## Michelle Richardson TURNER LD 181

Dear Senator Baldacci, Representative Meyers and the members of the Health and Human Services committee,

I am a parent of a 16 year old girl. We took her in as a foster child at 4 years 2 months and she was adopted on November 19, 2013. She has struggled with mental health issues and behavioral difficulties prior to placement. In August of 2019 her behavioral responses became unmanageable in our family and we began our journey with a variety of psychiatric placements. She went to five in patient psychiatric placements, three crisis stabilization unit placements, multiple attempts to return home in the mean time with all in home support services in place. She was approved for in state residential placement in January 2020 and remained at a crisis stabilization unit until the residential placement had availability in March 2020. She remained at the in state residential program for 13 months when she was essentially "kicked out" for behavioral issues. We brought her home without support after pushing to have her transferred but it was not supported by the facility. She was in the home for just over three weeks when she had to return to the BED at St. Marys. She was approved for an out of state residential placement at a secured facility at that time. After 10 days in the BED she was transferred to the in patient facility at St. Marys where she remained for 77 days waiting for the first opening out of state placement at a secured facility. We transferred her to Sandy Pines in Florida, 1800 miles away where she remained for 10 months at a secured facility. She experienced the greatest amount of "success" in that environment and was able to remain home for 6 months after that placement with minimal behavioral outburst. Over the course of the past month we have gone down hill significantly with two visits to the BED at St. Marys but both times no available in patient beds or crisis stabilization unit beds available. She has been home since the evening of March 9th because she was discharged due to stabile behaviors in the setting of at the hospital in a closed room on the adult side without interaction from peers or adults.

It would be so beneficial to have a secured residential facility in the state of Maine. Children, like my daughter, would benefit from attending a residential program that is not secured and have the option of transferring to a secured facility within her own state for a higher level/more restrictive level of care if needed. If children could remain in their home state, this should increase parent involvement, help with smoother transitions back into the home setting which should increase success rates and decrease the need for repeat admissions. I am in full support of a secured residential program in the state of Maine for Maine families and the children that need that level of support for success. Thank you so much for your consideration in this matter.