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Testimony of the Maine Municipal Association

In Neither For Nor Against

*LD 1742 - An Act to Enhance the Use of Critical Incident Stress Management Teams and to Require Peer Team Support*

May 2, 2023

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Sen. Beebe-Center, Rep. Salisbury and distinguished members of the Criminal Justice and Public Safety Committee, my name is Rebecca Graham, and I providing testimony neither for nor against LD 1742, *An Act to Enhance the Use of Critical Incident Stress Management Teams and to Require Peer Team Support* on behalf of the Maine Municipal Association, which represents the interests of municipal government before the Legislature. The positions of the Association are established by our 70-member Legislative Policy Committee (LPC), who are elected by the councils and selectboards of municipalities in each of Maine's 35 Senate districts.

Municipal officials support the idea of this bill but have significant concerns around the language, the lack of consultation with services implicated in this bill, and the lack of recognized public safety specific culturally competent providers included in the behavioral health section. Additionally, the bill under section 6 would preempt existing and locally provided, employee approved programs in favor of a centralized state model for all public safety services, not just fire department volunteers and employees.

In many parts of Maine, there are no culturally competent providers, and the use of public safety specific telehealth options has connected individuals with providers they trust fully, are licensed in Maine, but available through an app-based platform at hours the meet first responder scheduling needs. Their teams are also locally established with trained peers and increasingly use a model that matches the different needs of agencies such as a law enforcement experienced leadership peer support teams to address issues for other law enforcement leadership after a critical incident. These are important because they provide peer support for a supervising officer that would not be able, or comfortable sharing with individuals they are responsible for supervising. Nothing in this bill recognizes that peer structures should include the needs of differing responsibility levels within an incident response.

Maine Municipal Association at the direction of our Legislative Policy Committee has introduced a bill that puts these key professions in charge of selecting and utilizing their own chosen providers to normalize selfcare, mental health and wellness provision at all times, not just following a critical incident described in this bill. Our bill [LD 1857](#), *An Act to Create the Public Health and Wellness Reimbursement Fund to Benefit Public Safety Workers and Volunteers*, would also allow all fire departments regardless of construction, employment type, volunteer or full time status, to have access to funds in support of culturally competent recognized service provision they chose in tandem with existing, often regional, peer support teams. This is vital because many services do not have extensive experience, or administrative staff to navigate how to find additional help for volunteers and provide no health insurance for such per diem employees.

LD 1857 levels the playing field for all services and allows them to tap into nationally recognized service tools without local expenditure or choose local providers.

Officials agree that CISM training is vital and important. That training is happening across the state now, for free, and with one of the few recognized trainers in the state. While section 6. Subsection 4 codifies that training for every department, it is equally vital to allow for the fact that not all agencies may employee individuals who are willing or appropriate for such training. Thus, this section should be expanded to allow sharing of willingly trained individuals between adjacent or interconnected agencies or service providers. It should also provide a provision that such training needs to be regionally available across the state to avoid the consistent 4 hour drive for state mandated training often experienced by services north of Augusta.

For cognitive behavioral therapy to be effective, the individual seeking the support needs to define and control the relationship with their provider and have full confidence that such services are independent of their employment relationships. Rather than mandate relationships without understanding needs or barriers on a state-wide basis, legislation should empower and seek to remove them.

No employee should be forced to receive care that is not deemed beneficial from their point of view or not connected with a provider they trust, or feel comfortable with engaging, including peer support. As drafted in Sec 6. Subsection 2 E, this bill allows a state agency to define that ongoing provision, without engagement from the individual or service level. This section should be changed to simply collect information as to how this is being provided by each service, and only to provide it if that service is unable to do so.

For all these reasons, officials ask that you carefully unpack what is missing and necessary as you sort through this bill and if the state departments defined in the legislation are appropriate to navigate such offerings for all of the public safety agencies impacted by this proposal. Additionally, officials ask that if you support the concept of these vital services to be provided to all first responders, please consider supporting LD 1857 that provides those individuals agency in creating and managing their relationships locally.