

Testimony of Scott Lockhart, RN4

Nurse Supervisor, Dorothea Dix Psychiatric Center

Before the Maine Legislature

In Support of the 25/55 Retirement Provision for all MSEA members at DDPC

Chair, Members of the Committee, and Distinguished Colleagues:

My name is **Scott Lockhart**, and I am a **Registered Nurse IV (Nurse Supervisor)** at **Dorothea Dix Psychiatric Center** (formerly Bangor Mental Health Institute). I have proudly served the State of Maine for **27 years**—half of my life—dedicated to the care and safety of individuals with severe mental illness.

I submit this testimony in **strong support of the 25/55 retirement provision for all MSEA-members and RNs 1-4 which include Nurse Supervisors and Nurse Managers** in this proposal.

Personal and Professional Background

Throughout my nearly three decades of service, I have advanced from **Nurse 1** to **Nurse 4**, a progression built on years of direct patient care and firsthand exposure to the physical and emotional demands of this work. I am now **54 years old**, and under the current retirement system, I cannot retire without penalty until age **62**.

If I were to retire at age 60, my pension would be permanently reduced by **12%**, and I would be without **healthcare coverage** until I reached full retirement eligibility. In practical terms, I must continue working for another eight years, bringing my total service to **35 years**—before I can retire without financial penalty. Many of my colleagues face an even longer horizon, many unable to retire until age **65**.

The Realities of Psychiatric Nursing

The demands of our work at DDPC are intense, complex, and often dangerous. Our duties include:

- Responding to **assaults, behavioral codes, and medical emergencies**
- Conducting and overseeing **seclusions, restraints, and mechanical restraint applications**
- Supervising and supporting staff during rounds
- Managing **crisis situations, room searches, and patient observations** for suicide risk
- Addressing **staff conflicts** and ensuring continuity of clinical care during critical incidents

Despite having undergone both a **total knee replacement** and a **total hip replacement**, I remain actively engaged in these demanding responsibilities. Like many of my peers, I have been **hit, kicked, bitten, grabbed, and strangled** in the line of

duty—while maintaining commitment to a safe, therapeutic environment for patients and staff alike.

A Question of Fairness and Safety

Our patient population increasingly includes **NCR (Not Criminally Responsible)**, **IST (Incompetent to Stand Trial)**, and **jail hold** individual groups with profiles like those managed in correctional environments.

Yet while **corrections officers** and **law enforcement personnel**—who face comparable occupational hazards—qualify for **25-year retirement**, mental health professionals performing parallel functions must continue for **ten or more additional years** to receive equitable benefits.

Staff in their sixties continue to respond to violent incidents under intense conditions, often without protective gear or physical back-up. To ask them to do so for decades beyond their capacity is neither reasonable nor sustainable.

Why the 25/55 Provision Matters

The **25/55 retirement proposal** is both a matter of **equity** and of **workforce sustainability**.

- It acknowledges the **high-risk, high-stress** nature of mental health care at state psychiatric facilities.
- It supports **recruitment and retention** by offering a realistic career path that recognizes the toll this profession exacts.
- It ensures that those who have **dedicated their lives** to this essential work can retire with dignity and security.

Importantly, **RN4 Nurse Supervisors must be included**. While our titles suggest supervisory roles, at DDPC we are still very much **direct care providers**, deeply involved in clinical operations and crisis response. Excluding us or any RN who has advanced through experience and service would dismiss the significant sacrifices and commitment made throughout our careers.

Conclusion

The 25/55 retirement provision is not simply about retirement, it is about **respect, safety, and sustainability**. We cannot expect to retain experienced staff or attract new professionals to this critical field without meaningful structural support.

On behalf of the **RNs 1–4 at Dorothea Dix Psychiatric Center**, I strongly urge you to support this measure and ensure that all frontline mental health professionals are included.

Thank you for your time, consideration, and continued support of those who serve Maine's most vulnerable residents.

In Solidarity,
Scott Lockhart, RN4
Nurse Supervisor
Dorothea Dix Psychiatric Center