Janet T. Mills Governor

Jeanne M. Lambrew, Ph.D. Commissioner



Maine Department of Health and Human Services Commissioner's Office 11 State House Station 109 Capitol Street Augusta, Maine 04333-0011 Tel: (207) 287-3707; Fax: (207) 287-3005 TTY: Dial 711 (Maine Relay)

February 8, 2024

Senator Craig Hickman, Senate Chair Government Oversight Committee 100 State House Station Augusta, ME 04333-0100

Dear Senator Hickman,

At the Government Oversight Committee (GOC) meeting on January 26, 2024, you asked me whether the Department has the authority to move Children's Behavioral Health Services from the Office of Child and Family Services (OCFS) to the Office of Behavioral Health (OBH) without legislative approval.

It is a fair question, and it is one that we, too, thought about as we considered this change. Prior to making my decision, I asked the Department's General Counsel to review Titles 22, 22-A and 34-B. This review did not find statutory language that links Children's Behavioral Health Services to OCFS. Instead, the statutes consistently reference the "Department" generally, therefore providing the Department with the authority to transition Children's Behavioral Health Services from OCFS and into the Office of Behavioral Health.

In addition, the Department is working with the Department of Administrative and Financial Services on specific accounting or reporting changes. This could result in biennial budget initiatives for state fiscal years 2026 and 2027 to align the structure and organization of Children's Behavioral Health Services within the Department that would need legislative review and approval.

Like other state agencies, the Department has the authority, in consultation with the Bureau of Human Resources and the unions, to adjust management and supervisory responsibilities. This work has begun and will continue as we strive to enable the Directors to sharpen their focus on child welfare at OCFS and the full range of behavioral health services at OBH.

As I said at the GOC meeting and as is noted in the Department's message below, this realignment of behavioral health services for children does not impede in any way other legislative considerations during the short session.

Please let us know if you have additional questions.

Sincerely,

Jeanne M. Lambras

Jeanne M. Lambrew Commissioner

Maine DHHS Reorganizes Behavioral Health to Better Serve Children and Families

January 18, 2024

The Maine Department of Health and Human Services (DHHS) announced today that it will move Children's Behavioral Health Services (CBHS) from the Office of Child and Family Services (OCFS) to the Office of Behavioral Health (OBH) to ensure a whole-family approach to the continuum of mental health and substance use prevention, treatment, crisis response, and recovery. Additionally, this transition of services improves the balance of staff across the Department's Offices, allowing increased attention and support from leadership to child welfare, child care and CBHS. This change will allow the OCFS Director to prioritize child welfare, as well as child care, while streamlining behavioral health services for children and adults. This move will proceed in two steps.

First, the Associate Director for CBHS will report to the Director of OBH, effective the week of January 22, 2024. This allows leadership of affected programs to immediately attend to time-sensitive activities such as reducing child welfare staff workload, implementing recently enacted child care initiatives, and standing up additional capacity in CBHS.

Second, leadership at the Department and in the Offices will work with staff on a transition. The purpose of the transition is to ensure that staff, partner, and client voices are heard; services remain connected for children and youth in need of child welfare, child care and children's behavioral health services; and movements of positions, funding, and accountability are smooth. The goal is to complete the transitions by June 2024.

This change does not require legislation, additional positions, or funding although DHHS continues to explore with the Department of Administrative and Financial Services whether other accounting or reporting changes are needed. All staff will continue to be employed: no reduction in positions is being proposed.

This realignment of behavioral health services for children does not impede in any way legislative considerations during the short session.

Benefits to Child Welfare

The move of CBHS from OCFS allows increased focus of its leadership on the complex work of child welfare. Child welfare is governed by numerous federal and state laws; has special oversight organizations; is part of a larger system that includes the Courts, law enforcement, service providers, child care and schools; and requires an understanding of the work both on the ground and from best practices. Effectively leading child welfare requires experience as well as expertise in child welfare – a different skill set than what is needed for effective leadership in CBHS, which has its own similarly complicated rules, funding, and partners.

By streamlining responsibilities, the new permanent Director of OCFS will have more time to intensely focus on child welfare. This will help the Director work to address the concern raised by some child welfare staff of a disconnect between the leadership at OCFS and those on the front lines. The Director and Central Office staff will be better able to spend time in District Offices, align best practices across Districts, and listen to and engage with front-line workers. It will also help the Director of OCFS effectively implement the recent expansion of child care capacity and quality, to better serve Maine's children, families, businesses, and economy.

Benefits to CBHS

Connecting the staff who work on behavioral health for children and adults through one Office will simplify coordination, communication and planning efforts. It will help promote continuity of care for youth as they transition to adulthood. It will also consolidate funding streams from federal block grants and other sources that are not specifically designated for children or adults. Similarly, the Office of MaineCare Services is the major payer for behavioral health services. Working with one rather than two Offices will facilitate MaineCare implementation of effective payment models.

Additionally, Sarah Squirrell, the Director of OBH, has significant experience with children's services. She previously served as the Commissioner of Mental Health for the State of Vermont from January 2019 to June 2021, managing a Department with 260 employees and an annual budget of \$280 million. She came to that position in Vermont having led various non-profits in early childhood education and mental health in addition to having spent over decade overseeing school-based mental health services.

Most other states do not separate the management of children's and adults' behavioral health services. Moving these services to an Office with an exclusive focus on behavioral health will help with the Department's commitment to aggressively implementing Maine's plan for children's behavioral health.

Coordination within Maine DHHS

Many children in state custody and otherwise served by child welfare utilize children's behavioral health services. For this reason, the move of CBHS to OBH will be carefully coordinated to ensure current connections are maintained. The Department expects, over time, that families involved with the child welfare system will have expanded access to services since OBH can leverage federal resources to increase CBHS capacity.

Additionally, coordination of services and funding across Offices will continue to be supported and expected in Maine DHHS. Multi-Office teams are common such as to manage services for parents with substance use disorders. Since supervisors in different Offices remain within the same Department, the management of such work can happen seamlessly and fluidly.

https://www.maine.gov/dhhs/blog/maine-dhhs-reorganizes-behavioral-health-better-serve-children-and-families-2024-01-18