

Janet T. Mills
Governor

Sara Gagné-Holmes
Commissioner



Maine Department of Health and Human Services
Office of Behavioral Health
11 State House Station
41 Anthony Avenue
Augusta, Maine 04333-0011
Tel.: (207) 287-2595; Fax: (207) 287-9152
TTY: Dial 711 (Maine Relay)

May 9, 2025

Senator Henry Ingwersen, Chair
Representative Michele Meyer, Chair
Members, Joint Standing Committee on Health and Human Services
100 State House Station
Augusta, ME 04333-0100

Re: LD 1843 – *An Act to Provide Peer Respite for Individuals with Mental Health Care Needs*

Senator Ingwersen, Representative Meyer and members of the Joint Standing Committee on Health and Human Services, thank you for the opportunity to provide information as you consider LD 1843, *An Act to Provide Peer Respite for Individuals with Mental Health Care Needs*.

This bill directs the Department of Health and Human Services to establish and implement a Peer Respite Center that provides 24-hour peer respite services to individuals 18 years of age and older through allocations of \$575,000 in FY26 and \$500,000 in FY27 to the Department to provide voluntary, short-term mental health services.

While OBH is fully supportive of the peer respite model and intention behind this bill, the proposed funding is insufficient and unsustainable for the establishment, implementation, and ongoing operations of a 24/7 Peer Respite Center, which requires around-the-clock operations and staffing. This center would be the first of its kind in Maine and would also require a significant planning and implementation runway in addition to the necessary ongoing funding mechanism and other resource provisions. In 2015, the Sweetser Peer Crisis Respite Overnight Center in Brunswick closed due to financial instability. OBH recognizes the value and importance of providing access to peer-based respite and crisis services ensuring choice for individuals and peer respite centers are an important part of a comprehensive crisis continuum.

Peer Respite Centers, sometimes referred to as Peer Crisis Centers, represent SAMSHA best practice as they divert individuals away from emergency departments, offer increased accessibility when compared to other crisis services in the traditional continuum of care, and are less costly than crisis receiving centers. OBH currently funds six (6) peer centers across the state. These provide drop-in access to connection and community building services, peer-facilitated groups, and employment supports. These centers are open 40 hours a week during typical business hours and have locations in, Portland, Rumford, Augusta, Bangor, Ellsworth, and Brunswick. These centers share many characteristics with peer respite centers. Both are voluntary and operate on a self-report model for participant inclusion, meaning participants are not required to provide proof of a diagnosis to access support. They also share a similar approach to negotiating programming, supports, and expectations around conduct with participants. They

differ in that peer center participants typically receive services a few days at a time during open hours, whereas peer respite center guests have access to private rooms and they operate 24 hours a day, seven days a week, 365 days a year.

As stated previously, peer respite centers have a documented record of providing both crisis and 'pre-crisis' supports and diversions from traditional, more restrictive, and more costly crisis services such as emergency departments, crisis stabilization units, and crisis residential services. They are staffed by individuals with lived experience and strive to provide a safe space in which each person can find the balance and support needed.

The Department's most recent RFPs for peer support and recovery centers included language amendments requiring assurances that centers are open a minimum of 40 hours per week and ensure operation according to the community's needs, including evening and/or weekend hours to tailor these accommodations to the participants' needs. Of the six centers in Maine, two are open seven days a week. OBH has been actively engaging in broader crisis system reform, similar expansion efforts that strengthen peer services and supports further include mobile crisis services and CCBHCs which the Legislature has supported legislation and funding for this session. As Maine contemplates the creation of peer respite centers, it will be important to consider the financial sustainability of the services provided as well as necessary funding and resources for the establishment and implementation itself. Further, those requirements will need to be considered in the broader context of the fiscal landscape of the state.

Please feel free to contact me if you have any questions during your deliberation of this bill.

Sincerely,

A handwritten signature in black ink that reads "Sarah Squirrell". The script is cursive and fluid.

Sarah Squirrell
Director
Office of Behavioral Health
Maine Department of Health and Human Services