The Child Development Services (CDS) system is an Intermediate Educational Unit that provides both Early Intervention (birth through two years) and Free Appropriate Public Education (for ages three through five years) under the supervision of the Maine Department of Education. The CDS system ensures the provision of special education rules, federal and state regulations statewide, through a network of regional sites.

Regional CDS sites provide case management and direct instruction for families with children from birth through age five. Regional CDS sites arrange for local services that include early intervention and special education and related services.

Purpose: to identify state and regional site-level trends, outliers, etc., with regard to federal reporting indicators and other factors, in the CDS system.

Method: working with the CDS State Director, the CDS Data Manager, and regional CDS site leadership, the LEND Trainee analyzed data made available through CINC and hard copy educational records to identify trends at the state and site level and identified statistical outliers which reflect both strengths and weaknesses across the CDS system, and when appropriate identify strengths and weaknesses across the CDS System.

Next Step: This project was a first step in examining CDS site data for trends and outliers. A future project could support CDS in identifying specific technical assistance/professional development needs to improve state and site-level efficiency and effectiveness and, therefore, positively impact services to children with disabilities and their families.

Informed clinical opinion (ICO) is one of the criteria for determining eligibility for services in Maine. ICO is used when the standard scores aren’t significant and an established condition isn’t present, but the evaluators have observed what they consider to be significant developmental issues. Sites that are outliers with regard to a disproportionate percentage of eligibility based on ICO are either (1) not conducting the evaluation tool in a standardized manner or (2) determining children who are “at risk” or have a mild developmental delay eligible which is contrary to Maine’s eligibility criteria. Sites that underutilize ICO are likely being too restrictive in its use and determining children to be ineligible when they should actually be eligible.

This data indicates the need for professional development/training on when/how to use ICO. It also warrants conversations with front line staff at the sites that are outliers about their thought process when using ICO. Budgetarily, the ICO data indicates that it’s highly likely that state and federal funds are being spent for services to children who do not meet Maine’s Part C eligibility criteria.

The primary service provider (PSP) model, in part, is intended to minimize multiple providers interacting with the family and to only provide consults when truly needed. For the most part, the data aligns with the model, guidance, and management of scarce resources. Teachers (who provide special instruction) are considered generalist and the discipline which is most plentiful. Related service providers (OT, PT, SLP) are much more scarce and specialized.

As far as leadership, the consult/direct service issue results in the mismanagement of scarce resources and can have a significant impact on compliance with federal indicators. Site-level leadership need to monitor this and ensure that guidance is being implemented on the front line.