MAINE STATE LEGISLATURE

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FIRST REGULAR SESSION

ONE HUNDRED AND THIRTEENTH LEGISLATURE

Legislative Document

No. 469

S.P. 165

In Senate, February 20, 1987

Reference to the Committee on Appropriations and Financial Affairs suggested and ordered printed.

JOY J. O'BRIEN, Secretary of the Senate Presented by Senator CLARK of Cumberland.

Cosponsored by Senator BERUBE of Androscoggin, Representative CONNOLLY of Portland, Representative ANTHONY of South Portland.

STATE OF MAINE

IN THE YEAR OF OUR LORD NINETEEN HUNDRED AND EIGHTY-SEVEN

1 2 3 4	AN ACT to Continue Support Services at Augusta Mental Health Institute and Bangor Mental Health Institute.					
5 6	Be it enacted by the People of the State of Maine as follows:					
7 8 9	Appropriation. The following funds are appropriated from the General Fund to carry out the purposes of this Act.					
10	<u> 1987-88</u> <u> 1988-89</u>					
11 12	MENTAL HEALTH AND MENTAL RE- TARDATION, DEPARTMENT OF					
13 14	Augusta Mental Health In- stitute					

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1 2 3 4	Personal Services Continues transitional unit staffing for 8 to 10 adolescents.	\$435,000	\$435,000
5 6 7 8 9 10 11	All Other Continues current contractual services, community trips, contracted medical services, nights and weekends supplemental coverage.	112,000	113,000
13			
14	Total	\$547,000	\$548,000
15 16	Bangor Mental Health Insti- tute		
17 18 19 20 21 22 23	All Other Continues contracted support services for psychologists and psychiatrists and other related support services.	\$86,000	\$78,000
24	mom » r	* 622 000	\$636,000
25	TOTAL	\$633,000	\$626,000

STATEMENT OF FACT

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Budget recommendations are insufficient to maintain current services at Bangor Mental Health Institute and Augusta Mental Health Institute. Contractual services would be cut, placing patients in jeopardy and seriously impairing quality of care.

These appropriations maintain current contracted support services. Supplemental private community professionals will continue to provide services at the fiscal year 1986-87 level.

In addition, direct care positions for the ado-

(1	lescent,	"Transiti	on	Unit"	would	be	continued.
\	2	These chi	ldren wou	ld	requi	re expen	sive	residential
	3	treatment p	placements	if	this	unit wer	e not	available.

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