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To: [Orbeton, Jane](#); repcharlottewarren@gmail.com; [Deschambault, Susan](#)
Subject: Behavioral Health Community Collaborative Comments on the DHHS memo regarding services for Long Creek youth.
Date: Thursday, September 23, 2021 10:08:35 PM

This message originates from outside the Maine Legislature.

Senator Deschambault, Representative Warren and Members of the Criminal Justice Committee,

I am submitting some comments regarding the memo from DHHS about the availability of services for Long Creek Youth in the behavioral health community.

We are very supportive of providing services to youth in a non-correctional setting and believe that any "alternative" is not really an alternative if it is still within the Department of Corrections and considered from a punitive, incarcerated model. We believe a community based array of services, adequately funded, can provide a safe and more effective alternative to addressing the needs of these young people.

That said, there are a few issues we would like to raise with the services outlined by DHHS in their memo for the purposes of your hearing tomorrow. These responses are culled from a variety of responses gathered from KidsPeace, Sweetser, Spurwink, and the Opportunity Alliance of Maine who are members of the Behavioral Health Community Collaborative.

Overall, the facts and programs laid out by DHHS we believe are mostly accurate, but paint a picture that is a bit more rosy and optimistic than what we are experiencing on the ground.

Specifically - many of the programs mentioned are in place but are unable to operate at full or even limited capacity due to staffing shortages. Because of the chronic and ongoing underfunding of community mental health and residential programs for behavioral health designed for youth, we are unable to compete with hospitals and schools who are attracting staff away from these services due to their ability to pay higher wages. The DHHS has worked to raise reimbursement for some of these services, but it is inadequate to meet the need. And for residential, while the program rates have gone up the room and board rates have gone down.

Also the structure of the new rates is different and provides a disincentive for agencies to accept young people with higher acuity needs, which will make it difficult to find placements for these young people.

There is also a terrible bottleneck with licensing and the ability to train and certify staff for many needed positions. This delay has not been addressed by DHHS and must be if we are to move forward on this transition.

Lastly, it is unfortunate that Therapeutic Foster Care has not been included in this set of options as it could provide some real help and stability for these young people. We are not sure why the DHHS has not included this service as part of the possible remedies.

All of the above issues are fixable - we just need to ensure that as you do the right thing at Long Creek you do the concomitant right thing on the behavioral health and residential treatment program side of things. Shifting the current expenditures on staff and facilities at Long Creek to community behavioral health for children will go a long way to alleviating the caution that we are raising here and will allow Maine to deliver quality, research based best practices to help these children in need.

Thank you.
Betsy Sweet
For the Behavioral Health Community Collaborative