

MAINE STATE LEGISLATURE

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132nd MAINE LEGISLATURE

FIRST SPECIAL SESSION-2025

Legislative Document

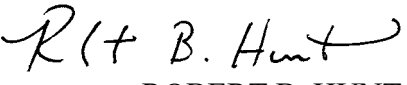
No. 1703

H.P. 1138

House of Representatives, April 17, 2025

Resolve, to Establish the Adverse Childhood Experiences Screening and Resiliency Assessment Pilot Project

Reference to the Committee on Health and Human Services suggested and ordered printed.


ROBERT B. HUNT
Clerk

Presented by Representative GRAMLICH of Old Orchard Beach.
Cosponsored by Senator MOORE of Washington and
Representatives: BRENNAN of Portland, CRAFTS of Newcastle, GRAHAM of North
Yarmouth, MCCABE of Lewiston, MITCHELL of Cumberland, SHAGOURY of Hallowell,
STOVER of Boothbay, ZAGER of Portland.

1 **Sec. 1. Pilot project established. Resolved:** That the Department of Health and
2 Human Services, in collaboration with the Department of Education, shall establish the
3 Adverse Childhood Experiences Screening and Resiliency Assessment Pilot Project,
4 referred to in this resolve as "the pilot project."

5 **Sec. 2. Definitions. Resolved:** That, as used in this resolve, unless the context
6 otherwise indicates, the following terms have the following meanings.

7 1. "Adverse childhood experiences" or "ACEs" means traumatic events that occur in
8 childhood, including abuse, neglect and household dysfunction, that can negatively affect
9 long-term health and well-being.

10 2. "Licensed clinical social worker" or "LCSW" has the same meaning as in the Maine
11 Revised Statutes, Title 32, section 7001-A, subsection 6.

12 3. "Licensed master social worker" or "LMSW" has the same meaning as in the Maine
13 Revised Statutes, Title 32, section 7001-A, subsection 7.

14 4. "Resiliency assessment" means a process to evaluate a child's ability to cope with
15 stress, trauma and challenges and the child's capacity for recovery and emotional growth.

16 5. "School-based health centers" means health clinics that are located in or near schools
17 and provide comprehensive medical and mental health services to students.

18 **Sec. 3. Screenings and assessments. Resolved:** That the pilot project must
19 administer ACEs screenings and resiliency assessments to public school students in school-
20 based health centers located in Cumberland, Androscoggin and Washington counties for
21 the 2026-2027 school year only. The pilot project must identify at-risk youth, provide early
22 intervention services and offer resources to promote emotional and psychological well-
23 being.

24 1. The pilot project must be designed to reach all students within Cumberland,
25 Androscoggin and Washington counties who seek health services at participating school-
26 based health centers.

27 2. ACEs screenings must be voluntary for the participants and conducted in a
28 confidential manner, with the goal of identifying students who may benefit from additional
29 support services.

30 3. Resiliency assessments must be administered to all students participating in ACEs
31 screenings, regardless of the ACEs screening results, to gauge students' ability to cope with
32 and recover from stress and adversity.

33 4. Pilot project data must be collected throughout the duration of the pilot project,
34 including at least the following:

35 A. The number of students who received ACEs screenings and resiliency assessments;

36 B. The students' ACEs scores and resiliency assessment scores;

37 C. The identification of and referral rates and total number of referrals made for
38 students in need of additional mental health or support services; and

39 D. Feedback from school-based health center staff, parents and students about the
40 effectiveness of the pilot project.

Sec. 4. Training for social workers. Resolved: That, in order to participate in the pilot project, LCSWs and LMSWs must obtain training pursuant to this section prior to the administration of the ACEs screenings and resiliency assessments under section 3. The training must include, but is not limited to:

1. The scientific understanding of ACEs and their effect on long-term physical and mental health;

2. Best practices for conducting ACEs screenings and resiliency assessments in a sensitive, confidential and supportive manner;

3. Intervention strategies for supporting students identified as having many ACEs, including referral to appropriate services and resources; and

4. Culturally competent approaches for working with diverse populations and communities.

Notwithstanding the Maine Revised Statutes, Title 32, chapter 83, LCSWs and LMSWs participating in the pilot project must be required to complete initial and ongoing training as determined by the Department of Health and Human Services to ensure that they are up to date on the latest practices and research related to ACEs and resilience.

The training must be structured to provide 3 continuing education units that LCSWs and LMSWs may use for their licensing requirements.

Sec. 5. Evaluation and reporting. Resolved: That the Department of Health and Human Services shall collect and analyze data from the pilot project, including but not limited to, the data described under section 3, subsection 4.

No later than October 1, 2027, the Department of Health and Human Services shall submit a report to the Joint Standing Committee on Health and Human Services, including the findings and recommendations for expanding or modifying the pilot project, suggestions for integrating ACEs screenings and resiliency assessments into broader statewide efforts and suggested legislation. The joint standing committee may report out a bill based on the report to the Second Regular Session of the 133rd Legislature.

SUMMARY

This resolve requires the Department of Health and Human Services, in collaboration with the Department of Education, to establish the Adverse Childhood Experiences Screening and Resiliency Assessment Pilot Project to administer to public school students screenings for adverse childhood experiences and resiliency assessments in school-based health centers located in Cumberland, Androscoggin and Washington counties.

It requires the pilot project to be designed to reach all students within Cumberland, Androscoggin and Washington counties who seek health services at participating school-based health centers.

It requires the pilot project to identify at-risk youth, provide early intervention services and offer resources to promote emotional and psychological well-being.

It requires the licensed clinical social workers and licensed master social workers participating in the pilot project to obtain training regarding adverse childhood experiences screenings and resiliency assessments and related subjects. The department is directed to report on the pilot project no later than October 1, 2027 to the Joint Standing Committee

1 on Health and Human Services, which is authorized to report out a bill to the Second
2 Regular Session of the 133rd Legislature.