Title 22 § 8943, and from the newborn hearing screening program under Title 22 §8824 and clear definitions of the roles and responsibilities of the respective departments and their regional service delivery systems in implementing a quality early childhood system consistent with the requirements of Part C and B of the Individuals with Disabilities Education Act.