

Janet T. Mills Governor



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January 15, 2020

Senator Geoff Gratwick, Chair Representative Patty Hymanson, Chair Members, Joint Standing Committee on Health and Human Services 100 State House Station Augusta, ME 04333-0100

Re: LD 1185 – An Act to Facilitate Intervention by and Provision of Services through the Department of Health and Human Services for Certain Families Affected by Substance Use

Dear Senator Gratwick, Representative Hymanson, and Members of the Joint Standing Committee on Health and Human Services:

In regard to the Committee of Health and Human Services letter to Commissioner Lambrew on June 19, 2019, I am pleased to provide you with information that was requested by the Committee on the Department's strategies to address substance use disorder issues and to facilitate reunification of families involved in the child welfare system, as well as the training provided to child protective caseworkers. The Maine Department of Health and Human Services (DHHS) recognizes the impact of substance use on families involved with child welfare and have implemented several strategies to increase the safety of children and support families in the rehabilitation and reunification process.

In State Fiscal Year (SFY) 2019, half (51%) of all removals of children entering state custody involved substance use, a 3% decrease from 54% in SFY 2018. In SFY 2019, the Office of Child and Family Services (OCFS) also saw a significant increase in the percentage of children reunifying with a parent, from 38% to 50%. For those children who exited State custody in the last three years and where parental substance use was identified as a circumstance at the time of their removal, more than half of the children were reunified with their parents. However, the data shows it takes longer for these children to reunify, on average three (3) additional months, versus the state average for all reunifications in the same time period. On December 16, OCFS made available a public report on the effect of substance use disorder in the child welfare system. This report can be found at http://www.maine.gov/dhhs/ocfs/documents/State-Custody-Summary-SFY2019-121619.pdf. The report provides additional data and information that the Committee may find of interest.

OCFS believes that substance use disorder treatment is a vital component to ensure timely permanency for children in custody. Currently, if parents remain eligible for MaineCare services, MaineCare pays for these treatment services. When parents are no longer eligible for MaineCare¹, OCFS pays for both inpatient and outpatient substance use treatment when these services are part of the family's rehabilitation and reunification plan. Services provided to families may include: the coordination of screening and treatment services, such as inpatient residential substance abuse treatment: intensive outpatient programs: outpatient therapy; Medication Assisted Treatment (MAT); connection to other recovery supports, such as Recovery Housing and AA; and case oversight and monitoring.

Child Protective Caseworkers are trained, beginning in their new employee training, to understand the dynamics of working with families affected by substance use. Some of these trainings include: Substance Use Training; Drug ID, Impairment Recognition and Caseworker Safety provided by the Maine Drug Enforcement Agency; and Methamphetamine Awareness and Responding to Methamphetamine Labs. Staff are also able to attend trainings provided in the community related to this topic.

Last, OCFS staff are involved in several statewide initiatives to increase recovery supports for Maine families. In partnership with other agencies, DHHS has expanded public education, the availability of Public Health Nurses for all mothers from the prenatal period through the first year of life and access to evidence-based parenting skills and education. Additionally, OCFS has been involved in the development of a statewide campaign (Safe Sleep for ME), to increase awareness about safe sleep practices for babies and the associated risk factors, substance use being one. DHHS' Opioid Coordinating Council is tackling issues such as recovery housing, prevention of overdose deaths and improving prevention activities and OCFS is part of these efforts.

We hope this information is helpful as we collectively continue to provide support to families affected by substance use. If you have any further questions, please feel free to contact me.

Sincerely,

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Dr. Todd A. Landry, Director Office of Child and Family Services

¹ The Office of MaineCare Services continues to work with the Federal Centers for Medicare and Medicaid Services (CMS) to seek approval to cover families with MaineCare throughout the reunification process if they lose eligibility, pursuant to LD 195 (Public Law 2019, Chapter 130.