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STATE OF MAINE | CHILDREN'S CABINET
2024 ANNUAL REPORT

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2024 CHILDREN’S CABINET REPORT

Governor Mills’ Children’s Cabinet

Soon after taking office in January 2019, Governor Mills reinstated the Children’s Cabinet following an eight-year hiatus. Maine Children’s Cabinet members include the Commissioners of the Departments of Health and Human Services, Education, Labor, Public Safety, and Corrections. DHHS Commissioner Sara Gagné Holmes serves as chair of the Children’s Cabinet. In collaboration with key staff from each of these agencies, the work of Governor Mills’ Children’s Cabinet is coordinated by a staff person in the Governor’s Office of Policy Innovation and the Future.

The Children’s Cabinet plays a vital role in convening and facilitating coordination across State agencies on initiatives and policies that will improve and promote the healthy development of children and youth in Maine. Staff from the Departments comprising the Children’s Cabinet meet regularly to maintain open communication about changes and developments in programming and policies across state agencies for children and youth, coordinate the implementation

of specific strategies, and identify new opportunities to collaborate across programs to advance the Children’s Cabinet’s strategies and goals.

The Children’s Cabinet strategic plans lay out two overarching goals:

- All Maine children enter kindergarten prepared to succeed.
- All Maine youth enter adulthood healthy and connected to the workforce and/or education.

Children’s Cabinet Achievements in 2024

In 2024, state agencies involved in the work of the Children’s Cabinet continued to meet regularly and make progress on strategies laid out in the Children’s Cabinet Plan for Young Children and the Children’s Cabinet Plan for Youth.

This report outlines the initiatives for young children and youth that moved forward in 2024 and provides some highlights of plans for continued implementation of the Children’s Cabinet strategies in 2025.



STRATEGIES TO PREPARE CHILDREN FOR KINDERGARTEN

The Children’s Cabinet Plan for Young Children, informed by the state’s 2019 Preschool Development Grant Needs Assessment and Strategic Plan as well as other agency plans for children, has provided a roadmap for much of the state’s work to improve programs and services for young children and their families. Staff and members of the Children’s Cabinet originally developed its plan for young children in the fall of 2019, pulling from the learnings of the comprehensive needs assessment conducted by the Department of Education (DOE) and Department of Health and Human Services (DHHS) as part of the Preschool Development Grant (PDG) Birth through Five planning grant from the federal government.¹ Through conversations with parents, early childhood educators social service agency representatives, and others, the assessment identified a series of priority needs. The Children’s Cabinet used the results of the needs assessment to shape the plan for young children. In 2023, the Children’s Cabinet updated its plan to incorporate the strategies of the Perinatal Systems of Care work to better support expecting and new parents and their babies during the first critical year of life. Through the work of the current Preschool Development Grant Birth through Five Renewal Grant, the state has updated its needs assessment and is in the process of updating the strategic plan for the Preschool Development Grant. These efforts will inform the work of the Cabinet moving forward.

Staff from the DHHS and DOE are collaborating and coordinating on efforts to strengthen and integrate programs within Maine’s early childhood system. Multiple state offices are involved in this effort including staff from DHHS’s Office of Child and Family Services (OCFS) and Maine Center for Disease Control and Prevention (Maine CDC) and DOE’s Early Learning (EL) Team. Maine’s early childhood system includes critical early intervention services,

health care programming for young children, and early care and education programs such as licensed child care programs, Head Start and public pre-k.

Strengthening Maine’s Early Childhood Education System

Through the work of the Children’s Cabinet, staff from DHHS and DOE are coordinating efforts to increase access to quality and affordable early childhood education programs through a mixed delivery system serving children from birth through age five. This mixed delivery system includes multiple types of organizations providing care and education to young children. These organizations include child care programs (both center-based and home-based), private preschool programs, Head Start, public pre-k programs for four-year-olds operated by public schools and Child Development Services.

OCFS at DHHS plays a key role in providing services to support families and their children in accessing quality early childhood education. OCFS oversees the administration of Maine’s Child Care Development Block Grant. This work includes managing the Maine’s Child Care Affordability Program, Child Care



Licensing and Investigation Services, Quality Rating and Improvement System, and the state’s contract with the Maine Roads to Quality Professional Development Network (MRTQ PDN) at the University of Southern Maine. The MRTQ PDN works to promote and support professionalism in the field of early childhood education and to improve quality through the provision of a statewide system of professional development. OCFS also oversees and operates Maine’s Help Me Grow program which helps to connect families with children up to age 8 to needed services and programming.

Maine DOE’s Early Learning (EL) Team promotes children’s learning by offering information and resources to support public early elementary, preschool and Head Start teachers and administrators involved in educating Maine’s young learners. The EL staff provide guidance and tools to increase access to high-quality public preschool and Head Start; strengthen and align instruction, assessment, and curriculum to established standards; support the professional development of early childhood (pre-k to Grade 3) professionals in public preschools and Head Start; assist families in supporting their child’s learning; and inform policy, planning, and research-based practice.

Preschool Development Renewal Grant Awarded to Maine

The Office of Child and Family Services, in partnership with the Early Learning Team and Child Development Services at DOE, was awarded a Preschool Development (B-5) Renewal Grant in December 2022.

The grant award is \$8 million per year for three years. The grant supports efforts to strengthen needed infrastructure and capacity to create a more coordinated, efficient, and high-quality mixed delivery system for children ages birth to five and their families, targeting key needs that surfaced in the initial PDG needs assessment.

The initiatives funded through the grant build upon the successful cross agency work of the Children’s Cabinet to ensure that all children enter kindergarten prepared to succeed in the early elementary years. The team leading the implementation of the Preschool Development Grant includes staff from OCFS, the Early Learning Team and the Governor’s Office of Policy Innovation and the Future. This staff is committed to ensuring coordination across the entire early childhood system with an added focus on improving coordination and transitions into the early elementary years at public schools. Most of the PDG initiatives are underway and are highlighted throughout this report.

Expanded Investments in Maine’s Early Childhood Education Workforce

The 2019 Preschool Development Grant Needs Assessment identified low pay as a primary barrier to recruiting and retaining teachers in child care programs. In the 2024 PDG needs assessment, child care directors and owners continued to report significant challenges with recruiting and retaining qualified educators.

To address concerns about recruiting and retaining staff, the Office of Child and Family Services included \$200 per month stipends as part of the monthly Child

Care Stabilization Grants funded through the federal American Rescue Plan. In 2022, the Governor and Speaker Ryan Fecteau worked together to include funding in the supplemental budget to continue these stipends with state General Funds following the expiration of the stabilization funds. The budget required the program to provide tiered benefits, providing higher stipends to early childhood educators with greater experience and level of education.

The rules for the tiered Early Childhood Educator Workforce Salary Supplements became effective in December 2023. The program is now reaching an average of 7,439 educators per month.

The decision to move to a system of tiered salary supplements was informed by feedback from the child care listening sessions in the fall of 2021. A majority of participants from all of the listening sessions advocated for a tiered approach based upon education and experience. There was a clear preference for monthly payments and wage supplements over tax credits.

Efforts to Expand Maine’s Child Care Infrastructure

When developing her 10-year state economic plan, the Governor traveled the state speaking to employers about their needs. Access to child care for their employees was often towards the top of their lists. Recognizing the need to increase access to quality child care, Governor Mills’ Jobs and Recovery Plan included \$15 million for grants to renovate, expand, or construct child care facilities to increase the number of licensed child care slots.

Prior to the pandemic, analysis by the Bipartisan Policy Center, in partnership with Maine’s Office of Child and Family Services, confirmed that Maine has a gap in formal licensed child care for working parents. While Maine’s overall gap in child care was less than most other states, the analysis estimated that the number of Maine children under six with all available parents working exceeded the number of licensed child care slots by 4,920 (9.2%), and the gap was higher in rural areas.



The pandemic exacerbated this problem for families in Maine. The state experienced a decline in the number of slots during the pandemic. Stabilization grants and other key investments provided with American Rescue Plan Act funding during and following the pandemic were instrumental in keeping the industry stable and helping programs to bounce back following the pandemic. However, the Governor, OCFS staff and the Children’s Cabinet remained concerned about the continued gap in child care slots. More slots are needed to meet the needs of working parents in our state.

In response, the Child Care Infrastructure Grant program provided the start-up and expansion grants funded through the American Rescue Plan helped to address the ongoing child care gap in the state by providing grant funding to programs, both center and home-based programs, to cover “bricks and mortar” costs to expand the number of child care slots throughout the state. The grants prioritized the expansion of slots for infants and toddlers and in underserved areas.

As of January 2025, the program was closed after awarding more than \$14.5 million in grant funding. The Office of Child and Family Services awarded 263 grants to support the start-up or expansion of child care facilities, both center-based and family child care programs. These awards are estimated to create almost 6,338 child care slots in all 16 counties.

Stipend Tier	ECE Workforce Registry Levels
Tier 1	Levels 1, 2, 3, and 4
Tier 2	Levels 5 and 6
Tier 3	Levels 7 and 8

County	Grant Amounts	Anticipated Slots	Number of Awards
Androscoggin	\$1,143,400.00	563	30
Aroostook	\$813,500.00	345	15
Cumberland	\$2,872,100.00	1652	54
Franklin	\$737,900.00	193	8
Hancock	\$789,000.00	148	7
Kennebec	\$1,494,900.00	740	35
Knox	\$234,100.00	88	6
Lincoln	\$441,300.00	82	5
Oxford	\$844,500.00	349	14
Penobscot	\$1,236,500.00	553	23
Piscataquis	\$554,700.00	146	6
Sagadahoc	\$344,600.00	73	6
Somerset	\$604,000.00	326	8
Waldo	\$34,000.00	46	4
Washington	\$674,100.00	134	6
York	\$1,708,700.00	900	36
TOTALS	\$14,527,300.00	6338	263

Statewide Operation of Early Childhood Mental Health Consultation Program

Stakeholders participating in the 2019 PDG needs assessment identified the increased stress of working with children with high needs as a factor in staff retention. In response to this identified need, legislation spearheaded in 2023 by Senator Cathy Breen expanded Maine’s infant and early childhood mental health consultation program, the Early Childhood Consultation Partnership, from 8 pilot sites to a statewide program. The 2024 PDG needs assessment points to a continued need to provide the necessary tools to early childhood educators to address the social emotional needs of children in their programs.

The Early Childhood Consultation Partnership is an evidence-based, time-limited, and intensive consultation service that helps child care providers, educators, and caregivers of young children build both an understanding of the social-emotional needs of children and the skills to meet those needs. All services are provided at no cost to providers and families. Mental health consultants trained in the ECCP model work

directly with child care staff, educators, and the child’s caregiver(s) to identify and implement strategies to support children’s emotional wellbeing and effectively manage challenging behavior that may otherwise jeopardize a child’s ability to participate in an early childhood education setting.

In addition to offering consultation services to Head Start and licensed child care programs, OCFS has worked closely with the Department of Education to provide programming to public schools for children in pre-k to 2nd grade and licensed afterschool programs. A statewide cross-agency workgroup, which includes staff from OCFS, Child Development Services, Maine Roads to Quality, and the Center for Community Inclusion & Disability, meets regular to support the integration of ECCP into the continuum of supports for early care and intervention.

Since implementation began in January of 2021, more than 200 classroom consultations have occurred with the potential to impact more than 3000 children and the consultants have provided 300 child-specific

Seedling to Sunflowers: Investing in Maine’s Future

For the teachers at Seedlings to Sunflowers, a non-profit child care center in Gorham, early childhood learning is a fundamental community investment that is a critical part of kindergarten readiness. That’s something owner and advocate Meghann Carrasco has seen an increasing amount of support for in recent years.



“There are more Child Development Services (CDS) interventions, and we’re recognizing that it’s important to have that before they enter school,” said Carrasco. “I’ve definitely seen a shift in the general public’s understanding of pre-k, and I want to make sure that it is seen as a professional livelihood.”

She’s no stranger to the issues facing child care and the critical need for it as a way to support a healthy, growing workforce in Maine. When she founded Seedlings to Sunflowers six years ago, it was the result of years of prior work in the sector, including working in child care and nannying as a college student in Bangor.

“I love education. I’m an eternal student,” she said. “I love literacy and watching my children’s literacy and math skills develop. The more I’ve gotten into the field, the more in love with it I am.”



Thanks to a Child Care Infrastructure Grant of \$250,000 back in March 2023, she’s been able to invest in an 8000 square foot space that contributes to the expansion of access to preschool for ages 3 through 5, conveniently located along a major commuter route in town. Seedlings and Sunflowers currently operates 4 pre-k classrooms, with space to expand to a maximum capacity of 139 Pre-School students serving ages 3-5.

She’s partnered with Gorham schools to offer public pre-k in two of these classrooms and on supporting social and emotional learning for all of her students in order to prepare them for kindergarten.

“Our population is growing and we’re going to need more care,” she said. “We wouldn’t have been able to do this without the grant.”

consultations. Home visits and family involvement is a key component of the child-specific consultation services.

The Maine ECCP program has shown year-to-year growth in improvement in classroom climate outcomes as measured by the CLASS tool, with 80% of classrooms receiving ECCP classroom consultation showing improvement in at least one academic or social emotional dimension in the pre-k CLASS tool in 2024. The CLASS tool is a research-based tool for measuring, evaluating, and monitoring change in teacher-student interactions and is used within public pre-k and some child care programs nationwide to measure outcomes in academic and social-emotional outcomes for children.

OCFS also monitored data regarding children who remained safely enrolled in the child care program at set intervals following completion of the ECCP service. Immediately following completion, all programs have reported retaining 100% of their enrolled children. This was still the case at the one-month follow up point. After 6 months, the overall retention rate for children is 97.7%.

OCFS will continue to monitor outcomes and ensure that ECCP services are delivered with high quality and are accessible throughout the state so that children can enjoy nurturing, responsive, and high-quality early care and education.



Improving Transitions for Young Children into Public School

Starting public school can be a significant transition for children and families, filled with mixed emotions, worries, and many questions. Smoothing this transition for children can help them to adjust to their new settings and better prepare them to learn and succeed in school. The implementation of effective practices and strategies that build connections across schools and communities and improve family engagement can lead to better outcomes for children.

In 2023, staff constructed a website devoted to support families/caregivers as well as educators with materials to support transitions into public school. Staff continue to update resources on the website and have expanded opportunities for teachers and administrators from SAUs to participate in professional development to support transition planning. One of the key resources included on the website is a collection of professional learning modules geared for community teams composed of educators, early care and education providers, parents, and caregivers to use to deepen their understanding of transitions and strategies to support successful transitions as well as to develop responsive transitions plans for their local communities.

For the current 2024-2025 school year, the Early Learning Team established a new year-long technical assistance and mini-grant opportunity, with funding from the Preschool Development Grant, to support schools to build and implement plans to bring together community programs serving young children and families to enhance transitions into public schools for children and families. Currently 4 SAUs are participating in the mini-grant opportunity with a second round to be released in early 2025. The technical assistance with DOE staff guides schools in developing concrete transition plans that include strategies, events and activities for identifying and engaging families prior to school entry and during that first school year to build relationships, educate parents/caregivers and help families feel part of the school community. In addition, the plans include strategies for communicating and engaging with early

childhood education programs serving young children in the community. These communications can be invaluable in easing and supporting transitions of children and families across the two systems.

Learning Series to Increase Knowledge of Early Childhood Development and Programming for School Administrators

In response to the significant growth in the number of Maine elementary schools operating public pre-k programs over the last decade, Maine’s PDG Needs Assessment pointed to the need for more training for elementary administrators on quality care and education for young children. Between 2020-2022, Maine researched, designed, and piloted the Leading Early Learning series, which is grounded in the National Association for Elementary School Principals six research-based competencies for effective instructional leadership among pre-k to grade 3 principals. The competencies focus on aligned learning continua, environments, developmentally appropriate teaching, assessment, professional development, and engaging families and communities. The series includes five online, facilitated modules, each coupled with professional learning community experiences, along with

participation in a statewide early childhood conference. More than 60 administrators have been supported through the cohorts offered during the previous three school years. A fourth cohort is underway for the 24-25 school year serving another 20 administrators. Findings from evaluations of the first two cohorts documented significant increases in participant:

- knowledge of early childhood development standards and best practices;
- ability to identify resources and key components of high-quality early childhood programming; and
- confidence to employ early childhood leadership practices and actions.

Administrators who have completed the series are able to participate in an ongoing community of practice (COP) that enables them to remain connected with each other, share successes, and collaboratively address problems of practice. Promising practices identified through the Leading Early Learning series and subsequent COPs will be shared with institutions of higher education and Maine’s State Board of Education to inform requirements for administrators working in early elementary settings.





Grants to Expand Public pre-k to More Four-Year-Old Children in Maine

The Children’s Cabinet is committed to expanding public pre-k for 4-year-old children in Maine. Public pre-k for 4-year-old children is an important component of a mixed delivery system for early childhood care and education for children from birth through age five. Public pre-k programming, which provides free education for 4-year-olds, is currently provided through School Administrative Units in Maine. In 2024 efforts by the state led to an all-time high in the number of 4-year-old children enrolled in public pre-k with enrollment at 6,448 children or 57% of all 4-year-olds.

The Governor included \$10 million in her Maine Jobs and Recovery Plan to support the expansion of public pre-k. This funding provided four rounds of grants to School Administrative Units (SAUs) for start-up costs to help overcome barriers to expanding or starting up new programs in their schools. In addition, the funding supports SAUs to expand from part-time programming to full day, full week programming. Research shows that full-day/full-week programming has greater benefits for children including higher scores in school readiness, greater school attendance and reduced chronic absences. Full-day/full-week programming results in children having fewer transitions throughout the day and better meets the needs of working parents who are juggling work and care for their children.

Over the last decade, the state greatly expanded the number of schools providing public pre-k to 4-year-

old children. Not surprisingly, enrollment numbers dropped dramatically during the 2020-2021 school year when many schools were operating on a hybrid schedule with a mix of in-person and virtual school days. In 2021-2022 school year, enrollment in public pre-k rebounded but remained lower than in previous school years. With the support of the pre-k expansion grants, the Department of Education had awarded grants to 32 School Administrative Units (SAUs) to expand public pre-k to 4-year-olds. These grants provided start-up funds to support elementary schools to start new public pre-k programs, expand existing programs and/or move from part-time programming to full-week, full-time programming. Eleven of the SAUs expanded programming through partnerships with child care or Head Start programs in their communities. To date, the grants have led to more than 1100 seats created or converted to fulltime.

PDG Funds Pilot Projects to Expand Public pre-k through Partnerships

Through the PDG B-5 Renewal Grant, the Early Learning Team is leading an effort to explore different funding and delivery models for public pre-k expansion by piloting expanded partnerships between schools and community partners. To guide this work, the Early Learning Team at DOE has pulled together an Advisory Team, representative of Maine’s early care and education mixed delivery system. This team has been tasked with: 1) studying the current funding model for public pre-k; 2) exploring opportunities for greater partnerships between schools and community partners, such as child care and Head Start programs to expand public pre-k; 3) considering the ramifications of various partnership and funding designs, and 4) recommending pilot projects to test new designs that will increase access to public pre-k through partnership models.

The Early Learning Team awarded two pre-k pilot grants for the 2024-25 school year. This first round of grants supporting the opening of two new partnership classrooms in Scarborough and Sanford. Both classrooms are operating full day/full week programs

that align with the school day. The Sanford Y operates one full classroom and provides afterschool wrap around programming for ten of the four year olds in its program. Shooting Stars, the partner in Scarborough operating their pre-k program, has been able to mix typically developing children with children with disabilities in their special purpose classrooms during free play and mealtimes, creating an inclusive environment for all the children.

The Early Learning Team in partnership with the pre-k Advisory Committee is currently pulling together the Request for Application for the second round of pre-k partnership grants for the 2025-2026 school year.

Strengthening Early Childhood Care and Education Through Local Collaborations

First 10 Community School Pilots

With funding from the PDG (B-5) Renewal Grant, the Early Learning Team at DOE has awarded grants to 7 School Administrative Units (SAUs) to establish First 10 Community School Pilots. In 2023, the team awarded a first round of 4 grants and in 2024, the team awarded three additional grants to SAU’s. First 10 Community Schools (F10CS) bring together school systems, early childhood programs, and community partners/agencies to improve care and education for young children and their families throughout the first 10 years of children’s lives.

First 10 Community School partnerships work to improve teaching and learning, deepen partnerships with families, and connect comprehensive services to children and families. Typical First 10 practices include, but are not limited to:

- fostering engagement of families with schools and community partners,
- providing play and learn groups linked to elementary schools,
- coordinating connections to health and social services,
- connecting child care providers with elementary schools,
- improving the quality of early childhood programs,
- coordinating the transition to kindergarten,
- conducting joint professional learning among early childhood, pre-k and elementary teachers, and
- aligning and improving elementary grade curriculum and instruction.

The teams have all completed a strategic planning process, identifying strengths, needs and resources in their communities and goals for engaging families and supporting smooth transitions into school. They have established working groups to implement key strategies to reach their goals.



All of the awardees have successfully hired F10CS Outreach Coordinators. These outreach coordinators are building connections and relationships with parents of young children in the community through play and learn groups and with staff at local child care programs to strengthen connections across the early care and education system and the school system and begin to develop and implement strategies for supporting smoother transitions into kindergarten for children and families.

Play and Learn events connect children from birth to age 5 and their families with school staff. Children engage in playful activities that support their development across domains and provide experience with group settings. Facilitators model quality interactions and support families in building an understanding of their child’s development. Families are introduced to the Basics parenting framework and received support in connecting with needed resources and services. The goal is for Play and Learn series to run fall, winter and spring with some teams considering a summer session as well.

Comprehensive plans to support children and families during the transition into public school are another key strategy. Each community’s plan is unique and builds upon practices and traditions already in place. Efforts include beginning the transition process earlier and providing clear communication and support to families around the registration process. Transition plans include opportunities for families and children to explore the school, meet staff, learn about school procedures and ask questions. Teams also explore strategies for connecting with community-based providers

to learn from their experiences and ensure a warm hand off for families between early childhood programs and providers.

Teams who implemented these strategies last year have received positive feedback from their communities about both the Play and Learn events and the enhanced transition plans. They have also received suggestions for changes which have been incorporated into their efforts to improve both experiences for children and families. The Sanford and Limestone-Caswell teams were invited to share about their work at the national First 10 Network meeting in December.

The Early Learning Team will continue to support the First 10 pilots sites in 2025 to build on their work and implement strategies to support building connections across the early childhood mixed delivery system and implement strategies to support smooth transitions for young children into public school.

First4ME Community Coalition Pilots

First4ME was established in statute in 2021 and seeks to improve the social, emotional, educational, and health outcomes for children under the age of six through increasing access to high quality early care and education. The program is modeled on a two-generation, community-based approach for a coordinated birth to kindergarten-entry program that integrates comprehensive resources and services into child care settings and incorporates wrap around services, including family support and stabilization.

Currently, First4ME is in four counties with four nonprofits selected as the lead pilot sites through a competitive bid process. These providers are supporting

“Our overall experience with the First4ME pilot program has been nothing but tremendous. The in-person coaching and communication with our coach has dramatically increased the confidence and skills of our teaching team. The skills and confidence developed by the teaching team has been noticeable in day-to-day operation and curriculum development. It goes without saying that the additional funds to update learning materials and equipment has had a tremendous impact on the quality of the programming we can offer.”

—ANDY ORAZIO, SANFORD / SPRINGVALE YMCA

Sanford’s First 10 Community Schools Team Supports Smoother Transitions Into Kindergarten through Partnerships

With the goal of making connections across the public school system and the early childhood education system in Sanford, the First 10 Coordinator Shana Palmer and the team in Sanford brought together teachers from both systems for a day of joint professional learning in October. Palmer and Sanford Pride Principal, Susan Inman, provided information on Sanford’s Transition to Kindergarten plan and the Basics parenting campaign, and shared how all early childhood educators can get involved in both initiatives. Building stronger relationships across the systems will support smoother transitions into kindergarten as teachers look for opportunities to coordinate and share information about students entering kindergarten.

In addition, Louisa Anastasopoulos, a First 10 Facilitator from the national Education Development Center, led the group in an exploration of the continuum of the literacy and social emotional standards in Maine Early Learning and Development Standards for Preschool Students. The discussion of the alignment and differences between preschool and Kindergarten standards and how they support development in their classrooms was rich and is just the beginning for joint professional learning opportunities in this community.



The First 10 Community Schools Team in Sanford pulled together this "Hike the Kindergarten Trail" for parents of children entering kindergarten. The flyer was developed to educate parents about opportunities to engage with teachers and the school prior to the first day of school to support families through the transition into kindergarten.

18 child care providers, partnering with seven school districts, and serving 576 children. In 2023 and early 2024, these organizations developed their programs, hired staff, onboarded providers, served families, and established baseline data.

Through First4ME, the pilot sites offer support for child care providers to improve and sustain their quality programs, including current efforts to retain the vital child care workforce essential to Maine’s economy. During the first half of the pilot, First4ME has implemented over one thousand technical assistance engagements totaling more than 5,000 hours with child care providers, child care staff, families, coalitions and school districts. Coaches across sites have supported child care staff and leadership in making changes to their environments that have improved functionality, safety and child behavior.

Pilot sites have already found positive progress through targeted fiscal support and responsive technical assistance for child care providers and their staff. Embedded professional development and a positive workplace climate and culture are layered on other statewide efforts to support early childhood educators, including the ECE Salary Supplement.

An evaluation of the pilot and its impact on children, families, child care providers, and schools is being conducted. The evaluation will inform future decisions regarding the program with consideration for sustainability of the First4ME program and possible expansion to other communities interested in implementing this framework.



“It has been absolutely amazing! The support, guidance and mentorship we have received so far was outstanding. We are always open to suggestions and First4ME has literally made our program shine. The options to grow to become a better teacher are nearly endless. The trainings that are offered and the opportunity to receive the CDA is just wonderful. Our First4ME coach has become a part of our team, the teachers receive all the support they need, as well as the children absolutely love her. We are so grateful to be part of the First4ME journey.”

—TINA HOBBS, OWNER LITTLE WORLD 2 FIRST4ME YORK



INTEGRATING AND ALIGNING PROGRAMS

The Children’s Cabinet Early Intervention Workgroup Focused on Integrating and Aligning Programs and Services for Children from Birth through Age Five

The Children’s Cabinet Early Intervention Workgroup is comprised of DHHS and DOE staff who provide early intervention services for children birth through five years old. Members of workgroup include staff from the Maternal and Child Health Division at the Maine CDC, the divisions of Children’s Behavioral Health and Early Care and Education at the Office of Child and Family Services, the Office of Family Independence, the Early Learning Team at DOE, Child Development Services, Office of MaineCare Services and the DHHS Commissioner’s Office.

The Early Intervention Workgroup provides an opportunity for staff managing early intervention policies

and programs for young children to coordinate and collaborate efforts to better serve families with young children and ensure that young children receive the necessary screenings, evaluations, and services to support their healthy development. The Early Intervention Workgroup is focused on the implementation of three key initiatives that support its goal of integrating and aligning maternal and early childhood programs and services. This includes: 1) the implementation of Help Me Grow, 2) efforts to increase rates of developmental screenings through the implementation of the Ages and Stages Questionnaire (ASQ-3) on-line and 3) the alignment of the perinatal system of care initiatives with other early childhood initiatives.

Connecting Families to Needed Programs and Services Through Implementation of Help Me Grow

Help Me Grow (HMG) is a free informational service linking families and professionals to information about child development, pregnancy, and community resources for children and families. The intent of the program is to increase knowledge of the services available for children and families and connect families to service providers. Help Me Grow also enhances connections among service providers to ensure an accessible and interconnected system. HMG offers developmental screenings to help parents better understand their children’s developmental milestones and support referrals to needed services. Parents can complete the ASQ screening tool and if the results indicate areas of concern, they can use the information to speak with their child’s PCP and/or other providers.

Help Me Grow (HMG) has been fully operational in Maine since November 2022. Since its inception as the central access point connecting families of children 0-8 years of age with developmental information and resources, HMG has served over 1500 children and provided 223 development screenings. Many families called Help Me Grow to obtain information and resources about their child’s developmental milestones or to get support to address their child’s behavioral and/or mental health issues. Parents’ basic needs for

their child, such as diapers, formula, and car seats were the second most common concern among parents statewide. Parents of the youngest children served by HMG most commonly seek out resources to meet their child’s basic needs.

HMG has identified many barriers that families frequently encounter when attempting to access resources within their communities. A total of 131 barriers were identified among 89 families, with some families experiencing multiple barriers at the same time. The most common barriers identified were waitlists (21%), followed by eligibility (20%) and language barriers (9%). Of these cases with known outcomes, 80% of families experiencing a barrier were successfully connected to one or more services, largely due to the hard work of HMG Family Support Specialists.

The HMG Outreach Specialist works daily to ensure that healthcare providers, community providers, and early care and education providers are aware of HMG. To date, 14,920 community providers and professionals have received an outreach presentation regarding how HMG can assist Maine’s families.

Since its inception, HMG has been closely tracking data to understand resources that families need when they contact HMG. As a result of this work, in 2024, the HMG team trained five of their staff to become trained Child Passenger Safety Technicians, certified

by Maine’s Highway Safety Department, who can provide child passenger seats at no cost to qualifying families. As HMG works with families to provide child safety seats and educate about proper use and installation, they also connect families to additional resources.

The Office of Child and Family Services provided grants to four Community Based Organizations who work directly with families with young children to hire Community Health Workers. These Community Health Workers conduct outreach and provide parents and caregivers with the tools they need to support the healthy development of their children. This includes conducting developmental screenings and connecting families to early intervention services, programs to meet their basic needs and other supports.

Ages and Stages Screening Questionnaire

A team from Maine DHHS in partnership with the Cabinet’s Early Intervention Workgroup, has begun implementing the Ages and Stages Questionnaire (ASQ) online system to improve access to developmental screening for organizations working with children under the age of 5. The system allows programs and families to do developmental (ASQ-3) and social emotional screening (ASQ-SE) using validated tools either online or by paper and then entering the information online so that screening data can be tracked.

The American Academy of Pediatrics recommends developmental screenings to occur at 9 months, 18 months, and 24 or 30 months. The ASQ toolkit has screenings available from 2 months up to age 5 years old. The ASQ-SE social-emotional screener is the second tool through the online system and has screening tools from 1 month up to age 6 years old.

The purpose of implementing the ASQ on-line system is to improve coordination among professionals, allow for greater access to developmental screenings and support the goal of the Children’s Cabinet to increase rates of developmental screenings. By monitoring

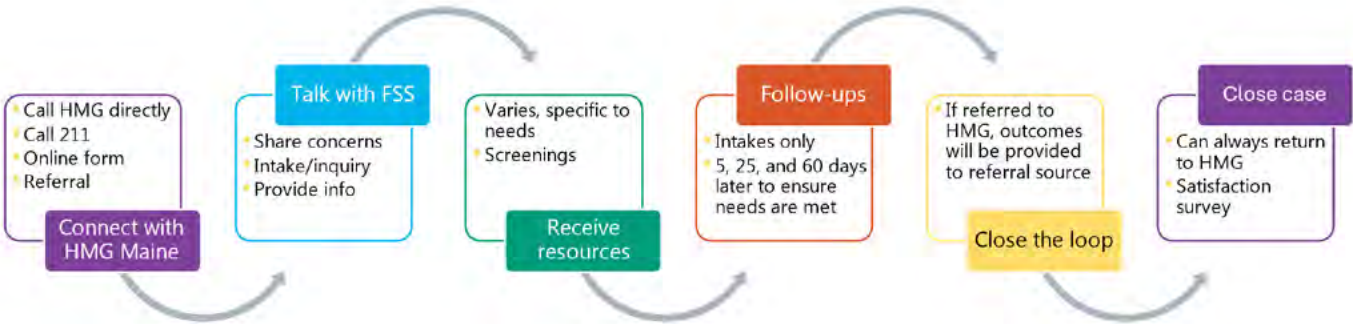
developmental milestones and using regular screenings to assess development, parents and health providers can identify any issues early.

In 2024, the team at Help Me Grow hosted screening events at 9 sites in Hancock, Penobscot, Aroostook and Androscoggin counties. The team screened 103 children through these outreach events. The team at Help Me Grow is focused on ramping up ASQ training for professionals working directly with young children. Help Me Grow has also developed two comprehensive trainings, offered at no cost to licensed child care providers upon request. These trainings are designed to enhance the quality of care provided by child care programs, contributing to improved quality ratings. These trainings have been approved by the Maine Roads to Quality Professional Development Network, ensuring participants receive hourly training credits and certification credits applicable to other professional development goals.

Building Parent Leadership

In 2024, the Office of Child and Family Services and the Governor’s Office of Policy Innovation and the Future partnered with Portland Empowered and the Educare Program at Kennebec Valley Community Action Program to pilot a new trusted messenger leadership program for parents with young children. The team developed 24 hours of curriculum and training for 12 mothers who came together to learn about child development, programming and policies for young children and their families and transitions into public school. Much of the trainings were facilitated by parent leaders who had participated in parent leadership training programs through KVCAP and Portland Empowered. The mothers who participated in the trusted messenger training went on to host two community meetings within for fellow parents from their communities. As the program grows and the alumni network expands, the goal is to engage with alumni to support additional families within their own communities.

Help Me Grow Maine Experience





Strengthening Maine's Perinatal Systems of Care

Since 2019, the Department of Health and Human Services (DHHS) has led the Perinatal System of Care Working Partners group to work on strengthening the system with partners in health systems, social services, and state agencies. The perinatal system of care is being defined as preconception (3 months prior to pregnancy) to one-year post-partum, after delivering a baby, and includes the care of the baby from birth to first birthday.

Foundational work was completed in 2019-22 to strengthen the perinatal system of care including quality improvement efforts to reduce infant mortality rates by improving Safe Sleep practices and care of Substance Exposed Infants (SEI) through the implementation of the Eat, Sleep, Console (ESC) protocol in birthing units. In 2021, DHHS expanded its work with work groups to evaluate the Levels of Care (LOC) at hospitals in Maine, assess maternal transportation, and work with clinicians on standardization of a preterm labor risk assessment. As part of this work, several guidance documents were completed including the Maine Perinatal and Neonatal Level of Care 2022 Guidelines (PDF), Maine Hospitals Level of Maternity and Newborn Care Map with Contacts (PDF), and policy for Hospital Notification of Changes in Level of Care: Notice of Maternity and/or Newborn Care Changes Policy Effective (PDF) which continue to be updated.

In 2023, staff from the DHHS Commissioner's Office and Maine CDC (Maine CDC) updated the 2020-2022 Perinatal System of Care Working Partners Goals and Strategies to align with the Children's Cabinet Plan for Young Children. These strategies include:

- Continue strengthening the Perinatal System of Care infrastructure (three months preconception to one-year post-partum) including family leadership, parental partnership, and diverse representation.
- Access: Maintain access to high quality perinatal care in Maine by expanding post-partum coverage to 12 months for pregnant people enrolled in MaineCare, building linkages between early intervention and medical systems to better serve diverse and underserved populations, and improving the connection to perinatal consultation by expanding the obstetric telehealth network to all birthing hospitals.
- Workforce: Support perinatal health by assessing the current capacity of the perinatal workforce in Maine, improving perinatal training and education opportunities for students and current providers, and exploring the use of community healthcare workers to support maternal and child health.
- Quality: Ensure access to high-quality perinatal care, including behavioral health, for all pregnant women, pregnant people, and infants in Maine at the appropriate Level of Care (LOC) by improving data collection and case reviews to inform quality improvement and policy and encouraging all birth hospitals to participate in the Perinatal Quality Collaborative for Maine and implement perinatal patient safety bundles.

In 2024, there were many programs, working groups, activities, public education campaigns, and policies across DHHS, Department of Education (DOE), and the Department of Public Safety (DPS), to improve the Perinatal System of Care. The state also worked with several organizations and health systems that received federal funding to work on the Perinatal System over the last five years.

Reports to Support State Efforts

There have been several needs assessments done to support strategic planning to strengthen the Perinatal System of Care over the past five years. In 2024, the Maine CDC finalized the 2023 Maine Perinatal Health Disparities Needs Assessment by Market Decisions Research with a focus on maternal morbidity and mortality and access to maternity care services for rural and diverse communities and presented its findings to partners. This report complements other needs assessments that include:

- Understanding and Addressing the Drivers of Infant Mortality in Maine (2020).
- Early Childhood Comprehensive Systems Needs Assessment (ECCS) (Maine CDC) (2022-23)
- LD 1113 Report: Racial Disparities in Prenatal Access in Maine Report to the Maine Legislature Submitted by the Permanent Commission on Racial, Indigenous, and Maine Tribal Populations on January 15, 2022
- Building Maine's Perinatal System of Care – A Roadmap for the Future (2023)
- Needs Assessment of the Obstetric Workforce in Maine's Rural Hospitals - Roux Institute at Northeastern University (February 2024)

- Maine CDC Maternal, Fetal, and Infant Mortality Review Panel (MFIMR) Report 2023
- In 2024, the MCH team worked towards completing its five-year Maternal and Child Health Needs Assessment with Altarum that is due in July 2025 and includes perinatal priorities.

Maine CDC Programs Support Newborns, Pregnant People and New Parents

The Maine CDC oversees many programs that directly impact the care for children and families in the perinatal period. The MCH program runs the Newborn Screening and Surveillance that includes newborn bloodspot screening for 33 genetic conditions, the newborn hearing program, CMV and congenital heart disease screening. The screening and surveillance team also makes referrals to early intervention services and care coordination for babies born in Maine. In 2024, the Maine CDC received a four-year HRSA Cooperative Newborn Screening System Priorities NBS Co-Propel Program Grant to improve the Newborn screening program, complete Quality improvement (QI) activities around collection of bloodspot specimens, testing of specimens, and reporting of results, and expand access to diagnosis and treatment resources for providers and families.





In addition, the Maine CDC administers the Children and Youth with Special Health Care Needs (CYSHCN) Program which plays a crucial role in supporting families and children facing chronic physical, developmental, behavioral, or emotional conditions funded through the Title V: Maternal and Child Health Block Grant. The program provides resources, guidance, and health coordination to ensure that CYSHCN, their families, and medical providers receive the specialized services required for optimal health, development, and wellbeing. In 2024, the Maine CDC conducted a Blueprint for Change Systems Asset and Gap analysis where they engaged nearly 100 people to explore their experiences, feedback, and recommendations related to advocating and supporting children and youth with special health care needs. Final data, findings and recommendations will be released in 2025.

Maine has two universal access points for families to assist families in identifying appropriate services in the perinatal period: the Cradle ME referral system and Help Me Grow Maine. The MCH program supports

the Public Health Nursing (PHN) Program and the Cradle ME Referral System and the state match for the Federal MCH Block Grant to ensure families have access to PHN, Maine Families Home Visiting (MFHV), WIC, Child Development Services and the MaineMOM program.

In addition to running the Cradle ME Referral System, Public Health Nursing (PHN) provides in-home nursing services to perinatal families including prenatal, postpartum, and newborn physical nursing assessment, breastfeeding support with Certified Lactation Consultants, and screenings and assessments for perinatal mood disorders, home safety, domestic violence, child growth and development, and safe sleep. Public Health Nurses educate families on perinatal health issues, including signs and symptoms of preterm labor, warning signs about health issues after delivering a baby, medication guidelines during pregnancy and/or while breastfeeding, and seatbelt safety while pregnant and/or car seat safety. PHN also educates families on substance use and misuse during pregnancies and provides support for substance exposed infants, utiliz-

ing the Eat, Sleep, Console model. The Public Health Nursing Division is active in all Maine communities through parenting support groups, vaccination clinics, community and school partnerships, board and panel representation, and community events. Through this work, Public Health Nurses provide families with intensive case management by connecting them with both internal and external partners, facilitating referrals to health care providers, and connecting them to appropriate community resources and programs across all special populations and cultures.

Other critical infant health work at the Maine CDC that impacted the perinatal system of care was the Maine Immunization Program roll-out of the new Respiratory Syncytial Virus (RSV) drug, Nirsevimab, which helps prevent RSV in newborns and young children, to the birthing hospitals and primary care office in the state during the 2023-24 RSV season with over 2700 doses administered. The Maine CDC also worked to spread awareness of sexually transmitted illnesses that impact infants including Hepatitis C and Congenital Syphilis with the state seeing an increase in cases. In 2023, the Maine CDC hired a new Hep C Coordinator who is working on improving Perinatal Hep C education, testing, and connecting clients to treatment. In 2024, the Maine CDC also hired a part time Cytomegalovirus (CMV) coordinator to create a CMV screening program which is required by Public Law 2021, Chapter 698.

In addition, the CDC oversees the federal Women, Infants and Children's program that assists pregnant people, women and birthing parents who had a baby in the last six months, and children up to age of five access healthy foods. WIC continues to increase its monthly enrollment to over 18,500 people utilizing the benefit and over 30,000 clients per year. In 2024, under WIC the Farmers Market Nutrition Program redeemed a record amount of \$245,000 of Maine grown fruits and vegetables and the WIC program moved to a web-based information system, which is the most advanced WIC eligibility and benefit determination system in the country at this time.

Maine CDC Partners with EMS and Hospitals to Address Maternal Emergencies

The Maine CDC is also working with their Perinatal Outreach Education Coordinator (POEC) Perinatal Nurse Educators and the Maine EMS for Children (EMS-C) program to continue to build infrastructure in the state around caring for maternal emergencies. The Maine EMS for Children (EMS-C) program, within the DPS, received federal grant funding in April of 2023, providing 100% funding for the next four years. Efforts are focused on EMS and Emergency Department readiness for pediatric and infant emergencies, improving quality metrics for care and transport of infants and children, improving education opportunities, and collaboration across the continuum of care for infants, children, and pregnant people. In 2024, The Maine CDC MCH Team worked with the EMS-C program to purchase a Kangoofix Neonatal Transportation Device for each EMS agency in the State to ensure safe transport of healthy newborns born in unintended locations by EMS agencies to a birthing hospital with their caregiver. (add 2024 data)

In 2024, the two Perinatal Nurse Educators that work with hospitals in the northern and southern regions, continued to teach educational courses, including Advanced Life Support in Obstetrics (ALSO®), Basic Life Support in Obstetrics[Equation] (BLSO), Fetal Monitoring, S.T.A.B.L.E. program that provides post-resuscitation/pre-transport stabilization care of sick infants, Transport Conferences with the birthing hospitals, and simulation training for maternity emergencies with obstetric providers, called MomSIM1.0 and MOMSim2.0.

Since 2023, Perinatal Nurse Educators and the EMS-C program have offered (BLSO) to ensure training in maternity emergencies and in its first year, 11 BLSO courses were completed by 150 EMS clinicians, nurses, physicians, and advanced practice providers and additional funding was secured for future courses. In 2024, 13 BLSO courses were completed by 145 clinicians (63 EMS clinicians, 69 nurses, and 13 physicians and advanced practice providers. Additional funding was

secured for future courses. As part of this process, the EMS-C program also worked with the state EMS Medical Direction and Practices Board to update protocols for maternal and newborn transport. The January 2024 statewide EMS protocols included updating evidence-based clinician care highlighting the treatment of seizures in pregnancy and in the up to 6 weeks postpartum period emphasizing Magnesium administration as the first treatment for seizures in eclampsia. With collaboration and recommendation from obstetricians, Maine EMS added Oxytocin as a medication option for the prevention of post-partum hemorrhage for use by paramedics. An updated Childbirth Protocol also emphasizes the importance of maintaining warmth of the newborn, and options to help achieve this. Also included in this protocol is the technique to maintain the baby's airway in a breech birth. In the Neonatal Resuscitation Protocol, the dose of epinephrine has been updated for consistency with national Neonatal Resuscitation Program (NRP) recommendations.

Working Groups

There are several groups in Maine working to improve the perinatal system of care under the umbrella of the different state offices and federal grants. Some of these include the DHHS Perinatal Systems of Care Working Partners group that continued to meet quarterly in 2024 and the Perinatal Leadership Coalition, which is a voluntary organization of nursing leadership and educators serving the Obstetric and Neonatal units of the 21 birthing hospitals in Maine that is facilitated by the Me CDC Perinatal Outreach Education Coordinator (POEC) and meets bimonthly. In 2024, the Maine CDC also started a Maternal Health and Wellness Coalition, comprised of a diverse group of providers and people with lived experience seeking to foster connections between outpatient providers, community-based providers, labor and delivery units, birthing centers, home birth providers. This mirrors the Perinatal Leadership Coalition for outpatient maternity providers which will serve as a channel for providing feedback to improve programming in maternal health and connect them to ongoing state perinatal initiatives.

In 2021, the Maine CDC was awarded an Early Childhood Comprehensive Systems Grant (ECCS). The ECCS team coordinates and facilitates the monthly internal cross agency Early Intervention (EI) Workgroup, to allow for intentional communication and collaboration on early intervention systems and a bi-monthly external stakeholder Collaborating Partners Advisory Group (CPAG). The ECCS team also supports cross agency work focused on equity and family partnerships. The Maine CDC continues to build its programming around Provider Patient Family Partner (PFP) and Lived Experience Integration (LEI) training through the ECCS Program to develop a family partnership framework that will provide a comprehensive approach to fostering meaningful collaboration between families and professionals.

In 2022, Maine's Maternal and Child Health Program at the Maine CDC received a \$5 million HRSA State Maternal Health Innovations and Data Capacity (SMHI) grant for five years to work with partners to address risk factors facing birthing people before and during pregnancy and after birth that can cause pregnancy loss and death in pregnant people. The SMHI grant provided resources for the State of Maine to create a Maternal Health Task Force and create a strategic plan to address issues relating to maternal health. As part of the grant, in 2023, the Maine CDC published a new Perinatal Data Dashboard and is working to provide resources to enhance the collection, analysis, and review of data related to deaths and serious health issues associated with pregnancy and birth to improve health outcomes for pregnant people and infants across the state and is working with the Division of Vital Records to upgrade fetal death records submission and maternal and infant death record collection. With SMHI funding, the MCH team is partnering with MoMMA's Voices, maternal health patient advocates program, to offer training to train patients with lived experiences, provider, quality improvement leaders, researchers and policymakers to move forward improvements in maternal care.



Educating Families about Health Care Coverage

There were several policy changes related to the perinatal system of care that are important to highlight. In 2024, the Office of MaineCare Services (OMS) continued to message to their members the 2022 policy changes around expansion of coverage to pregnant people to 12 months post-partum, and expanded dental coverage to adults, including pregnant people. In October 2023, OMS expanded MaineCare coverage to children and young adults under 21 if they are in families who make an annual income up to 300% of the Federal Poverty Level. In December 2023, 12-month postpartum coverage was expanded to the unborn child population. In 2023, communications campaign was launched to promote this coverage that included social and digital ads and a Toolkit with print and digital materials available to partners and providers that was extended in 2024. In 2024, MaineCare hired a new Maternal and Infant Health position focusing on perinatal health issues and continued to outreach to members about the MaineCare policy changes. In the fall of 2024, the Office of the Health Insurance Marketplace under DHHS received a two-year grant from CMS, the Expanding Access to Women's Health Grant, focused on supporting state efforts to enhance and expand coverage of, and access to, reproductive health care and maternal care. Messaging will be coordinated between MaineCare and CoverME.gov.

Improving Care for Pregnant People with Substance Use Disorder during the Perinatal Period

Improving care for pregnant people with substance use disorder and infants exposed to substances during pregnancy is also part of the perinatal system of care work. DHHS continues to lead a monthly Substance Exposed Infant (SEI) and Maternal Substance Use State Steering Committee Meeting to support the work of the Maine Opioid Response Plan. In 2024, MaineCare continued to work with perinatal, behavioral health, and addiction medicine care providers in the MaineMOM program to improve care for pregnant and postpartum people with opioid use disorder and their infants by integrating maternal and substance use treatment services. Now that MaineMOM is an official Medicaid payment model, MaineCare has worked to enroll new providers across the state into a new section of policy, Section 89, for MaineMOM Services. In addition, the MaineMOM program worked with the CradleME referral team to update their referral form to increase referrals and jointly supported a care coordinator on the CradleME team with the Maine Families Home Visiting (MFHV) program. MaineMOM also supported the PQC4ME's Universal Naloxone Project: A Postpartum Toolkit for Harm Reduction to complete a pilot at a fourth birthing hospital.

MaineMOM also funded the Maine Medical Association- Center for Quality Improvement to develop a New Learning Module Eat Sleep Console On-Boarding and Annual Competency Training which provides ongoing training to birth hospitals on the Eat, Sleep, Console (ESC) model to improve care of newborns who are exposed to substances during pregnancy. MaineMOM also continued to invest in the Attachment, Biobehavioral Catch-up (ABC) early intervention program. A 2022 pilot with MaineGeneral's MaineMOM providers supported engagement with ABC. Following requests from other MaineMOM care delivery partners, this pilot advanced into a project to spread ABC services across state regions. To accomplish this in a sustainable approach, MaineMOM partnered with Child Development Services (CDS), Part

C (now Early Intervention for ME). Starting in 2023, all babies born in Maine who are substance exposed are eligible for enrollment in CDS and receipt of services. The offices are currently partnering to train and certify up to 4 CDS positions as ABC coaches, with a goal to train staff in every region to spread ABC services across the state.

In addition, in July 2022, the Office of MaineCare Services received federal approval to expand services for MaineCare-enrolled parents with SUD who are involved with Child Welfare Services under the Office of Child and Family Services (OCFS), or at risk of being involved with Child Welfare under a Medicaid SUD 1115 Waiver first approved by CMS on December 22, 2020. With this waiver, Maine is the first state in the nation approved to offer continued Medicaid coverage for members who might otherwise lose access during the Child Welfare process due to changes in household size. This was operationalized and implemented on May 1, 2023. Parents who are successfully engaging with the Department through the rehabilitation and reunification process can continue their coverage, supporting them in accessing SUD treatment and other critical medical care.

Creating Plans of Safe Care for All Substance Exposed Infants

The OCFS Child Well Being Team continues to work collaboratively with prenatal providers and birthing hospitals, as well as the CradleMe team, to create a Plan of Safe Care (POSC) for all substance exposed infants and their caregivers. OCFS hired a dedicated POSC nurse in late 2020 that ensures that each SEI receives a Plan of Safe Care and connects caregivers to resources to help with identified needs. In the fall of 2023, a new online POSC portal was implemented to allow for transition from paper to electronic versions of a Plan of Safe Care. In 2024 and 2025, trainings on the POSC with medical providers, including those that provide treatment for substance use disorder, and OB/GYN offices are being done to work towards getting the POSCs completed before the birth of infant(s) to better connect families to resources. The Vital Records

Program at the Maine CDC also updated the birth certificate worksheet to add a module on substance exposure during pregnancy and POSC completion to improve surveillance data in 2023 which was rolled out to all the birthing hospitals in 2024.

Strengthening Early Intervention for ME Services for Infants and New Parents

Complementing these DHHS perinatal efforts, the Department of Education and Early Intervention for ME, Birth to Three (Part C) supported perinatal health by improving family and professional partnerships by training all early intervention, birth to three staff in evidence-based models supporting early infant brain development and early, healthy, relationships. In 2023, Early Intervention for ME, Birth to Three did a pilot in York County with the mobile based Mammha program, which is a maternal mental health support and referral service for pregnant and postpartum women who think they may be experiencing maternal mental health symptoms. In 2024, the preliminary data from this pilot was reviewed and the program is in the process of developing a Mammha Pilot statewide for 2025. Staff also continue training in the Brazelton Touchpoints Approach™ (0-36 months) and Newborn Behavioral Observations (NBO) System™ (0-3 months). DOE also continues to review and update the Maine’s Birth to Three (Part C) Established Conditions of Risk List that make children up to 36 months automatically eligible for Early Intervention for ME Services (Part C), family-centered early developmental support; the List includes infants and young children with prenatal alcohol and substance use exposure.

Partnerships for Alignment of Perinatal System

The state of Maine has worked with several health care partners, including Maine Health and Maine Medical Association, who have successfully applied for and received a series of competitive grant funds to enhance the perinatal system of care. In 2021-23, Maine organizations received over \$10 million in federal grants for five years to support the expansion of work to strengthen the system of care for pregnant people,



new parents, and infants. Staff from Maine CDC, the DHHS Commissioner’s Office and MaineCare services are partnering to ensure this work is integrated into all of the perinatal systems care work.

Staff involved in the Children’s Cabinet and DHHS, including the Maine CDC, are working to align the perinatal systems of care initiatives with other early childhood initiatives to ensure that services and supports for parents and children are seamless and streamlined to the greatest extent possible.

Building an Early Childhood Integrated Data System to Inform Decision-making

The PDG (B-5) Renewal Grant is supporting the development and implementation of a new Early Childhood Integrated Data System (ECIDS). An ECIDS collects, integrates, maintains, stores, and reports information from early childhood programs across multiple agencies within a state that serve children and families from birth to age eight.

Maine’s ECIDS will provide state leaders with information to make informed decisions about programs and policies that promote access, quality, and a strong workforce to support all Maine children ages 0-5. The ECIDS will serve as a tool to promote alignment and coordination of the early childhood system through better information sharing and a clearer picture of

needs, gaps, and strengths of the system and it will be a resource that provides data-driven insights that can improve short- and long-term outcomes for children and families in Maine.

Maine has made progress in advancing the development of an ECIDS over the last several years. Maine worked with a national technical assistance team to draft and publish an *ECIDS Road Map for Maine* in 2022. This road map has guided the work to plan for the implementation of an ECIDS, starting with the hire of a Project Lead in December 2021 with ARPA Child Care Development Fund discretionary funds.

The ECIDS Project Lead has conducted a readiness assessment to map the data landscape for young children in Maine, supported the state to develop a clear purpose and vision for an ECIDS, informed the development of the State Longitudinal Data System at the MDOE in order to identify connections to a future ECIDS, and developed a plan for conducting data matches across early childhood programs to answer key policy questions and inform the development of an integrated data system. In 2025, the team will conduct at least one programmatic use cases which will march and integrate data from multiple data systems to answer key policy questions and inform the development of an integrated data system as well as the governance structure for the ECIDS.



STRATEGIES FOR ENTERING ADULTHOOD

Staff from several state agencies support the Children’s Cabinet to reach its goal of ensuring that all Maine youth enter adulthood healthy, connected to the workforce and/or education. This team includes: DHHS staff from the Office of Child and Family Services, the Maine CDC, MaineCare Services, and the Commissioner’s Office; DOE staff from the Office of Student and School Supports, Workforce Development and Innovative Pathways, the Commissioner’s Office and the Maine School Safety Center; Department of Corrections staff from the Office of Juvenile Services; Department of Labor staff from the Division of Vocational Rehabilitation and Bureau of Employment Services; staff from the Governor’s Office of Policy Innovation and the Future.

This team has focused its efforts on expanding access to resources and services, including mental and behavioral health services and prevention programs that provide opportunities for youth to build positive relationships, leadership skills and make other connections that support their positive growth and development.

Increasing Access to Evidence-based Behavioral Health Services for Youth

Children’s Behavioral Health Services (CBHS) is housed in the Office of Behavioral Health in DHHS. In partnership with MaineCare Services, CBHS focuses on behavioral health treatment and services children from birth up to their 21st birthday. CBHS has led the state’s efforts to reach the goal of expanding evidence-based behavioral health services for youth, including substance use disorder services and treatment, at the community level.

In 2024, CBHS continued to work on the implementation of key efforts to strengthen children’s behavioral health services in Maine with a focus on expanding programming to support children and youth with complex behavioral health needs to stay in their homes and communities and out of facilities. These efforts included expanding intensive services including High-Fidelity Wraparound Services for children and youth, Multi-dimensional Family Therapy and the establishment of an independent behavioral health

level-of-care assessment process. In late 2024, CBHS also released a Request for Proposals for the operation of a Psychiatric Residential Treatment Facility (PRTF).

High-Fidelity Wraparound Takes Team Approach to Support Children and Youth

Children’s Behavioral Health Services with the Office of MaineCare Services is finalizing the implementation of High-Fidelity Wraparound services as a reimbursable service under MaineCare for children and youth with complex behavioral health needs. High-Fidelity Wraparound (Hi-Fi Wrap) is a team-based process and approach which uses the collective action of a committed group of family, friends, community, professionals, and cross-system supports to build a family-driven plan of care that best fits the goals and situation of the youth and the family. The care coordinator further helps the family navigate planned services and supports, including informal and community-based options; tracks progress and satisfaction to revise the plan of care as needed; and ensures program fidelity. The goal of the service is to keep children and youth in their homes and communities utilizing their formal and informal supports. To aid in developing this model of care, CBHS has established a Center of Excellence (COE), the education, training, resource, and fidelity hub for supporting the provider community establishing High Fidelity Wraparound. The COE provides training and support for Hi-Fi Wrap and peer support models for family and youth, PEARLS and Peer Connect. To learn more about the COE and its work supporting establishing High-Fidelity Wraparound, visit maine-coc.org.

Provider training and expansion efforts

Throughout 2024, CBHS continued to offer trainings to providers on evidence-based practices, with the goal of increasing provider capacity delivering models that have proven to be effective. Some examples of training provided include the Positive Parenting Program (Triple P), Multi-dimensional Family Therapy (MDFT), Trauma-Focused Cognitive Behavioral Therapy, and the Adolescent Community Reinforcement Approach (ACR-A). Additionally, training has

been made available to support youth peer support services under the Peer Connect model, family peer support services via the PEARLS model, and youth peer recovery support utilizing the Connecticut Community for Addiction Recovery curriculum. In addition to these training opportunities, CBHS supported contracts with providers delivering Multi-systemic Therapy, Assertive Community Treatment, and adolescent substance use services, to help establish resources and expand existing resources. For the first time in several years, CBHS established a contract with a mental health provider in southern Maine to serve up to 25 youth with Assertive Community Treatment, an effective intensive, community-based treatment program that supports adults and children with significant behavioral health needs.

Implementation of a Single Point of Access for Children with Behavioral Health Needs

The complexity of accessing children’s behavioral health services is a barrier for many children, youth, and families. To address this, CBHS has been working to develop a single point of access for children with significant behavioral health needs through the establishment of an independent behavioral health level-of-care assessment process that will ensure that children and youth are identified, screened and connected with the appropriate level of services to meet their needs. The single assessment will be facilitated by a licensed Master’s level clinician as an independent assessor.



Clinicians will use a standardized assessment tool and process that has been endorsed by the American Academy of Child & Adolescent Psychiatry. The assessment process will incorporate child and family voice and consider the youth’s clinical needs, environmental needs, and family situation to match youth with the appropriate service based on their level of care.

Services included in the assessment will be:

- Children’s Residential Care Facility Services (children at this level of service already are assessed using this process)
- Home and Community-based Treatment
- Multi-systemic Therapy
- Functional Family Therapy
- Intensive Outpatient Programs
- Assertive Community Treatment
- High-Fidelity Wraparound
- Rehabilitative and Community Support Services for Children with Cognitive Impairments and Functional Limitations (Section 28)
- Therapeutic Intensive Homes (under development delivering the evidence-based model Treatment Foster Care- Oregon)

Pilot of Peer Recovery Services for Youth

CBHS has contracted with Healthy Acadia to pilot peer recovery services for youth who have been affected by substance use disorder. The Youth Recovery Coach Pilot Program aims to connect young people in recovery and those impacted by the substance use struggles of loved ones with trained recovery coaches.

Healthy Acadia has hired a full-time Youth Recovery Coach Coordinator (YRCC) and two full-time Youth Recovery Coaches (YRCs) to lead community outreach and offer one-on-one coaching to youth participants. The program also incorporates volunteer and paid interns through Healthy Acadia’s Maine Recovery Core Program, creating opportunities for those interested in entering the behavioral health field.

Healthy Acadia will train 20-30 individuals through the CCAR Recovery Coach Academy for Young

People in Washington and Hancock counties. These newly trained individuals may go on to serve as youth recovery coaches or support partner organizations, such as schools, that are eager to integrate recovery services into their communities.

Implementation of Treatment Foster Care Oregon

In 2025, CBHS will implement Treatment Foster Care Oregon (TFCO), which was developed as an alternative to institutional, residential, and group care placements for children and youth with severe emotional and behavioral disorders.

CBHS has contracted with TFC Consultants to engage providers in future training opportunities in the evidence-based model. Engagement sessions and provider readiness planning were held in the fall and winter of 2024 with plans to begin training early 2025.

The two main goals of TFCO are to create opportunities for youth to successfully live in a family setting and to simultaneously help parents (or other long-term family resource) provide effective parenting.

TFCO focuses on five key areas: (1) a consistent, reinforcing environment with mentoring and encouragement; (2) daily structure with clear expectations and specific consequences; (3) a high level of youth supervision; (4) limited access to problem peers along with access to prosocial peers; and (5) an environment that supports daily school attendance and homework completion.

Youth served in TFCO reside in the TFCO treatment home for approximately nine months. The homes receive initial and ongoing training, daily monitoring, weekly group support, and in-the-moment coaching. Youth in TFCO receive weekly support to navigate the program, practice of problem-solving and coping skills along with other skills individualized for their particular needs. Families participate in weekly services, which focus on coaching them through key techniques to regain confidence and effectiveness with their youth. The TFCO program is available 24/7 to allow for quick and effective responses to situations and behaviors.

Through research via randomized controlled trials, TFCO been has proven to:

- Prevent or reduce the number of days in institutional or residential settings
- Prevent the escalation of delinquency, youth violence and pregnancy
- Increase positive academic engagement
- Reduce placement disruptions
- Increase attachment
- Improve brain stress regulatory systems

Connecting Students at School to Tele-behavioral Health Services

OCFS in coordination with Maine CDC and DOE is conducting a tele-behavioral health services pilot supporting access to clinical behavioral health services in schools. Using a model developed out of Heywood Health in western Massachusetts, this pilot supports access to behavioral health services by locating a community health worker (CHW) in schools. These CHWs facilitate access to clinical services and provide on-site support to the youth to pair them with a clinician providing telehealth counseling services. Reports from the first year of the pilot highlight the helpful role played by these CHWs placed in the schools. The CHWs support students and parents with accessing needed behavioral health services and assist with sharing information between the schools, parents and clinicians. The CHWs also help students and families connect to other resources outside of the school. The program is currently operating in seven high schools and middle schools.

Increasing Prevention Services and Programming in Schools and Communities

Expansion of School Based Health Centers to Better Meet Health Needs of Youth

In 2022, the Department of Education allocated American Rescue Plan ESSER grant funding to middle and high schools to expand the number and scope of

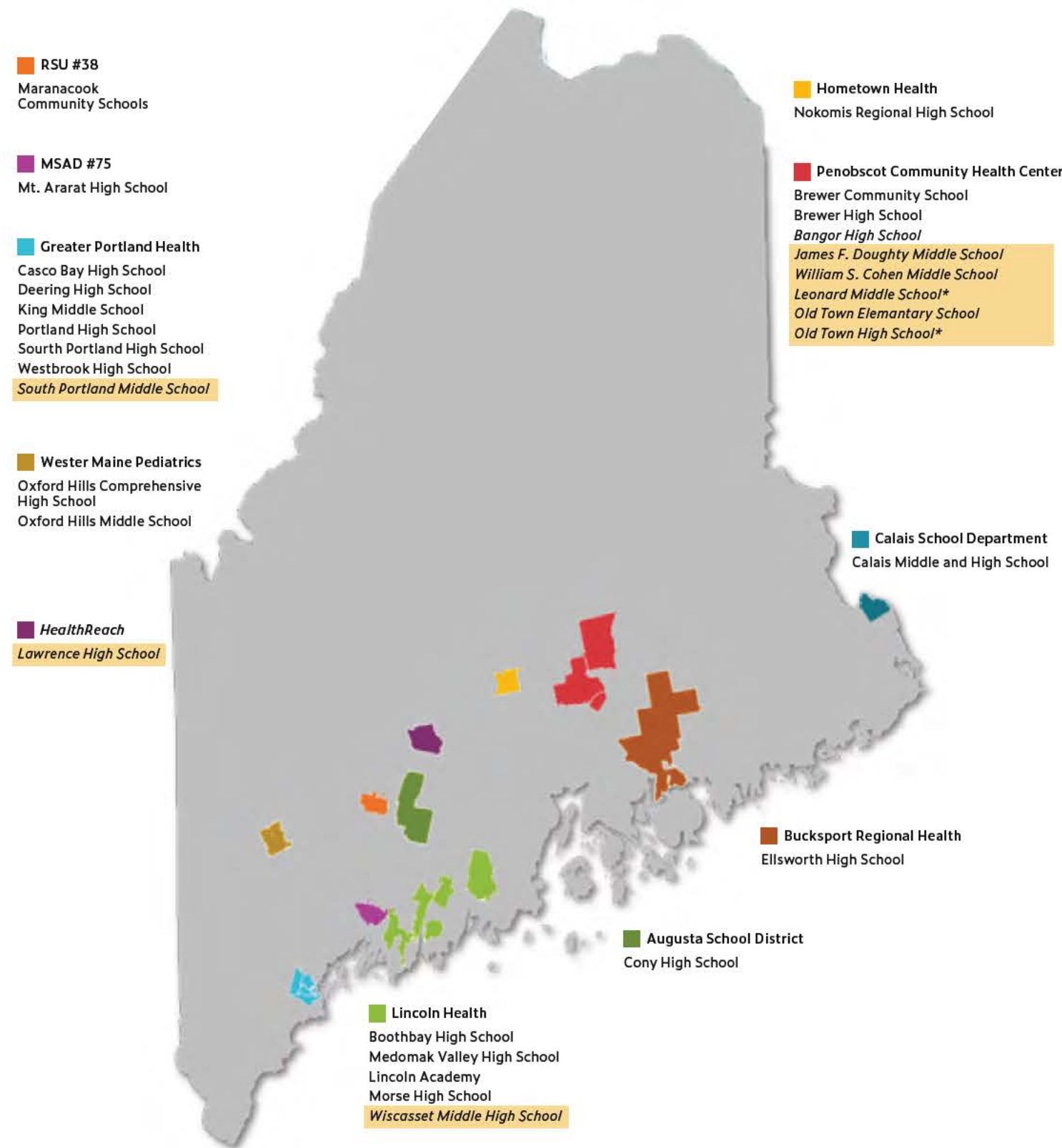
Maine’s School Based Health Centers. The funding allowed for the start-up of new School Based Health Centers at four high schools. In addition, existing School Based Health Centers at seven sites received enhanced funding to improve operations, expand outreach and coordination of services to increase enrollment of students, and strengthen and expand their oral health services.

Maine is currently providing funding to 10 sponsor organizations and 20 School Based Health Center sites at middle and high schools across the state. An additional 9 School Based Health Centers are not receiving funding but are part of the statewide School Based Health Center Network. They were either funded directly by the federal government through a grant from HRSA or are subsidized through funding from their sponsor organization. School Based Health Centers share a commitment and collaboration between a school, community, and health care organization(s). SBHCs support students’ health, well-being, and academic success by providing integrated medical, behavioral health and prevention services aimed at improving health equity. Services are student focused and offered to all eligible students regardless of insurance status or ability to pay.

In the 2023/24 school year, the number of students enrolled in one of the 20 School Based Health Center that receive funding from the state increased by 34% and the number of visits to SBHCs by students also increased by about one-third. These increases were on top of the increases in participation in 2022/2023 school year. In the previous year, the increases had been largely due to increases in the number of behavioral health visits. In 2023/2024 school year, the increase in visits was largely due to an increase in the number of medical visits, which increased by 85%. Maine CDC was able to continue the increased funding originally provided through federal ESSER funds for the current 2024/2025 school year. Those additional funds will run out at the end of the school year and funding levels will go back to original funding level provided through the Fund for Healthy Maine.

All SBHCs in Maine

2024–2025 School Year



Note: The High Schools and Middle Schools in yellow engage with the statewide School Based Health Center Network, but their programs do not receive funding from the state. These SBHCs operate with support from direct federal funding or support from their sponsoring site.
Non-state funded schools shown in gray italics
*Indicates school provides mental health services only with medical services referred to Old Town Elementary School

Supporting the Expansion of Community Schools

The community school strategy is a holistic approach to school improvement to support stronger conditions for student learning and healthy development. The goal of community schools is to meet the needs of students and families by leveraging local and state resources and creating partnerships with community-based organizations to coordinate and integrate academic, developmental, family, health, and other comprehensive services. With federal funding, OSSS was able to bring on a dedicated staff person in 2023 and 2024 to provide direct support to these three grantees as well as to staff at other schools interested in implementing key components of community schools.

In 2023, the Office of School and Student Supports at DOE provided grant funding and technical assistance to three School Administrative Units to support them to become community schools: Old Town Elementary, Cape Cod Hill School in New Sharon, and Gerald E Talbot Community School in Portland.

In early 2024, the team at the Office of School and Student Supports reopened grant opportunities and technical assistance to a new round of SAU awardees that resulted in funding three additional community school sites: Deer Isle-Stonington High School, Shead High School in Eastport and South Portland Middle School. For the 2024-25 school year there are six schools in Maine who are receiving some funding as part of the grant process from the DOE to support implementation of their community school strategies. These six SAUs are implementing programming to connect students and families to comprehensive services within the school and community. These services include increased physical and mental health support, after school and summer academic and enrichment programming, increased support to address food insecurity, and expanded family engagement opportunities. Each school has employed staff to serve as Community School Coordinators who are responsible for making connections with the school and families to community-based organizations and linking fami-

lies to needed services and resources. Each school is also working to implement more rigorous, community-connected instruction as part of their curriculum to engage students in meaningful, inquiry-based learning.

In addition, the Community School Consultant hired by the Maine DOE Office of School and Student Supports has promoted awareness of the community school strategy in Maine by presenting informational and professional development sessions at Maine educator conferences. In September the team facilitated a Simultaneous Site visit at three of the community schools. The Community School consultant provides ongoing support and technical assistance to the six community school sites through coaching and technical assistance and is facilitating monthly Community of Practice meetings with the coordinators.

In addition, the consultant works with staff across state agencies and with external stakeholders to continue to identify opportunities for expanding community schools, including applying for federal grants to support programming in more rural parts of the state.

Investments to Increase School-Based Mental Health Staff and Services

In the spring of 2023, Maine DOE was awarded \$9 million, funded through the Bipartisan Safer Communities Act, to increase school-based mental health staff and services in Maine over the next 5 years. With this funding, the DOE has established the Expanding Access in School Environments (EASE) Maine which will provide grants to nine high-need school administrative units (SAUs) to support efforts to recruit and retain mental health providers and expand services to students.

DOE awarded grants to Eastport Public Schools, Jefferson Public Schools, Lewiston Public Schools, RSU 12, RSU 24, RSU 54, RSU 73, RSU 79, and RSU 85. These SAUs were identified as high need because they had low student to mental health provider ratios relative to the rest of the state and nation. Through the EASE Maine grants, the Maine DOE is partnering with these SAUs to develop and implement whole

student-focused strategies to meet the unique needs of each community, increase student access to much-needed mental health services, and recruit, retain, and re-specialize staff to support the mental health and wellbeing of students, staff, and families. The funding will enable SAUs to collaborate with one another and with community organizations, state agencies, and other partners to confront growing mental health needs following the pandemic by increasing the number of highly qualified mental health services providers in schools. Eight out of nine of these SAUs have used the funding to hire at least one mental health provider to serve students in their schools.

Improving School Environments for All Students Through Training and Coaching on Restorative Practices

Maine School Safety Center’s (MSSC) is now offering free training and on-going coaching to schools interested in improving their schools’ environments for all children through the implementation of restorative practices. Creating a Culture of Care in Schools Using Restorative Practices, aims to provide schools with the tools needed to help create an environment of safety, belonging, and accountability for students, staff, and community members that increases learning while reducing undesirable behavior and exclusionary



discipline. In 2024, the Maine School Safety Center provided trainings to more than 20 schools, including elementary, middle and high schools.

The skills staff learn in this training help them to:

- Build trust and better relationships with colleagues, students, and families
- Improve communication
- Identify and apply consistent responses to typical student behavior
- Handle minor behavior in the classroom
- Create a team that will respond to more serious behavior using Restorative Principles and develop re-entry plans for students who have been out of school for an extensive period

Each of the participating schools established an implementation team of administrators, teachers and staff who are responsible for training other staff and teachers in the school and supporting the implementation of practices and changes to school policies with the goal of improving student behavior, decreasing the use of exclusionary discipline, and improving school climate for all students. These teams meet regularly with coaches from the Maine School Safety Center to support the implementation team to reach their goals.

Expanding Opportunities for Youth to Participate in Meaningful Paid Work Experience and Career Exploration

The Governor’s Maine Jobs and Recovery Plan (MJRP) included \$25 million in funding for building out career exploration programming for Maine youth. During the first two years of the program (school years 2022/2023 and 2023/2024), the MJRP Career Exploration Program served more than 6300 students with approximately 6000 of these students participating in a paid work experience. The purpose of the Career Exploration Program is to support young people to gain a better understanding of career opportunities, build foundational skills and make connections to employers through work-based learning.

With MJRP funding, Jobs for Maine Graduates (JMG), a statewide non-profit working in 93 Maine high schools, implemented the Maine Career Exploration Badge Program for high school juniors and seniors. The program connects students to a 40-hour paid work experience to receive hands on employer engagement experiences. This experience is coupled with on-line modules and direct support from JMG specialists to help students to learn about career opportunities, set goals, document and reflect upon their employment experiences, and develop plans for their futures.

The Department of Education awarded grants to 23 high schools/ Career and Technical Education schools (CTEs) and three community-based organizations in 13 counties to implement or expand Extended Learning Opportunities (ELO) programming for youth. ELOs are hands-on, credit-bearing experiences outside of the traditional classroom with an emphasis on community-based career exploration. These grants are focused specifically on connecting juniors and seniors to meaningful paid work experiences through ELO programming. Other components of these ELO programs also include the development of work skills and exposure to careers and career opportunities through job shadowing, career fairs, informational interviews, mentorships and other similar programming. This funding has dramatically expanded the network of ELO professionals across the state and is supporting the creation of hundreds of new workforce partnerships. DOE released a second round of grant funding with \$1.5 million in state general funding in the fall of 2024 to support the expansion of ELO programming to 10 high schools and 2 community based organizations.

The Children’s Cabinet awarded grants to five community-based organizations to provide career exploration programming to historically disadvantaged youth aged 16 to 24 years old. All of these programs are recruiting youth in their communities to participate in job readiness programming, connecting youth to meaningful paid work experiences and ensuring youth have services and supports needed to overcome barriers to employment.

Expanding Participation of Young People in Certified Pre-Apprenticeship and Apprenticeship Programming

The MJRP also includes funding for the Department of Labor to expand pre-apprenticeship and apprenticeship programming. In 2024, 451 youth between the ages of 16 and 24 participated in either a certified pre-apprenticeship or apprenticeship program through the support of MJRP funding. High-quality pre-apprenticeship programs provide foundational job and soft-skill training necessary to bridge trainees to successful employment as apprentices. Pre-apprenticeship programs are delivered by a variety of partners, including high schools, adult education providers, community colleges, labor organizations or community-based organizations. In Maine, there are now over 45 certified pre-apprenticeship programs across the state. Eighty percent of all pre-apprentice participants have successfully completed the program and almost 30% of those completing programming entered a registered apprenticeship program. Apprenticeship is a workforce training model that combines on-the-job learning and formal classroom or online instruction to help a worker or young person gain the knowledge, skills and competencies needed for career success.

Many pre-apprenticeship programs specifically target youth between the ages of 16 to 24 at Career and Technical Education (CTE) schools, high schools, and out-of-school youth in need of a connection to gainful employment leading to financial stability and professional success. For example, Associated General Contractors of Maine expanded from hosting four pre-apprenticeship programs in Summer 2023 to twelve programs across the state in Summer 2024. AGC Maine’s Construction Immersion Pre-Apprenticeship introduces students to employment opportunities and provides on-the-job training within the construction industry. IBEW 1253 Augusta Electrical JATC launched its first cohort of Electrical pre-apprentices this year, partnering with Nokomis High School and Foxcroft Academy. A total of 15 students are participating in the program, which results in a guaranteed

interview into Augusta Electrical JATC’s registered apprenticeship program and advanced placement if they are hired.

Strengthening Families through Families First Prevention Services

The Office of Child and Family Services (OCFS) continues to implement the Federal Family First Prevention Services Act and the corresponding Maine Family First Prevention Services State Plan. This plan, approved initially in 2021, with an amendment in 2023, includes Maine’s plan for implementation of evidence-based services funded through state and federal Title IV-E funds that are designed to specifically support families at risk of having their child(ren) removed due to child abuse and neglect with the goal of keeping children safely in their home.

Since 2022, Maine has implemented two evidenced based programs under Family First (Parents as Teachers and Homebuilders). Specifically,

- Maine expanded the Maine Families Home Visiting (MFHV) program (which provides the Parents as Teachers (PAT) curriculum) to serve more child welfare involved families with children up to the age of 5. With expansion, children aged 4 months to 4.5 years can be referred and served until the age of 5 years. From the early spring of 2022 to the fall of 2024, there have been 87 children served by MFHV under Family First.
- OCFS brought the Homebuilders Intensive Family Preservation and Reunification Program to Maine through a contract with Bethany Christian Services of Northern New England (BCSNNE). Homebuilders is an evidenced based intensive, in-home counseling, skill building and support service for families who have children (0-18 years old) at imminent risk of out-of-home placement or who are in placement and cannot be reunified without intensive in-home services. The Homebuilders program is being implemented statewide and from the summer of 2022 to the fall of 2024, the program has served 152 families impacting 301 children and has worked to

not only prevent the need for foster care but also served several families through the safe reunification of children with their families after a foster care placement.

Preliminary evaluation findings indicate these interventions are working to prevent the need for placement in foster care but there is much more work to be done which includes the continued examination and exploration of other evidenced based programs that can be supported under Family First. OCFS is committed to strengthening and supporting Maine’s continuum of prevention services to keep children safely at home and prevent entry into foster care both after families become known to OCFS (tertiary prevention) and before (primary and secondary prevention), as indicated in Maine’s Child Safety and Family Well Being plan.

Also created under Family First is Access Maine; an online resource guide that outlines state level programs and resources available to families in Maine. Access

Maine was developed as a goal under Family First to raise awareness of existing resources that can support children and families. Access Maine compliments Maine’s 211 system which provides a directory of community-based programs so that the two can effectively provide the public with information on how to locate services and support for families in Maine. More information can be found on this fact sheet.

OCFS remains dedicated to not only keeping children safely in their home and preventing the need for foster care after a child welfare intervention, but also before families encounter or even need child welfare services through primary and secondary prevention efforts. OCFS has partnered with the Maine Children’s Trust since 2022 to implement a bi-monthly Prevention Webinar Series to share strategies and opportunities for action that everyone can do to strengthen and support families in order to keep children safe.

Career Exploration Program Leads to Community College Enrollment and Meaningful Work Experience

A young woman participating in Eastern Maine Development Corporation’s Career Exploration Program, started her experience conducting tours of multiple host job sites including FedEx and Hannaford. After receiving this exposure the participant enrolled in EMDC’s Young Mainer’s Workforce Program. Staff from the program worked with this participant to prepare her for employment. She strengthened her interviewing skills, built her first resume and learned how to apply for jobs.

After successfully completing Young Mainers Workforce Program, this youth successfully enrolled in Eastern Maine Community College as a Medical Radiography Major. As part of her continued work in the Maine Career Exploration Program, she will engage in a 100-hour paid work experience at Northern Light Hospital. The work experience will provide basic non-medical care for patients in the hospital such as making them feel comfortable, check in on them to provide support and providing meals. The paid experience will help her to meet expenses while she is enrolled in school and give her strong hands-on experience during which time she will learn about the environment of working in a hospital. Throughout her enrollment in the program, she has shown a huge amount of growth in independence and work ethic. She is extremely determined and excited to try new things.

Development and Implementation of a Child Safety and Family Well-being Plan

DHHS continues to partner with the Maine Child Welfare Action Network (MCWAN) on the Child Safety and Family Well-Being Plan. This comprehensive effort calls on the state and communities to work together to keep children safe by keeping families strong.

The plan is the outcome of an assessment of Maine’s existing child safety and family well-being landscape, which included partnering with youth, parents, caregivers, and state and community leaders. Version 1.0 of the plan was released in May 2023 and included immediate opportunities for action. A comprehensive long-term version of the plan will be released in early 2025.

The Child Safety and Family Well-Being Plan is thoughtfully designed to align with numerous initiatives, including the Children’s Cabinet Plan for Young Children and Plan for Youth. This intentional overlap highlights the necessity of collaboration as the cornerstone of collective efforts to safeguard children by strengthening families. Recent efforts not captured in other areas of this report include:

- In July 2024, DHHS and MCWAN launched Be There for ME, a campaign intended to raise awareness and support for parents and caregivers in Maine. Designed in partnership with parents and caregivers, Be There for ME aims to reduce the stigma of asking for help. The new Be There for ME website, BeThereforME.org, connects parents and caregivers with resources to start to find support for family needs—including housing, getting everyday items, child care, and dealing with stress. Available in 12 languages, the website is designed to welcome parents, caregivers, and all those who are there for them by encouraging them to take the first step toward support even if they’re not sure where to go. Additionally, the campaign directly engages community members by highlighting opportunities for everyone to step up to support parents and caregivers in Maine.
- Maine Children’s Trust and the Maine Prevention Councils received funding from DHHS for a

one-year initiative on community spaces for families. Through a collective impact approach, the Prevention Councils convened partners, including parents, caregivers, and youth. Together, they mapped the existing spaces in each of their communities where families build social connections and access low-barrier supports without stigma, and identified opportunities to enhance or expand these spaces to spark ongoing community collaboration.

- MCWAN, in partnership with DHHS, supported the initiation of a network of community collaboratives in December 2023. The first year of the project focused on identifying existing collaboratives and the development of a concept paper outlining the collaborative model as defined by the Maine network. The next year will focus on identifying and recruiting additional collaboratives and developing a community of practice for participants.
- Representatives from OCFS and MCWAN have undertaken an effort to explore mandated reporting and community support for families in Maine. The work has involved the development of an advisory group, a survey of mandated reporters (946 respondents), OCFS data analysis, and a variety of focus groups for parents/caregivers and child welfare staff. Opportunities to ensure families receive the most appropriate support are being considered.



Maine Joins the Building Ecosystems for Thriving (BEST) Initiative

In July 2024, the state of Maine was chosen to participate in the Forum for Youth Investment’s Building Ecosystems Statewide for Thriving (BEST) Youth Initiative. The Forum for Youth is a national organization dedicated to working to raise the voices of young people, apply positive youth development principles, and support system change. Maine was selected through a competitive process for this work and was one of five state awarded technical assistance to help achieve the stated goals.

A state team consisting of staff from four different state agencies (Departments of Corrections, Education, Health and Human Services and Labor), the Governor’s Office of Policy Innovation and the Future and the Children’s Cabinet and four people with lived experience (including youth and caregivers) are working with the Forum for Youth Investment to strengthen positive youth development programming in the state with a focus on peer and near peer mentoring programs. The end goal is to improve outcomes for youth in relation to school completion, career training, and professional development. This effort is targeting youth who are disengaged and disconnected with schools, employment and institutions, many of whom are in or may be at risk of entering the juvenile justice system.

The team seeks to breakdown traditional silos within state government and develop programming and policies to better meet the needs of youth who are disconnected or disengaged from school and other institutions. The state team is working to align workforce development opportunities, social and mental health services and educational services for our young people.

People with lived experience provide critical insight and expertise to support the team to identify and develop programming and policies that are effective in helping young people to overcome challenges and barriers, to build aspirations and to set them on a positive trajectory as they enter adulthood.

During the fall of 2024, the state team worked with advisors from the Forum for Youth Investment to get a better understanding of positive youth development programming in the state and effective peer and near peer programs both being supported by the state and by community-based organizations with a focus on programming for disconnected and disengaged young people. With the support from the Forum for Youth Investment, the team will identify both strengths of existing programming and gaps in supports.

In 2025, the team will use the information gathered this past fall to develop a plan for strengthening policies and programs in Maine for reaching the initiative’s goals. In addition, the Forum for Youth Investment will connect with staff from the five state cohort to share best practices and learnings from efforts across the country. The states will also come together for an annual summit in the summer of 2025 to learn from each other.

Conclusion

The Children’s Cabinet will continue to focus on ways to strengthen programs and policies for children and youth by continuing and increasing collaboration and coordination across agencies and the engagement of parents, youth, and key stakeholders. The Children’s Cabinet plans and initiatives in 2025 will build off the learnings and the successes of their work in previous years.

Endnotes

¹The State of Maine Needs Assessment: Vulnerable Children Birth to Age 5 and Their Families, RMC Research, October 2020, <https://www.maine.gov/doe/learning/earlychildhood/prekexpansiongrant>

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