

JUVENILE JUSTICE SYSTEM ASSESSMENT AND REINVESTMENT TASK FORCE

Monday, July 29, 2019 ♦ 1pm – 4pm
Capitol Judicial Center – 2nd Floor Conference Room
1 Court Street, Augusta

MEETING TRANSCRIPT

Jill Ward: Welcome everybody. We're going to get started. Thank you all for being here on another beautiful Maine summer day. I'm Jill Ward and I'm one of the chairs of the task force. We're going to start this meeting as we have the last couple of meetings with introductions. If you could just go around the room and say your name, the organization you're with, and if you are standing in for somebody, just indicate that. We have a couple of folks who are here who haven't yet addressed the Task Force, so if you want to tell your fellow task force members a little bit more about yourself, why you're here, what you want to get out of this process, you're welcome to do that since you were not here for the May or June meetings. So I think we'll just start with that and I will go to my right.

Randall Liberty: Randy Liberty also co-chair and Maine Department of Corrections Commissioner. Nice to see you all.

I'm **Todd Landry**, I'm the Director of the Office of Child and Family Services at the Department of Health and Human Services.

Colin O'Neill, Associate Commissioner, Department of Corrections (DOC).

Kim Magoon, research analyst, Public Consulting Group (PCG). [presenter]

Lindsey Tweed, Maine Council of Adolescent and Child Psychiatry.

Malory Shaughnessy, Alliance for Addiction and Mental Health Services.

Victoria Morales, Representative, South Portland.

Margaret Micolichuk, Restorative Justice Project.

Samantha Fenderson, Department of Labor.

Katrina Ringrose, representing Disability Rights Maine, standing in for Atlee Riley.

Good afternoon, **Sara Gagne-Holmes**, Deputy Commissioner Department of Health and Human Services.

Caroline Jova, the family division manager for the Judicial Branch.

Hello, I'm **Tessa Mosher**, I'm the Director of Victim Services at the Maine DOC.

I'm **Patrick Corey**, I represent House District 25, which is Windham.

Jeff McCabe, Director of Legislation and Politics for Maine State Employees Association.

Lisa Munderback, Chief of Operations for Day One, filling in for Greg Bowers.

Christine Thibeault, juvenile prosecutor in Cumberland County.

Hello everybody, my name is **Margot Fine** and I'm one of three co-directors at Maine Inside Out.

Hello everyone, this is my first one, I'm sorry I missed your last meeting, my name is **Joseph Jackson**, Director of Maine Prisoner Advocacy Coalition, and I'm also a co-facilitator with Maine Inside Out. I really appreciate everybody at this table and I'm also a person with a lived experience with the system, so I really appreciate the fact that we are opening this panel up for folks with lived experience.

My name is **Ryan**. I'm with Maine Inside out. I connected with Maine Inside Out from Long Creek, so I also have experience being locked up.

Zach Gregoire, Maine Inside Out. I also have a lived experience through Long Creek Youth Development Center.

Rich Meserve, Department of Education, sitting in for the Commissioner.

I'm late. I'm **Susan Deschambault** state senator from District 32 which is Biddeford area, also I'm here because I'm Chair of Criminal Justice and Public Safety Committee.

I'm **Megan Sway**. I'm Public Policy Counsel for the ACLU of Maine standing for Alison Beyea who's on vacation.

I'm **Charlotte Warren**. I represent House District 84 which is Hallowell, Manchester, West Gardner and I'm Susan's co-chair on Criminal Justice and Public Safety Committee.

Caroline Raymond, I'm the superintendent of Long Creek Youth Development Center and this is my first time. And it's just really wonderful to see so many people that care about our youth, so thank you.

Michael Brennan. I represent House District 36 which is part of Portland, and I'm the third co-chair of this group.

Jill Ward: And if we could ask the folks that are attending to just give your name and who you're with and I'd also ask you to sign in because we'd like to keep track of who wants to be part of the conversation and we'll give you some additional ways to do that towards the end of the meeting. So Mike, can I ask you to start?

Mike Freysinger, Director of the Maine Youth Court, it's a juvenile diversion program.

Laura Greenwood, I'm a student at Maine Law and an intern in the court house this summer.

Debra Baeder, State Forensic Service

Anna Black, DOC Director of Strategic Initiatives

Marian McCue, Friends of Long Creek

Emmy Brown, Friends of Long Creek

I'm Margaret Edwards and I'm a summer intern with the ACLU

Rapini Kura also a summer intern with the ACLU

Brian MacDougall, DOC, Juvenile Probation officer out of Region One

Alysia Melnick, I'm an attorney at Bernstein Shur

Kristin King, I'm a student at the University of Maine School of Law and I'm an intern with the Maine Center for Juvenile Policy and Law.

I'm Helen Hemminger. I work for Maine Children's Alliance as a research associate.

Peter Rice from Disability Rights Maine.

Jill Ward: Thank you and who do we have on the phone?

Phone: It's **Deb Hagler**, President-elect from the Maine AAP (American Academy of Pediatrics).

Jill Ward: Well, welcome everyone again, and thank you for taking the time. I have start off by letting you folks know that Mark Soler's plane is 2 hours late. Fortunately the agenda is organized in such a way that it's almost like I knew it was going to happen. We're going to start off with...I'm going to ask Colin to introduce Director Landry. Part of what we had talked about doing at the beginning in these initial meetings is getting some grounding in what's going on with all of the systems that touch upon the kids that are in the juvenile justice system. And, as I think we all have learned over the last couple of meetings, and some of us have known for a very long time, children's behavioral mental health is a key system that touches upon the kids who we see ending up in the juvenile justice system. So we have invited Dr. Landry to come and talk to us a little bit about what's going on with the Office of Children and Families at DHHS. And he's going to give that presentation and I'm going to ask Colin to start us off by giving some context from the juvenile justice, corrections perspective about this issue. Colin please.

Colin O'Neill: So there is a lot more of you here now than when I presented last month. Before I introduce Dr. Landry one of the things I want to talk about is the presentation I that I presented to you all last month. That information is actually online. We have a website that set up for the Task Force and you can look into that at any time. A couple of highlights from that presentation. We did some trending. We talked about 2 or 3 specific areas. One is who does Long Creek serve? We talked about legal status at Long Creek, there is detention which are primarily pre-adjudicated youth, and then there is committed status. So there is committed status and detained status.

And if you look at the data over the last 3, 5, 10, 15 years the number of youth that Long Creek has been serving as gone considerably way down. So we look at that as great news. We have been trying to reduce the use of Long Creek for many years and really I think my hats off to juvenile probation for being the primary diverter of that. But, when we look at that population now that it's down, currently today we have 35 committed youth in the facility and another 20 or so detained. One of the things that I've noticed over the last few years, even though the numbers are low, and we like them low, is that we want to look at the make-up of those youth.

Because based on anecdotal experience having been here for about 20 years, the needs of those youth seem to be increasing. So, in 2016 we did a report or profile of the committed youth at Long Creek. There was about roughly 70 committed youth there at the time. And we went and did a deep dive as far as looking at their mental health background, and types of mental health services that they were using prior to commitment. And so that report is also online you can take a look at it.

But the primary numbers and figures that stood out for us was that we found that 30% of the youth that wound up committed at Long Creek came directly from a residential treatment program. 40% had at least one residential treatment experience prior to commitment. 50% at least one psychiatric hospitalization prior to commitment. So that really kind of validated what we are seeing even though the numbers were going down. We saw some pretty significant high needs residents at Long Creek. I think that also illustrates the fact that we do not, at the Department of Corrections, especially in the Juvenile Division, operate in a vacuum. We are very dependent and we have to partner up with our sister agencies and the Department of Education, Department of Health and Human Services and so there is some significant overlap on the kids that we serve. Basically, I look at that as an opportunity, in the sense that if we want to continue to reduce the use of institutional secure confinement, how can we partner up with specifically DHHS and DOE to look at meeting the needs of those youth, so potentially they don't end up at Long Creek.

So it's really a good segue to introducing Dr. Landry. I won't get your complete bio but I think just some highlights and background. He comes to us from Texas, he was serving as Chief Executive Officer of the Lena Pope Home in Fort Worth; they were a nonprofit agency providing evidence based prevention, early intervention, counseling, and educational programming to thousands of children and families. Prior to that he served as the Director at the Nebraska Division of Child and Family Services, leading the child welfare agency that included juvenile justice, economic assistance, and child support enforcement programs. I just want to say it's great to have Dr. Landry here as a partner and a couple things I think are of note. I've been doing this job for about 5 years now and I've met up with Dr. Landry over the last several months – he's been here since April – more so than I have with the partners in prior administration for years. So I am very confident in the commitment OCFS has put into better serving our youth. The other thing he and I have in common, we are both from away. Even though I've been here for 30 years, he's only been here for 6 months. So tell him it doesn't matter. Welcome to Maine.

Todd Landry: Thank you very much, happy to be here. It has only been three months, three months to the day, but delighted to be a new Mainer and I'm happy to be with you today. To share a little bit of information about where we are going and the status of some of the progress over the past few months as it relates to improvements in our Children's Behavioral Health System, and maybe more importantly where we intend to go with our Children's Behavioral Health System improvements.

I'm very happy to be joined here by Kim Magoon, whom you met a moment ago with Public Consulting Group (PCG). Before I got here, and in fact, last year Public Consulting Group was engaged to do some assessment work around the state's Children's Behavioral Health System and so as far as a context perspective I've asked Kim to be here today to co-present with me so

that we can present that past context as well as to share where we are right now and where we're trying to go in the near-term around Children's Behavioral Health and the children and families that we serve in that system. So, I will focus most of the presentation today around Children's Behavioral Health because that is primarily where there is the most direct linkage to the juvenile justice system. We do of course know that there's also a very consistent linkage between our child welfare, and children in the custody of the state, from a child welfare perspective, with juvenile justice. But for today's presentation, we were asked to primarily to present around the Children's Behavioral Health side, but I'll be happy to answer any questions that you may have on the child welfare and linkage that we have with juvenile justice as well.

We do have a PowerPoint. I think it's up on the screen, plus you have copies in your packet and then we'll take on some tangents along the way, as well as any questions that you have. To that point, I would suggest if any of you have questions while we're going through the presentation to stop us, it might be easier to addresses questions while we're in the middle of the presentation versus trying to capture all of those at the end. So, with that I'm going to turn it over to Kim. Kim's going to tackle the first few slides and that talks a little bit about the context of the past work that PCG did with us late last year and early this year. And then I'll pick up as far as where we are right now and where we're going. Kim I'll turn it over to you.

Kim Magoon: So my name is Kim Magoon, I'm a Research Analyst with Public Consulting Group. I have been working on this project for the last year. OCFS engaged us last summer to complete an independent assessment of the Children's Behavioral Health system. We interviewed stakeholders internally and externally at all levels of the department. We sent out a staff survey; we did site visits at each of the locations. We had town hall meetings. We really sat down with the people who do the job at OCFS to figure out how they were doing the job, and how it was actually working in practice. We did some information review and then we put together a couple of reports that came out of that 5 month assessment. The purpose of the assessment was really just to understand how the staff at CBHS were supporting the mission and vision of the department, to make recommendations for improving availability, accessibility, and quality of services. These reports really defined what the CBHS rules currently are, as described by their job descriptions, and describe any interviews, it really outlined what the internal processes look like, and then reviewed outcomes for children's care to give us a starting point.

We had two reports and they're both available online at this link. There was an internal and an external report. The internal report was more focused around operational observations and we made some recommendations for that. Whereas the external looked at Children's Behavioral Health as a whole, as a system. We're pretty thorough in our research, and we came out with some pretty good results, strengths to improve on. So CBHS is full of dedicated professionals, who are passionate, who love their work, who are knowledgeable feel supported by their supervisors. And their staff really wants to be part of this organizational change to make things better. The other major positive, is there's definitely an initial investment of evidence-based practices. The Department has worked to establish a program enhancement project, which is a whole team of clinicians focused on advising and learning about evidence based practices for the Department.

We had some internal findings, for example, it's not always clear what your role is in CBHS. Sometimes there's duplication of roles. Sometimes that duplication wears people out, burns them out. If you're not sure exactly what your job is, it's hard to know if you're doing a good job. So that was one of the things that we saw, and that seems to be related to the no wrong door policy.

It also affects community members as well, with that they described being confused as to who to contact, who the best person was to know the answer to that. And staff was confused about what they should be doing and prioritizing. So there really needs to be a standard engagement and referral process. Engagement with stakeholders was also really reactive instead of proactive. And that is something the Department has worked over the last several months to really be more proactive and engage the stakeholders, and be more systematic in making sure that they're getting the right people at the table to have these conversations.

External report had five major system findings. Access was the number one most important finding. Children's Behavioral Health Services were not immediately available or sometimes not at all. That the proximity to services wasn't close. You have parts of the state that are just not being served or being wholly under-served. The appropriateness of services. Sometimes children might be referred to a service because it was in their community, not because it was the right service. And the quality wasn't quite there. There was no standard to hold providers accountable. And lastly, the coordination of the child to adult transition was just subpar, wasn't where it should be.

These were all the findings. So we put together a list of 24 recommendations, which were again listed in the reports, and there were a few themes to that. So some of the themes to our recommendations were around strategic planning and visioning for the Department. You don't know where you want to go unless you have a picture and then you can plan to get there. Clarifying roles and responsibilities in Children's Behavioral Health Services. So that everybody has a clear picture of what they are supposed to be doing. Developing an advisory committee of stakeholders to improve outcomes for children. And better coordination with MaineCare. So better coordination with MaineCare around reimbursement and respite services, residential providers and after care. Parent only therapy and education, and at-home treatments and therapeutic foster care.

Lastly, we also recommended strengthening relationship between juvenile justice and CBHS to improve communication and coordination. I mean that's why we're here right? So one of our recommendations was to help promote that coordination between the DOC and the children's cabinet and the children's mental health oversight committee and CBHS in general. So that we can develop a protocol and best practices for managing those cases between Juvenile Justice and Behavioral Health. So that we can develop this common vision between these two. And collect data on these youth who are being duly serviced, so you can better come up with a plan to serve these youth and find their trajectory. And making that organizational change to actually coordinate these two entities together.

Like I said, all this is available in those reports online. This is a picture where we are and where we have been, and I think Todd is going to talk about where we're going to go, or the picture of where we're going to go. Our current scope of work we actually break our process into three

phases. Phase one is establishing that executive team, that executive making sure those right people are at the table. Phase one is also about clearly defining the vision, the guiding principles and desired outcomes for where CBHS wants to go. Currently, we're wrapping up phase one and finishing up that visioning work. I think Todd will go over that.

We're getting ready to enter phase two which will be to clarify those roles and responsibilities based on that vision, based on the mission of where the department is going. And really creating a road map for that implementation, that planning. We gave them a lot of recommendations, so really you can't implement everything. You can't have time, resources, money, staff. You don't have enough of any of it to do it all at the same time. So there has to be some sequencing and some prioritizing. That implementation roadmap will really help the Department and Todd's team to prioritize and sequence things, and educate those project leaders so that we can take some actual steps of how do you take this big broad recommendation and make concrete steps toward it to actually happen.

Todd Landry: I do want to point out as we shift from where we were to where we are and where we have been to where we are now and where we're going, I want to point out that this work not only resides within OCFS specifically, but it also nests within the Children's Cabinet. The Governor, as you know, reconvened the Children's Cabinet in May. One of the top two, one of the two designated priorities in addition to an early learning and coordinated early learning in childhood system, was also about focusing on at-risk youth. This certainly falls within that second category when it relates to the second priority of the Children's Cabinet.

So this work really doesn't just reside within OCFS but also within some of those larger contextual pieces that have been announced already through the Governor's Administration some of the changes specifically the Children's Cabinet. But one of the pieces you see listed there, I believe is the second line there, about the vision, the principles, and desired future state. So that is very specifically what we have been focusing on over the past two to three months. We have engaged a broad group of stakeholders as well as staff. We've had two of these sessions. The first round session with staff, one was with stakeholders. Many of you I know in the room participated in some of those meetings.

The second meeting happened just last week and we brought together both the stakeholders and the staff. We had a group of about 80 individuals to help further refine what we want that vision to be, and where we want to go forward, and how we're going to start prioritizing those recommendations. Because I do believe Kim's exactly right. With as many recommendations as we have, if we just randomly start pulling those off the table and start trying to implement them we're not going to get the best results that we possibly can. We need to prioritize, we need to sequence that work, so that we can be not only acting with urgency, but we also want to make sure that we don't act so quickly that were not doing these in the right order to get the best benefit for our kids and families.

So the initial work of this on the next slide is and I will point out at the very bottom of this slide it does say working draft, because the group did just meet on this last week, but this does give you a little bit of sense of where we are in identifying some of these pieces at a very high level. From a vision perspective, the group last week, and we're still working on the language on this, but it is really about all Maine children and families receiving the services and supports they

need to live safe and productive lives in their home, school, and community. I think we would all agree that's really an ideal vision and wish for what we want for kids and families in the state when it comes to Children's Behavioral Health.

We have spent a fair amount of time talking about the guiding principles what is it that's going to guide our work going forward. These are using the language of the stakeholders and staff. They do align very nicely with the Federal SAMSA guiding principles, but we didn't just take those and cut and paste them for Maine because we know we need to have this reflect the context of Maine. But many of these guiding principles do align with that. So when you look at those guiding principles part of what we relied on our stakeholders and staff to do was to say is this really the grounding that we want to make sure that we move our system forward with? And so, as you look through that list hopefully you'll agree with the stakeholders and the staff that yes, this is where we want to come from, and these are the goals that we want to guide us.

And then you have the outcomes on the far right side. It's a little bit hard, we're not going to attempt to measure a vision if you will. We can measure our outcomes. And so these outcomes are very important to us. These three categories of outcomes to ultimately, we will ultimately define specific measures related to each of these so that we can report back to the community to our state, to our stakeholders about how we're doing in delivering on our mission of children's behavioral health.

Now you'll notice we've got this big thing in the middle, and it's inky right now and that is intentional. I don't have some big unveiling to do today, I want to be clear about that. Because last week what the group did is they began to help us prioritize the recommendations that came out of PCG and other groups. What we need to do now, and that just happened on Thursday so we haven't had enough time to really assimilate all the information that came out of that meeting on Thursday, begin to identify them top priority recommendations and group those into strategies, and ultimately an implementation plan.

So that's where we are right now in this process. I anticipate that by the end of August to early September we'll have the recommendations identified. We're going to put those back out to our stakeholder groups so that they can give input to make sure we get it right. And then we'll actually be rolling those out publicly, and beginning the work on the implementation. One of the pieces though, that I did want to point out is on the next slide.

The next slide shows a Children's Behavioral Health Services array if you will. When we look at children's behavioral health we want to make sure we're looking at it contextually in the entire picture of children's behavioral health. I want to be really clear we did not put up there that this is Maine's current Children's Behavioral Health Services array. It is not. This is a theoretical services array of Children's Behavioral Health Services. The reason that's important is to note that there are pieces of this array that we either do not have currently in the State of Maine, or as was pointed out by Kim and by Colin, that we have pieces that are either not available or essentially unavailable in certain parts of our state.

I think it's really important to recognize this is conceptual, that's why we don't have Maine up there in the title. But it is an important piece to recognize. So when you look at this pyramid if you will, you'll notice a few things. You'll notice it's broader, of course, at the bottom and narrow

at the top. And what's that is intended to reflect is the number of children that you serve, or on a theoretical basis, where you want to serve kids with Children's Behavioral Health Services. At that very bottom piece what you'll note there, is that these are all community based services that very logically, the kids and families that are receiving that bottom level, that broadest level of the pyramid services, are not kids that are coming into contact with any of our formalized systems. And that's a good thing. We want the vast majority of kids to be served with children's behavioral health services in that bottom piece of the pyramid. As you move up the pyramid, the level of intensity of services increases, and in general, the level of cost increases. So in theory we recognize there's always going to be a small number of kids at the very top of that pyramid that's going to need those services, but hopefully for short duration of time before they can be, hopefully, back in a situation where they can be served in their community.

So you'll notice on the left side cost goes up on the left side numbers hopefully go down as you move up to the top of that pyramid. I do want to point out that there are parts of the pyramid that we currently don't have in the state of Maine. And that's part of what the work of the stakeholder group and the work of PCG helps identify. What do we need to do to have the full array of the continuum of services in the State of Maine, and what is it going to take for us to be able to get there. So it's kind of important to put that in context.

The last thing I'll say is this has a direct linkage to one other piece that I'll just mention briefly. We can go into more details if you'd like. But in 2018, the federal government, Congress passed, and the President signed, as part of the Budget Reconciliation Act what is known as the Family First Prevention Services Act. Sometimes abbreviated as Family First. This for the first time provide states the opportunity to be able to pull down federal Title IV dollars in order to pay for and provide services from a prevention or early intervention perspective.

Now, the one thing that we know is great about our federal government is whenever they provide this new opportunity something usually comes with it and that's usually strings that are attached. And they're certainly strings attached to Family First as well. So that is why no state in the country today has implemented that. We may have one state or jurisdiction or a couple that do it beginning in October of this year. Every state has the opportunity to implement in either 2019, 2020 or 2021. Maine is beginning is planning process under the new Administration to be able to implement Family First. Were initially targeting 2020, it could be 2021.

One thing I will say though is as it relates to Family First, it does not, and will never pay for all of the array of services. Again it's very limited as to what kind of service you provide and the specific model of service that can be provided. I'm going to stand up here for just a moment. When you look at this piece here, most of what Family First is intended to pay for are things that are right here in this upper second level and lower third level of this pyramid. The reason for that is IV(e) right now, those Title IV(e) dollars pay for kids who are in care. So foster care, in the custody of the state. Family First is really designed to help provide some support to hopefully prevent those kids who are most at risk or using the federal language, a candidate for entry into the foster care, or formal care system, to not enter that system.

The last thing I'll mention about Family First is the services that are provided. The models that are provided are determined by the Feds. And so right now there's a total whopping number I think of 10 models that can be funded. So these are all evidence-based models. So it's not just

anything that you want to do, there's going to be some very careful restrictions around that. We as a state will ultimately submit estate plan for federal approval, and one side's done then we can implement and begin to draw down dollars to help support our Children's Behavioral Health Service System.

We can talk about that more now, or at a later meeting, but it does provide us with an opportunity for some resources to help support our system. The next 2 slides I'll hit pretty quickly.

Lindsey Tweed: Sorry can I ask a question about Family First? As someone from Children's Behavioral Health I try to understand it. It looks like a 50% match.

Todd Landry: It actually varies by state based on what the Feds call and I'm getting a little wonky on you now, the penetration rate the 4(e) penetration rate. So not all children in the state qualify for 4(e) dollars and you have to meet the same ones for Family First. As we understand it right now what the Feds will probably be doing is whatever your aggregate 4(e) rate is, that will be your match rate for these services as well.

Lindsey Tweed: I guess what our MaineCare rate is, I think we pay 34% and the federal government pays. But it wasn't clear to me, because Family First, people are very excited about it. But it wasn't clear to me that it was a better match.

Todd Landry: It is not. I don't think any state currently is beating their 4(e) penetration rate, to my knowledge, is not a beating their Medicaid rate. However, what it can do is it can provide services for things that MaineCare doesn't currently pay for. Or it could provide services for example, for a family that doesn't qualify for MaineCare or doesn't qualify for MaineCare. So there are some opportunities to leverage the federal dollars in order to help pay for things that MaineCare does not, or cannot pay for.

Kim Magoon: Put that in a little bit of perspective. Currently there are about 8 states that say they are about to go in October; that they are going to start this Family First. The word on the street is that some knowledgeable child welfare researchers say that it is highly unlikely that all 8 of them are going to go. It would be very surprising if half of them are able to implement something in October. The strings and list of the models that they are presenting are very restrictive and it's going to take a really creative team to come up with how to implement that. And with any new programming there's a lot of unknowns.

Todd Landry: And I will say to bolster that point only one has even submitted a state plan to the federal Department of Health and Human Services for approval. That's not even the state it's actually the District of Columbia. So only one has even submitted a plan, much less gotten approval and it's been kicked back as far as I understand DC approval rates.

Michael Brennan: Todd thanks for that explanation. Part of my question is, nationally and in the State of Maine the number of children coming into the child welfare system actually declined. In 2010 we were at an all-time low at about 900 to 1000. Then obviously because of the opiate crisis and that issue, we've seen significant uptick both in Maine and across the country in children entering the child welfare system. So does the Family First model envision an

emphasis on substance abuse intervention at those early stages to prevent the entry into the child welfare system, or recognition that that's been a driving force in more children coming into the system in the last 5 to 10 years?

Todd Landry: There was the recognition of that interestingly enough to-date there's only been one of the models that has anything to do with substance use treatment. And that just happened last week when, I believe was the methadone medication, one of the methadone medication models was finally added as a promising practice on the list. So right now there's not a lot in there, but the anticipation is that more will be because of that recognition about substance use.

Michael Brennan: So do we have the flexibility in the State of Maine in developing a plan that you're talking about to build in a model or services that would be more reflective of substance use issues?

Todd Landry: Right now the limitation is generally around those that the federal government has authorized to be able to use those dollars. So you couldn't create your own without a lot of hurdles to cross. So most of the states that we've talked to are going to go to ones that are either on the list or highly anticipated to be on the list. And that's really the way to best be able to get your State federal funds.

Michael Brennan: Then obviously I'm sure you know this, and I'm sure Colin and everybody else will support this. Up to 80% at different times, of the youth that have been at Long Creek over the last 15-20 years have experienced substance use issues. So again will we be able to utilize some of this money for that population as well?

Todd Landry: I wouldn't say that would be our hope. What we're looking to the federal Department of Health and Human Services to do is to add more models into the registry that we could then use in our state plan. But again it's part of the reason why many of the states are actually waiting till at least 2020 or 2021 to implement because we'd like to see more models there that we can put into our state plan.

So where we as far as next steps? I'll hit this pretty quickly as I mentioned we need to identify what it is going to be our prioritized recommendations. We're looking to select 10-12, roughly half those short-term recommendations, roughly half of those long-term recommendations. We recognize that we can't just look to the long-term, we have needs right now in our system that we need to address. And so we want to address those with a mix of short and long-term recommendations. And then you can see what those next steps are as well as what are the next pieces that PCG will be helping us with, most importantly I would say for many of you, probably that implementation roadmap. How are we going to take those selected recommendations and actually begin to implement those on specific timelines.

Then the last thing that I'll end with is some linkages to juvenile justice. This is not going to be any surprise to any of you but it's certainly true. I believe in Maine, we know that a large proportion of youth in our juvenile justice system have a diagnosable mental health disorder you can see some of the studies nationally and I believe our number here in Maine correspond pretty closely to that. We strongly believe, and as part of why we're committed to a very close working relationship with Colin and the juvenile justice base that a strong robust Children's

Behavioral Health System can significantly help to prevent kids from having me come into the juvenile justice system as well as the child welfare system. And it dries benefits across the board. Not just for those systems, but education systems, in our homes and in our communities across the state.

The last thing that I'll just point out that's this slide is we will have a major focus around evidence-informed and evidence-based practices. That has got to be a key for us going forward. We want to make sure we're investing dollars in those services that are known for the greatest extent possible to get the best results for kids and families. This obviously links back in the Family First those nothing better on the registry are those evidence-based models. A few of them that fortunately we do at least have an initial start here in Maine that are included in the Family First registry that we want to pay close attention to would be FFT, functional family therapy, MST multi-systemic therapy, and TFCBT, we love our acronyms, trauma focused cognitive behavioral therapy. Those are three of the nine that are on the federal registry right now. We do have a limited amount of those as far as teams and ability to deliver those services in the state of Maine and certainly one of the things will be looking for is how we can we continue to bolster those and improve those going forward.

Again that helps us on the Family First implementation side and significantly helps us in building a robust Children's Behavioral Health System. So with that I'll stop and see what kind of questions that you have and we can get into any more of the details that you might like to, particularly from the Children's Behavioral Health side.

Victoria Morales: Dr. Landry I'm so glad you're here and as someone who is sort of a newbie in understanding the Children's Behavioral Health System I do have a lot of questions. But I want to look at the report too, to see what the department looks like, what does your budget look like, how many staff do we have. And I know you're new and you're figuring it all out. So I'll leave those, but kind of interested in all of that. Some of the bigger questions. I love that you're talking about prevention and going up stream and in the work that I do in my day job in housing, thinking about how we really don't assess loss of housing in the impact of lack of housing, which I believe is one of the number one social determinants of health and stability moving forward. And I'm engaging in a study in the State and in Cumberland County on evictions. And we've had 5,500 evictions just last year. And we know nationwide evictions impact women with children, mostly and largely nationwide women of color. So starting to look at that and Cumberland County alone there were a thousand evictions alone last year, there were roughly a hundred notices served a month in Cumberland County.

So just really thinking about stepping as far upstream as possible and thinking about where can that funding come from. You know we are focusing on mental health, behavioral health but largely what can cause that is instability in the home and instability of jobs, and housing instability. So are we thinking big picture and maybe committed and maybe not with some of these funding sources that we are talking about stepping even further upstream to provide more stability for these families and to stay in their homes.

Todd Landry: I would say we are going to be limited to certain degree with some of the tools that we may have just referring to Family First. I don't think we're ever going to get back into that level. Having said that, just as were trying to make sure we collaborate well with Department of

Corrections we are trying to do the exact same thing on the housing side. On a variety of fronts, I might add. We know there is a significant issue for our youth. Fortunately we have a very small number of youth that age out of foster care, but for those who do, housing is a major and significant issue for those youth transitioning to adulthood. So we know that there's that issue. We know that that's a significant issue for families who are at risk of having children come into the system. Just as substance use is an issue, I should say substance use is an issue and so is the issue of housing and so is how those basic needs are being met.

If you go back a couple of slides that pyramid, go back to that pyramid, one of the things that we recognize is, I'll say this probably pretty often, most of the work of OCFS in our formalized system is going to occur in the top part of this pyramid, but it doesn't mean we're going to just ignore these other parts. Many of the things at this level, the second level, has a significant piece to do with MaineCare and some of those services. We also want to partner, I'm not necessarily saying we should be, in fact I'll say we should not be the ones delivering many of the services at the bottom of the pyramid. So we should partner with those entities in the community that are so that we're exchanging information, and trying to provide some of that partnership support that we can do there. But as far as specifically delivering those services we probably won't unless there's a direct linkage into the formalized systems that we have involvement with kids and families.

Jill Ward: If I could just take a minute, a couple of folks have joined us who are part of the Task Force and if I could start over here, if you can just introduce yourself to the group.

Julia Sleeper, Founder and Director of Tree Street Youth Center in Lewiston.

Mary Bonauto, Attorney at GLBTQ legal advocates and defenders. Very happy to be here.

Ned Chester, I'm the Chairman of the Juvenile Justice Advisory group.

Good Afternoon, **Representative Rachel Talbot Ross,** I represent House District 40 which is part of Portland and I serve on Health and Human Services and Judiciary Committees in the State Legislature.

Hi, I'm **Rodney Mondor** with the University of Southern Maine but I'm here as a parent of a son going through the system and as a parent who also went through the system.

Hi, I'm **Jill Allen** from NFI North. And I'm also here as the president of the Child and Family Provider Network which is a group of fourteen different agencies. Thank you.

Ned Chester: I don't think Colin, talking about the survey you did, one of the statistics that grabbed me was 80% of the kids at Long Creek had an average of 1000 hours of in-home services. So you know at the hospital and the resident level were matched appropriately. But the services that we are providing in the home, and they are evidenced-based programs, those are either not being appropriately managed or they are the wrong services. So it's not just at those higher levels that were having issues, it's at those entry levels where the work isn't quite being done the way it needs to be done.

Colin O'Neill: You know it's a great question. To clarify, when we did the study we went back 7 years prior to commitment. So we looked at Medicaid or MaineCare reimbursable services. So it's really only when you look at Todd's, the pyramid it's really only Medicaid which was probably that second one from the bottom. I think your deduction is probably a fair one. I think we just have to be careful not to say that all those programs are failing and not doing well. I think that we need to look at what is specific about the juvenile justice population that may be able to accurately manage at that level. So I think that we need to look at them. For me spending the last 20 years as a clinician and as a mental health coordinator, if we had done that study back in 1999 when I started, you wouldn't have had any kids at Long Creek having any mental health services prior to. So I'm thinking Okay the good news is we are identifying them early, the challenge is what do we need to do so we can keep those kids in the communities where they will thrive and the outcomes are going to be better rather than have them inch up in that pyramid. So I think you make a good point. The good news is they've been identified 7 years prior. But what do we need to do to support those programs so they are more successful for justice involved youth?

Todd Landry: The other thing that I may tack on to that. The Office of Juvenile Justice and Delinquency Prevention (OJJDP) just last year, in July of 2017, came out with a literature review around this question. And one of the things that they identified was the research around juvenile justice impacted youth or juvenile justice at-risk youth and which models get the best results specifically for those youth. So I think one of the things that we have to do is make sure that we're not just, we're not just providing services just because it's the only thing that maybe available in a community, we are identifying the right service for that youth and that family for the right amount of time. Now, we're probably never going to get to 100% by going to the doctor. The treatment may not work for 100% of the population but certainly for using the research to guide us to make sure if we do the right assessment of what the youth and child needs, or the family needs, and we match the service based on that. But too often in my opinion right now, because we don't necessarily have all the services in all of the parts of the state we are matching them with another service that may or may not be the best to get those benefits that we are looking for.

Colin O'Neill: I want to add a really important point. I think Todd is well aware of this. Right now in order to be eligible for the top level services you have to almost be a failure in the bottom level. And so I think we need to identify a system that is timely and sensitive to identify what are the needs and what is the appropriate service. And so you may just go right to the top because you are in crisis and you need help, instead of not being successful in outpatient home based and moving up that line.

Ned Chester: For juvenile justice involved clients it's a problem because that failure is not only failure for the family, but when you're in court when you're dealing, suddenly that failure has much more serious consequences than it might for a youth that is not in the system. So I think your point is well taken.

Jill Ward: So, Malory and then Representative Warren.

Malory Shaughnessy: Thank you both. I put my hand up after Ned's comment. So you both illuminated some of the points I wanted to state. We really need to look not just that they had a

thousand hours in-home but what services did they receive and were they the correct service. I think that is really a key piece. Were they the really high fidelity evidence-based services that match that need, but also on the flip side we need to look at the family involved, the youth involved that have failed so-to-speak compared to those that have succeeded, and say, what are the other surrounding issues, such as Representative Morales said, in housing or instability. So you can't just take it and slice and dice it in that focused way. We have to say also, there is a lot of success in home treatment. There is a lot of success, very evidenced-based on these high fidelity models that you mention, FFT and the others. But what are the others, how do you compare success and non-success and what are the other strong factors I think is a key piece that we can't lose sight of.

Charlotte Warren: Thank you Jill. Thank you Doctor Landry for being here. It is so important that we have this relationship between Corrections and Health and Human Services, like it's really necessary for what we are dealing with in this state. So my question for you simply has to do with the fact that what we are missing on the third rung is a place for kids to go. We have for real, I think, a lack of places when children and families are struggling to stay together often those children end up in the very top, in the secure youth detention facility. We hear that from judges a lot. So my question for you Dr. Landry is have you had the opportunity to sit down with folks in the judicial system also, to figure out who can be at that very pivotal point when a judge has to make a decision of where this kid is going to go. Who can be there to make sure that there's an opportunity for them to not end up in the incarcerated.

Todd Landry: I think it is a great point. And first of all I should say that I think I'm now one of your constituents. Just thought I'd get that in. One of the things that is very helpful is the Chief Justice I think is one of the invited members to the Children's Cabinet and so I think there is that understanding of the importance of bringing all those pieces together around some of these issues. As it relates to the Children's Division within the judicial branch, I know we've begun to have some of those conversations. I don't know if we've gotten quite to that level that you're talking about yet, but there are some opportunities coming up here in the next month or two where we'll be able to participate I believe in some national-level convening to see how other states are doing this with a team from Maine so that we can try to replicate some of those best practices adapted to some of these unique situations in Maine, and then try to build that forward. But I don't disagree with you. I think what we have to do is we do need to make sure that, and it gets back to that earlier conversation, how can we, and to the greatest extent possible, how can we make sure that the full array of services is available to all of our families in Maine whether they live in the county, or they live in the southern part of the state, or wherever that might be.

Charlotte Warren: Thank you.

Jill Ward: Any other questions? I just like to say that I find this exercise interesting because the department has gone through the evaluation piece that we're going through right now, and are sorting through the recommendations and prioritizing them, and that would be step two after this group finishes its work, and Mark Solar and his team collect the data and do some of the assessment. So it's a really timely moment for us to be talking to each other because some of what comes out of this process will certainly inform and shape how we function going forward as far as prioritizing recommendations. If we're working in partnership and if some of these things

are already in play, it's going to allow us to have a little more of a landscape of the recommendations and the work of this group. So I appreciate having you here at this moment in time. Yes, Rodney.

Rodney Mondor: Just some wordsmithing. It's for Colin. When we we're talking about the youth at Long Creek at one point you were using committed and then we have detention. So when we are looking at the numbers and we're looking at the services is that considering both groups or is that only the committed versus those that are in detention.

Colin O'Neill: I think both. I think one kind of drives the other sort of speak. I think some of the kids in detention are there because they are in crisis and they are in need of a service. Not only are they waiting for due process to happen, but due process is also waiting for mental health, the behavioral health system to play out.

Mary Bonauto: I'm sorry I came in a few minutes late so perhaps I missed something. Also this is the first meeting that I've been able to attend so again, sorry if missed something although I've read the minutes. So the question really is, Colin you mentioned, how great it is to be able to collaborate with Todd, and Todd you mentioned the linkages for example, among other things, to DOC and I guess I'm just curious about what is, other than Children's Cabinet, is there a work of this committee between meetings to say here's how we are going to figure out the intersection of DHHS at large and DOC? I'm just trying to understand how these things work together so that we actually can identify the changes and the systems that need changing.

Sara Gagne-Holmes: I'll take a shot at answering that. So prior to Todd's arrival, Colin and Commissioner Liberty met with Commissioner Lambrew and myself and Beth Ham, Deputy Commissioner at the department, to talk about ways that we can work together and align our efforts when it comes to older youth. And we made a commitment to meet quarterly. I know that Todd and Colin meet more than that. So we are trying to focus on both at the commissioner level and at the office and deputy level so we are working on how to try to align our services better. We don't have a solution yet, that is part of what Todd's work to help us identify where that alignment can happen. So I know it's a little bit of a non-answer for you because it is the start of a new relationship.

Colin O'Neill: Mary I'll just follow up with that and I'll be blunt. You know, we had been operating prior to this last few months and in the prior administration, in complete silence. So I know that because, unfortunately I've been around a long time, and I've seen it when we operated differently. At the end of the day we share a significant amount of overlapping clients if you will and kids. So Sara talks about a macro-middle and kind of micro approach to the work so I can tell you I've been dying to have monthly meetings with my counterparts at OCFS for years and on a month-to-month basis monitor the kids coming into our system so we can better serve them.

I think that the whole is greater than the sum of its parts, and I think we are starting to see better outcomes. Kids are moving around the system better. There's coordinators, we have staff housed in our facilities and regional offices that are functioning to help monitor those kids that go from one system to the next and back. That's really at the micro level and at the middle and macro level, the Children's Cabinet and as we get together quarterly to look at our budgets,

instead of looking at services separately, how can we braid our funding so that we can get a maximum benefit of that. So we are starting to have that conversation. Just have my word that it is different, it's definitely been a challenge. It's a great question.

Randall Liberty: Brian what are you seeing in the community? Any observation or thoughts?

Brian MacDougall: Yes. A couple things Commissioner. There is one specific point that I want to make sure nobody glosses over. In 1986, there are 267 kids committed to the DOC Maine Youth Center. Colin you said there were 35 kids today. Something has significantly happened in services to make those numbers a reality. But when I listen to this committee here and I listen to the questions from the Judiciary Committee, and other things, don't miss the point as a group historically, where this department has taken the juvenile division. We are very, very proud of the work that has been done to get to a point where we incarcerated 42 to 50 kids on a regular basis in secure detention for waiting to go to court. 267 committed kids in this state, to get to a point where we have 15 committed kids and 35 juveniles in the state that are committed to the Long Creek. I've been the duty officer all week long in Southern Maine and it's been interesting because I've been thinking about that relationship to all the discussions we are having in reference to developing a system. A 17-year-old girl on Sunday morning at 2 o'clock in the morning on I-295 was picked up for having a large quantity of fentanyl and methamphetamine and heroin with 2 adults. Maine state trooper doing a great job, does a random search. The floorboards of the car were carved out and filled in. They had just got back from out of state, it's an aggravated trafficking charge class A in the State of Maine. The juvenile division is supposed to make a decision this evening with what we are going to do with that particular child giving those factors.

13-year-old girl runs away from home and has been gone for 5 days, this was a second home. Significant work in the municipality took the place to find this girl. No secure detention beds available. The acuity of her issues doesn't reach the place to be treated for hospitalization, can't return this girl home, no family members available, what would you do with that child at 1 o'clock in the morning? I'm interviewing her in detention in a concrete jail cell. Developing a plan so I can go to court and let the Judiciary know and let the prosecutor know that we have put a plan together and find a place where we can put that individual.

Third call, 12-year-old child in Berwick. The police department went to her home two weeks ago to give her a warning for disorderly conduct, brother on supervision, the defense attorney tells the officer go back and charge her with assault because she needs services and the only way she can get those services is to get her in the system. So the York County Sheriff's Department charges her with assault. In the probation department the challenges you have is that when you talk about talking with the Judiciary you are really seeing needs front line. The repository is juvenile services. We are getting all of these things. And Dr. Landry I hear you talk about collaboration, that's exactly where we need to be.

When you think about those three cases this week. And I've done seven or eight of those, those are just three random that I was sitting here thinking about. As we develop a system I'm thinking about, you're right on the money, because DHHS has been responsive in the last 6 months but something has happened. They have become responsive; they weren't in the last 5 or 6 years we were silent. We had no system in place. We had DOC Field Services that were taking up

that slack. But don't lose sight of the fact that over that period of time from 1986 to 2019 we have [gotten to] 35 committed kids in the DOC because somebody has put a significant amount of work into field services to create a system in which we are attempting to service. Now, luckily Dr. Landry, 9 o'clock in the morning when I was meeting with that family of the young lady that had been missing, what did we do? We were on the phone with case management services, MST, luckily had the availability to have an opening. They were able to come on Friday to interview that child. But the challenge was what? The only place we have to take that child back was where? We have to take them back home. And all we are doing is managing the risk. We are not reducing it at that particular junction. So we're bringing the child back home that doesn't have any services because we can't leave her in secure detention but we don't have any intermediary place to put that child.

That's the practical piece in terms of the system that I'm hoping that this committee, including evaluations and consultations and all that. As Public Safety said when he was here, give me a menu in my offices and we'll use that. If Judge Powers was here he'd echo the same thing. Give me a menu and I will use that. And to look at the collaboration between Colin O'Neil and Dr. Landry we have to develop a system when someone gets a duty call from a municipality tonight, when we have to make that decision at 1 o'clock in the morning we have appropriate places to be able to make a risk assessment. To assess that individual and then to implement a place where we can go and bring those services. So then we don't have to go back in three or four days and reassess a detention decision. Because we are on the same page at this particular junction. Human services, prosecutorial judges don't want to use secure detention. We've learned something over the last thirty years. Build a system that works and we will implement that at every single stage.

Randall Liberty: Thank you.

Susan Deschambault: I'm glad you mentioned 1986 and those of you have heard me before. I'm sitting here listening to this, and those of you in the community, about corrections, I started in 1972 in Hallowell with females, with juvenile girls. In those days there was no state Department of Corrections. We didn't have a department until the late 70s early 80s. So we were the Department of Mental Health and Corrections. Mental health could care less. The commissioners were all psychologists, mental health providers, and corrections was the bastard child on the side and didn't get the funding and didn't get the attention. Bastard is a word I learned in Corrections.

I just wanted to say that other things happen. When I came to that first meeting I got the impression that everybody thinks this great thing we are doing is going to change things. I mean I've been in the business a long time, so it takes a long time. When you said, and I agree with you and I'm so glad you said that, because the probation officers and juvenile officers, the guys, the ladies, the officers right there, a lot of things happened in 1992 to 2007. There was a Maine Criminal Justice Commission. And that job, that task took 17 years was to break down the silos so that state police officers could talk to a probation officer, that the Maine Correctional Center could talk to the Maine State Prison. None of it, everything was in silos. It took 17 years to knock that down.

I want you to also consider what happened in those years. There were people in the 80s and 90s just like you who cared about the kids and wanted to do something. In those days the Department of Human Services sent the most kids to those training centers for a term called incorrigible. Incorrigible is not a crime. Incorrigible is a child and is someone that got that label because they failed at a foster home three times. That's what filled up our correctional facilities. But things happen like restorative justice, diversion, deferred sentencing, so these were all piecemeal things. There was no big task force to have a map and that came along with academia. It was colleges that came out and studied this and helped us. That's where we are today but I do want to champion people. I felt so badly for the boys training center when they changed the name to the Maine Youth Center because it was such a bad place to be. People forget, there were house parents: husbands and wives who took care of 75 kids in a dormitory. There was no care, the only care was those two for people who happen to be good parents.

And there are a lot of things that we are learning in mental health too. I was sitting here thinking one of the big problems is, there are families out there that crime is generational. A lot of them are agency dependent. You come in that house, and you say I'm from the state, they don't want help because they're getting money from an agency because they are problematic. There is a lot of psychology and social work going in that. I just needed to say that there is a history and I'm glad I said it once, I'm going to shut up the rest of the time. And I'm here to learn also. I get that history, and my co-chair knows how much I argue with her, and I listen to her and I try to give her the other side. So thank you for indulging me in my little history.

Joseph Jackson: I have a little history. So when I, my system impact began when I was a juvenile. The cell that they put me in didn't have a toilet, it had a hole in the ground. And so the kind of things we are talking about, what we used to do to kids back then, we are still doing it just to other kids. But I also want to note that there's this thing, where the kids that we are locking up in facilities, when they become adults they become locked up in adult facilities. And so when you start seeing a lot, in my experience, a lot of them are ending up from kid to adult facilities. And from working with young people now I'm seeing that same thing.

My question also has to do with when we're talking about these evidenced-based practices and these services that are being delivered are they culturally sensitive? Who's going to talk to the family that is culturally opposite of the person. So who is the one doing that? So when we are talking about the way that these programs, and the way that these systems we are implementing are trying to push are not a one-size-fit-all. So what is reaching one kid isn't really reaching another kid from a different community.

All of these communities that we are talking about, say Biddeford community where you are from, looks much different than the Lewiston community. They don't look the same. So whatever you want to put there, whatever you design, has to be culturally sensitive to represent what the people look like. And you have to be able to put people in there that can deliver that. And I haven't seen that. I haven't seen that anywhere where we are delivering anything that is culturally sensitive. We talk about these numbers, what's the number of minority youth that are incarcerated? So how are we culturally using evidence practices to deter them?

These are the kind of things, when I'm sitting here, I'm not hearing answers to. I'm not hearing answers of how to reach these young folks. I look at your pyramid, you're right, a lot of these

things I'm not hearing of. Especially for these young folks of color. And so for me when I'm thinking about whatever goes forward we've got a particular group here, it's not just everybody falling through these cracks. There are little pockets of groups and so who are these groups, and how do we target these groups? I guess is my question.

I guess we are talking about the evolution, of course, hopefully by now we're understanding that. When Guantanamo was opening up and people yelling about it, the solitary confinement of people there, it was happening in our backyard. When my organization was founded, we were founded as the Mainers Against Solitary Confinement when the people were first starting to fight about Guantanamo. We have to really look at our backyards because a lot of things that we are doing in these systems is alarming. That's the part for me when I'm here and I'm thinking about what young people need and how to keep them in those low areas of your pyramid. I think there is a lot of culturally sensitive things that we have to start addressing. And I don't know. I'm only one person at this table. It just feels kind of hard. I can't speak for everyone.

Julia Sleeper: Maybe something to tag on to that, is also the fact that when you hear some of these second and third level tiers being evidence-based and all of these things and the importance of that, let alone the question who are they based on. Beyond that is, though those may be some, in some cases intensive services or perceived as intensive services, the reality is the kids are still in the community, they are still at home. And there are a lot of agencies, I would argue on bottom tier, that can't qualify for any funding, won't qualify, and are not only hustling their own funding privately, simultaneously actually being the people who are actually leveraging the relationships with the families, to actually get those kids involved in the second and third level tiers. And oftentimes that's not acknowledge let alone compensated or supported.

And I get the concepts of evidence-based, I think those are important practices to some degree, but when you're requiring an inside-out accompaniment or a Tree Street accompaniment or whatever program community-based accompaniment with the family in order to get them to even engage with MST to get them to trust that service to that degree that relational piece is oftentimes grounded in cultural awareness, but also grounded in actually knowing those families, and there doesn't seem to always be a place that that gets articulated let alone actually compensated.

I'll be the first to sit here and say if I wasn't spending 75% of my time hustling for funding to fund our programs, we could be free agents essentially to support all of these kids to get them into whatever adequate program. And we could tell you which programs are going to work for them, and which ones aren't, and what has been tried and what hasn't. To name that whole burning through the system in order to get to the higher levels, we could just more relevantly place them. So I'm just throwing that out there.

Margot Fine: Thanks Joseph and thanks Julia. I just wanted to name two in terms of just flipping the conversation a little bit. That we also have a tremendous resource in Maine that we have young people who are at the table right now and many, many more that are interested in being a part of this conversation, who are ready to be seen as a resource. And families who have lived through system and survived through the system. That are closest to the issues and have answers. And instead of seeing them as problematic or utilizing services to get services, that we can actually speak directly to folks to come up with the answers to some of these really

hard questions. Even some might do really well speaking about those specific situations. Those specific situations require a really specific answer, maybe not a broad system answer to the twelve-year-old, to the nineteen-year-old that we really need to start looking at what people are saying in communities. People who have lived through the system and now are on the other side of it. Even those that are still involved in it or are very close to it and are trying to continue to survive it.

So I just want to really thank you guys for being here at this table that doesn't really represent you. And also invite folks to use Maine Inside Out or Tree Street as a resource to this table to really understand what people are facing and also the really brilliant solutions that people closest to the issues could really support this table in thinking about. I know as a person without lived experience of the system and incarceration, I have personally done a lot of learning and stepping back, and that is what Maine Inside Out is all about. So if there is any resource Maine Inside Out can provide to get more people to this table, or to get you away from this table and into communities, we'd be happy to support that happening.

Jill Ward: I appreciate you lifting that up Margo because that is an intentionality of this group and to that point, our September meeting will be at Tree Street, and it will involve a youth dialogue with this table. I think that was in one of the emails, but we'll get to that in the second half of the agenda. But I think there's an open invitation too, as we think about what these other site visits look like and some of the youth and family focus groups and activities. That is another place in which we can do exactly that with more than one group of young people across the state and their families.

Rachel Talbot Ross: I just want to make sure that we don't make all of this monolith though. And that is generations of black and brown families have been speaking up. No one's been listening. So I don't want to make this a new thing because we have been speaking up. Tribal folks have been speaking up, black and brown people have been speaking up, no one was listening nor did they value their input. This has a generational component to it that is built within a racist system. The system. So I don't want to make this a monolith that we are ready, we are ready all the time already and then there are communities that need help getting ready. So I don't want to put all POC or POC youth into one box that's real nice and tidy, or their families. But we have been speaking up and we do need help to build the capacity in these communities to continue to speak up. But there have been generations of pain in this system that needs to be addressed.

Michael Brennan: I think as we go through this process, that one of the intents or one of the potential outcomes would be that the legislature would be in a position to fund more programs that have more flexibility, that are more culturally sensitive, that are more Maine sensitive, not that we should maximize every dollar we from the federal government, but we also don't want to get into a box in terms of what services we provide or not, but simply because that's what the federal government has given the stamp of approval for in terms of evidence-based.

The other thing back to Mary's point, where, Todd I don't know if you want to comment on this or Sara you want to comment on this or I'll just make it as a statement, but the other challenge before the legislature fairly soon is that we have anywhere 45 to 60 youth that are in out of state placements, almost exclusively for mental health-related, there's some criminal justice or mental

health. As we try to develop an infrastructure in the state in order to bring those children back to be served in the State of Maine, there's got to be a lot of discussion between the Department of Health and Human Services and the Department of Corrections how we simultaneously build a system that allows those children to come back, and the overlap and the ability to complement those two systems with what we're talking about in juvenile justice I think are going to be there.

I know the legislature has a fairly strong interest in trying to look at how quickly we can develop that infrastructure in the state to bring those children back to the state of Maine and treated in the state of Maine. And that infrastructure is going to end up affecting the discussion that we have here about juvenile justice.

Todd Landry: I think it's an excellent point and I want to address two things. First of all, when I was talking about those evidence-based programs I never intended, I want to be clear about this, to imply that the only things we're ever going to use are evidence-based models. Clearly not the case. I also point out that there has been some discussion at different groups that I've had the chance to speak with that have made some assumptions that Family First could fund anything and everything. So I was simply saying we do want, to your point, to take advantage of all of the federal funds that we, as Maine neighbors and taxpayers, have paid in to get back and bring it back to our state to support our kids and families. That is a belief that I certainly have. We want to take advantage of those.

We also don't want to use all of our resources to fund that full slate of services and programs, including community-based services and others that may not be on that federal registry. That's fine, we can pull down the federal funds, and find those things, and hopefully that frees up state general revenue to fund some of these other pieces. So it is part of that other piece. To your second point about bringing, we do have right now about 60 youth that are currently placed out of State, about a quarter of those -roughly 12 to 15- are state wards, children in the custody of the state and the remainder are parental placements. They are not in the custody of the state.

But we do have those 60 kids and they're generally out of state because there was not one of those services where we can provide for them in-state. That's clearly something that we want to address and move towards as a total goal, as our vision states. Being able to have those kids served in their homes, in their schools, to the greatest extent possible. I do believe if we build a continuum here, that has services at all of those levels, we'll be in a much better place to be able to have those youth served close to home and with their families.

Rich Meserve: If I may jump in really quickly before we break.

Jill Ward: Yes, last one.

Rich Meserve: I just want to speak through the Commissioner of Education really quickly. First of all we are at the table with these other folks as part of the Children's Cabinet and other work groups. The Department of Education is very much aware of the issues. The legislature has been very kind to fund three new positions this year. We have a cultural competency position that is brand new to the Department of Ed. So that's happening this year, we are excited that will be posted very soon, as in maybe today. There is a family engagement component with that, there's a social-emotional focused position and then a counselor position. These are all

brand new positions in the department driven by the Commissioner in many cases, but very passionate about making this a much bigger part of school systems and awareness for all the people who work in the schools and the students who are in the schools. So the Department of Ed is very much on the table and very excited to be here.

Jill Ward: We are at the break point so I'm going to have us take a 10-minute break and my hope is Mark Solar will drive in any minute so that we can execute the second half of the agenda so please be back in the room at 2:45. Thank you.

BREAK

Jill Ward: Welcome back everyone. You're going to see me breathe a huge sigh of relief because Mark Solar and Lisa Macaluso have joined us from the Center for Children's Law and Policy and are going to lead us through the second half of our agenda today, which is going to involve getting an update on the progress we've made since June since we were all together, as far as the infrastructure to be collecting the information and what Mark and his team has been up to. And then we'll solicit some dialogue with you all, questions and conversation about some of our next steps. So I'm going to turn it over to Mark.

Mark Soler: For those of you who I didn't meet last month, I'm Mark Soler the Executive Director of the Center for Children's Law and Policy (CCLP). I want to tell you a story about myself. When my wife and I started dating I lived in San Francisco when she lives in Worcester, Massachusetts. And it was difficult to date across the country, but we were driven to be together. And so I used to do public speaking and I would tell people, and this is a while ago if you stayed over a Saturday night you got the special fare, very inexpensive. So I would tell people I will speak anywhere in the country as long as I can spend Saturday night in Boston. And so we did that for about 2 years. I racked up an enormous number of points on United Airlines and that allowed us to date and that's why I love United Airlines. Except I don't always love United Airlines because I got to the airport in Washington DC at 7 this morning and I didn't leave till 11:30am. So it's a good airline but it's not always perfect. I'm very happy to be here and I want to introduce my college Lisa Macaluso. And Lisa why don't you say a couple things about yourself so people know a little about who you are.

Lisa Macaluso: Sure. I'm Lisa Macaluso I hail from New Jersey. I'm the senior policy advisor at the CCLP. I guess the reason, the skillset I bring to the table for this particular practice is that I was the architect of the juvenile justice reform that became the national model for the Annie E. Casey Foundation, through the Juvenile Detention Alternatives Initiative (JDAI). And I'm really just thrilled to be here with you all today, to hear what you're doing, and to be supportive and helpful.

Mark Soler: Lisa and I are one team from CCLP. We have two teams of two people. The other team is deputy director Jason Zani and our staff attorney, Jenny Lutz. And they will be at the next Task Force meeting in August, and so they will appear here and Jason will give the progress report. And then in September I'll be back. We are sort of going on and off, but somebody from our staff as I said last month, will be at one of the task force meetings. So you'll always have progress report and be able to ask questions about what's going on.

As I was getting ready for this meeting I thought it makes sense to have something in writing for the progress report that way people can look at it and see if they want to ask any questions, but also when we finish the report we will have our record of what we've done. And this is an easy way of keeping records. So let me quickly go over the things that that we listed in the report, we have collected major reports that Jill and Colin and others have provided for us and we put it in the Dropbox so everybody working in our team can work on it. As I said last month our full CCLP team is four staff in our office, plus our new team member Alysia Melnick in the back who we just brought on today to help us with our administrative staff and helping us navigate the entire state government and she has a lot of experience doing that. And then we have a Dr. Andrea Weisman who is a criminal psychologist and has run a number of juvenile justice systems, the mental health part of a number of juvenile justice systems. You actually will meet her next week too, and with full disclosure as I said last month, she's my wife, and she is very good and really stands on her own doing it, but it's nice when we can travel together too. Of course that's why she's coming next month and I'm not, didn't work out exactly that way.

And then we have Dr. Naomi Goldstein who was a researcher, she was a psychologist at Drexel University and runs a juvenile justice lab there. One of the best and most active researchers in the country on juvenile justice issues. And then we will have a financing expert. We're still talking with people about that role. But all these people will comprise our team. So we have started collecting commitment and detention data from DOC. We feel that in doing this kind of assessment it has to rest on a foundation of data and so as we talked with all of you and I want to assure everybody on the task force, somebody in our team will talk to every single one of you before we finish this assessment. It's important that we hear from everybody about what they've said, what they have to say. We have our initial interviews, and it was only the first list. I think we've got seven back-to-back 7 reviews back-to-back tomorrow. I think we have 7 interviews on Wednesday, and that gives us 15 minutes to have lunch. So I want to make use of our time in the way that'll be most valuable.

We did interview candidates about our administrator position and we're very happy that Alysia's joining us. We literally close the deal while I was killing time in National Airport in DC. We have our first set of interviews and we naturally went to agency commissioners and directors and a number of key legislators. Please don't anybody feel slighted that you weren't on the initial list. Our teams will come up for five more visits to Maine before the end of the year. Every month part of our team will come up and then in January we'll be working on writing the assessment and in February meeting whether it's here or somewhere else, our entire team will come up to present the report and to answer any questions that you have.

As we started doing the interviews we thought it was a good idea to develop a basic set of questions. So we did that, and Lisa was primarily responsible for putting these questions together. At our office no important writing goes out of the office without at least two sets of eyes going on it because we have a lot of members of our team, all of our sets of eyes were on this, and we made a number of changes. Having a basic set of questions has a lot of benefits, one is that there's some continuity in it and we can find out whether different people in the system have different perceptions about how the system works. That can be very important and very helpful diagnostic tool for us to see where the information about how the system works goes. It also means that we can be transparent about it.

So the questions are included with your materials for this meeting. It's a draft set of questions in the sense that it's always evolving. And we're going to start with these questions and as I was looking them over again last night and again this morning I thought, wow, some people are going to have trouble getting through all these questions in the hour that we've allocated for these interviews. We're going to do our best. If we can't finish, we're going to follow up. We like using Zoom as a way of doing video conferencing. But we can do phone calls and Zoom meetings and things like that.

In addition, while we're giving all the sets of questions out to everybody knows what we're going to ask them, the disadvantage of that is that we lose a bit of spontaneity because everybody can think about it and say well, when they come and talk to me I'm going to say this, which is okay but then we reserve the right to include additional questions in it to get back to some of that spontaneity. So the co-chairs arranged for the presentation you had during the first hour of this task force meeting. There is a meeting set up on August 7th that Colin was instrumental in developing for Dr. Goldstein and her colleague Amanda NeMoyer, with data people from several state agencies. We wanted Naomi to be able to talk to the data people in the agencies to find out what data is available, how clean is the data, meaning how complete is the data. If we have data that's very good, but only covers half the kids in the system the data is not that helpful for trying to make true statements about the population in the system. So we need to know about that and know where we have strong data, and where we don't have strong data.

We know from the assessment that the Urban Institute did of availability of data, that we have very strong data in some areas. We don't have strong data and other areas. There may be additional ways to get that data if there is data that we feel is really critically important that we feel we have to go to individual file reviews or something like that we're going to see. We're on a tight time frame so I'm not sure that's going to work, but we want to be flexible and the key thing is you want to get as much information as possible and pull all of it. I think one of the values of our doing the assessment the way we're doing it, is we want to coordinate the information as much as possible so we get a true picture of the kids who are coming through the system starting with the kids who are at Long Creek, and then expanding out and taking a somewhat broader look at the children in the juvenile justice system. What do they bring in when they come in, what are their needs when they're in the system, how were those needs currently being met, are there other ways that their needs could be met in a better way. Those are the questions that govern our assessment of this.

I've had a delightful email exchange with Chief Justice Saufley. And I never know what to call her, and I think she doesn't know what to call me. So she doesn't put her name on her emails to me and I always wait for that so I didn't put them on her. So we have a wonderful email exchange with nobody saying hello. I don't know what to say, Chief or Leigh. I've been doing this for so long and I'm usually senior to most people in the room that I try to get on a first-name basis with everybody as quickly as possible. Those of you I've already been in contact with know, I'm really big for getting first names first. I don't like to rely on the formalism. We want to get to be able to have straight talk on what's going on that's the way we'll do a better job of trying to help our kids as much as possible. And with that, why don't I turn it over to Jill to talk about the website.

Jill Ward: Just this morning I sent in the reminder email the link to the URL, the website. This is intended to be a resource for this Task Force. At the last meeting several folks wanted copies of the reports, the 2010 task force report that the Chief Justice has mentioned a couple of times, Colin's snapshot from 2017 is up there. So you can see it's pretty basic, you can all go and click through it, it really quickly describes who we are. Most of this was what was contained in a press statement announcing the Task Force. Your name listed, those of you who are official members. And then there's sort of governing documents, which are Representative Brennan's bill, the JJAG resolve, and you can read Mark's proposal to get the award so you can see the work plan, and what the scope of work he described was and is because it's up there as well.

Under "our work" is where you will find all of the information about the meetings. The agendas will be up there, any presentation, so the slide deck from today, we will post up there. Transcripts will be posted up there. We're a little behind on that, but we're going to catch up by the end of August so that you can always go and see what was covered, what was discussed. If you missed a meeting you're going to have that for you.

Again, the "resources" are all here. They're organized by Maine first, the juvenile justice/youth reports, the reports that have to do with Long Creek in particular, the two children's behavioral health reports are up there, links to those. The Disability Rights education report that recently came out is up there and then a bunch of national reports and resources. So if you see something that you'd like to see up there that we've talked about here, that somehow I have missed or Alysia has missed as we get into operationalizing this we will post it....but you should be able to find the source material that we have referenced in these meetings on that web page. I'm also going to track the news items so that you all can follow what the narrative is in the papers, and see what is being said about what we're doing.

Then maybe most importantly, we will have the calendar of events which will list all of the Task Force meetings and locations as we determine them, related events that might happen with the Task Force, and if there are conferences or other things happening across the state that you think are relevant, like tomorrow's conference with DOC and DOE on school resource officers, we'll post those here too. This website is really intended to be a resource for this Task Force, but really for everybody else who's interested in what our work is, and what is the foundation information were using to do the work. Then lastly is the "contact us" page where you can email the Task Force, and I will get it. It will be where the questions can come, requests can come. Eventually when we have some other tools of Mark's this will be a place to find them so that you all don't have to email any one of us individually. You will have a place where you can go get this information on your own schedule.

Mark Soler: So let me talk about, also on the agenda is, or what we're going to talk about is recommendations you have for people you want to have interviewed including yourself. Maine has justice systems on multiple levels. There is the state system that is that is operated by the state agencies, but in every county in Maine in there is a separate juvenile justice system. It overlaps of course with the state system and is deeply related to it, and yet there are different players in each of the local juvenile justice systems. The way we see assessment is looking both at juvenile justice at the local level as well as looking at it at the state level.

In thinking about how we would do this assessment we thought we should go to at least four local areas to find out how the juvenile justice system works. Lisa and I and the other members of our team are very familiar with doing this. When we work on the Annie Casey Foundation's Juvenile Detention Alternatives Initiative, JDAI, when we get started with a site, when we're going to start doing detention reform, were used to going in and actually in a fairly short amount of time doing a lot of interviews, often every hour on the hour two people will come in. Lisa and I have done stuff and I've done with other people; we are two people we can do literally 14 interviews a day. If we do it in two days we can do 28 interviews in a day. It's a little tiring to do that. We do a major data collection at the beginning, and we learn a lot about what's going on in the local system. We want to do something like that with each of the four areas that we've talked to back here. The areas are Portland, South Portland, Augusta, Lewiston and then what I think of it as the Great North of Maine. And I will recognize it is hard to pick on one county but we'll figure out the best and most efficient and effective way to do that. But we want to learn how the system works, and the way we do that by talking to people who work in the system.

So in each of the four areas we're going to be in, we want to talk to the key judge, the key district attorney, several key defense attorneys, key probation officer, key law enforcement, service providers, use programs, and that's the minimum. Then other people that we want to talk to; we expect to do focus groups with young people and their families in each of the four regions. So we're going to set that up. There also going to be a town hall meetings in each of the four areas that were going into, I should say regions that were going into, all these are ways of providing opportunities for people to talk about their concerns, and the things that are going well within the system as it is.

To me there's no such thing as too much information there's only, the only problem is if we don't get enough information. And we try to set up this assessment so that we can guarantee ourselves we'll get a ton of information. We want a lot of it for us to get. We will produce a report that reads like one person wrote it because our deputy director Jason is very, very good at taking separate reports from several different people and giving them a single voice. And we've done this many times before. So we'll get a report that's readable, not technical that gets to the issues and covers all the things that I said.

So your roll, on this particular issue, is to make recommendations to us and in your packet is a page, but just as a very basic page, it looks for information on who would do you think we should talk to. We welcome recommendations for judges, and DAs, and defense attorneys, and other key players in the juvenile justice systems in these areas. And other people who you think that we should talk to. Our visits to Maine are, by necessity, time-limited but there are a lot of them, so we built a lot of time into this to be here. There are a lot of us on the team and we can make calls, and set up Zoom calls and we could set up Zoom group calls to do that, and we can have group meetings in these local areas if there are a number of prosecutors for example, or number of probation officers that would be good for us to talk to, we want to know.

And as I said last month, when we do these assessments it's a little bit like walking into a foreign country where you sort of speak the language but there are abbreviations that you don't know, and acronyms. And there are personnel you don't know. So we're trying to go in with her you know eyes wide open and our ears open and try to learn as much as we can about what's

going on. And all you can help us on that and that's another way that you can engage in working with us on this assessment.

Jill Ward: And so you can fill these out, but you can also email directly either through the website now, or I'm happy to take the emails and pass them along to Mark or email them to Mark directly. We're trying to streamline this so it's not a whole bunch of different emails to a whole bunch of different people. Some of you've already emailed suggestions, and been in dialogue, so we're just trying to get a bunch of different ways to receive them. So if you have someone who absolutely you think it'd be great to interview, just fill this out and leave it, if you think of somebody later on go on the website email one of us directly, and there will be a clearinghouse of all those recommendations. I know we have talked about at least at the chair level, Mark's desire to talk to as many people as possible, but at some point there may need to be some prioritization so there's a balance equation too, because there's not an unlimited amount of time. But the more names we have up front and understanding why you think they are important to talk to, the easier that sorting through process will be.

Mark Soler: Questions about anything that I've said in the second-half this meeting? Or that Jill has said?

Michael Brennan: This will be more of a comment and I will invite some of the Senators and Representatives to agree or disagree with me. I served on a number of different legislative committees, task forces and if this all plays out the way that Mark just talked about and is laid out in the work plan. It is going to be one of the most extensive reviews of data, public hearings, community input, interviewing, that we would have given the nature of this type of group and the nature of legislative task forces. I know this is not exclusively a legislative task force, but typically legislative task forces meet five times, they may hold one or two public hearings and they may have fairly limited data gathering and data analysis. So I think the work plan that Jill and Colin and Mark and everybody has developed that in January when the recommendations come forward, I think we'll be able to say to everybody else, both within the legislature, other stakeholders within the community that there is exhaustive effort to gather data, and to get the community input. But I don't know, Charlotte if you would agree with me on that or Rachel or Victoria, Patrick that would be my observation at this point.

Susan Deschambault: I just muttered under my breath that remember it's an election year next year so that plays a role in thinking.

Michael Brennan: Well for some people it's an election year every year.

Mark Soler: One other thing I would mention on the progress report at the bottom I put in referred media and co-chairs of task force. Actually in the first draft of that I said referred media inquiry to co-chairs of task force as I agreed I would do. In something like this, I'm very sensitive to the possibility that something that I, or other people on our team might say that might be misconstrued. And there are a lot of interests represented here from all over the state, and a lot of people who are doing incredibly important work and we wouldn't want to say anything that someone might misunderstand and take the wrong way. We really are working for the Task Force, all the co-chairs of the Task Force, I hope are used to talking to the press. I'm usually, I'm not shy talking to the press, I've done it for a long time, but I also have lots of experiences of

I would say something that is a paragraph long, and what gets printed is one sentence, and it misses critical things, and therefore it comes out wrong. So we agreed weeks ago that I would just not talk to the press, and so if anybody from the press calls as it happened, I just say please contact the co-chairs. I had a vision thinking that Jill was checking me to make sure I did what I said I would do. But I did exactly what we agreed to, and we will keep doing that. So if there are any members of the press here, I'm sorry we won't talk to you, but the co-chairs will be happy to talk to you.

Christine Thibeault: Jill, I have a question that has nothing to do with the press or media. But often in court I encounter either parents or victims' families who are very confused about the system or dissatisfied with the system or sometimes actually pleased with the outcomes that we achieved in court. Is there going to be a mechanism on the website or some other location where members of the public who have an interest, who have lived experience in this area can have input into assessment electronically as opposed to meeting at one of the focus groups?

Jill Ward: So I think this "contact us" page on the website is an open-ended invitation to anyone. It dumps into a spreadsheet; we will absolutely follow up with that. I think I'm going to let Mark talk a little bit about the survey tool that we've started to discuss that I think will feel a little familiar to what PCG used that is going to be an online questionnaire with boxes, though not like multiple choice, but to get some input. And organizations that have networks or lists of people or constituents or however you want to look at it. Legislators can use it; anyone could use it to garner input. We're going to structure that tool with the link that will be found on this website but that also you can forward to almost anyone and they can choose to fill it out. OR not. But we will create that avenue. I don't know if you want to say any more about that survey tool.

Mark Soler: Yes, I think when people have really good ideas we should acknowledge their good ideas and then borrow them. So as I read the PCG report I thought wow, they almost got a thousand people on an online survey, we ought to do that. And then the report includes the actual survey questions, and I read through them I thought, okay these are not applicable, but then these others, these are pretty good. I bet if our team sat down for a while we would come up with some good questions. Then I floated the idea to the co-chairs at our bi-weekly meeting last Friday, and everybody felt it was a good idea. So I think it is a good idea. It's not a scientific survey. It's not a random survey. We can't make a statement at all about the attitudes of people in Maine by doing this kind of online surveys, and opportunistic survey. We're going to ask everybody we know to ask all of their friends to fill out the survey. Anybody that's had any contact with the system or has an opinion about the survey. So it'll be skewed by its nature but is still very valuable. Especially the more people you get, the bigger the sample size, I think the better it gives us a sense of the kinds of things people are concerned about. And particularly is always interesting to see if people have different attitudes when they live in the same area. So they are seeing the system from different sides.

Just a follow-up on what Christine said we work with a lot of people who work with families and organize families who have children in the juvenile justice system and many of them are just incredible public speakers. I remember the first time; we have a member of our board of directors who is one of those moms whose both of her children went through the juvenile justice system in New York City. And she had a very, very rough time with her children, and she talks

about it, and she almost always sheds tears when she does talk about it. The system looks very, very different when you are on the receiving end of it when you are, when your child is trying to get through, when you're trying to get to best help your child, whatever your child's needs are. The system can be very frustrating. It can be difficult to manage. It can work out very well, and you can get the services that you need. And sometimes it's not. I think it's very important that we hear from as many people as possible on all sides of the system. We want to hear lots of input in terms of what people think. When we write our final report we are not going to quote every single person who we've talked to and we're not going to be able to include every comment. But everything we learn will go into our thinking about what the entire message of the assessment is, and what kind of recommendations we make for what the options are for you to go forward with.

Ned Chester: In terms of the interviewees. I'm going to give you the name of one or two defense attorneys, and Christine and I will come up with another prosecutor. Those people aren't going to care if you quote them. But I also want to give you the names of some people who run small programs a couple of JCCOs and are they going to be given, if they ask for anonymity is that going to be comfortable for the DOC, is that going to be comfortable for you?

Randall Liberty: Yes, complete comfort.

Mark Soler: Now that he's said that I'm completely comfortable. We actually do a lot of assessments inside facilities just as we did at Long Creek. Every child we talked to at Long Creek we say at the very beginning you don't have to talk to me, if you do talk to me anything you say I will keep to myself unless you tell me that you are being abused in some way right now. In which case I will have to tell someone to stop that abuse from going on, but otherwise I will not divulge your name to anybody else. The only people I will I will give you a name to, if that all, would be people on my team, because sometimes we hear the same thing about certain young people. We would give the same consideration to everybody we talk to. I think that some people will be the lawyers, defense attorneys, and prosecutors be happy to be quoted. But not necessarily on everything they want to talk to us, and frankly if we do a really good job they won't. They'll tell us things and say look, I want you to understand something I can't say this publicly, you are within my, or whatever it is, and certainly other people too. We want to get the information, and we'll protect privacy. We essentially never give any identifiable information in our reports unless we have explicit permission to do that.

Jill Ward: Other questions about the process? I think we've tried to establish an open line so if you sit there with questions and if you feel like it wasn't answered, don't do that. Email one of us and we will be responsive from a process standpoint. To that point, I didn't mention it, all of you should have gotten an invitation to join the google group listserv. That's also going to be another tool to communicate with you all so that you don't get emails with a gazillion people in them. But that's going to be a listserv and other people can sign up for it. Again it's another way to get the public information about what we're doing. You could certainly post questions to that but it's not intended to be a dialogue really, it's just intended to be an information share. So it's also a good place if you want to share some event or something with this group, a conference, you could just send it to that address: mainejitaskforce@googlegroups.com. So it's just an easy way to communicate with us and this effort. It's not quite ready. We're going to test it in August to

make sure it's working and people are getting the information. But between the listserv and the website I think you should all feel like you know what's going on. That is the hope.

Margaret Micolich: Who would that communication have come from?

Jill Ward: Me, I think. And if you're not on it, or you don't know what I'm talking about I can direct add you. I just want to know you're okay to do that, your consent to do that, which is why I sent invitations to people as opposed to just adding everyone.

Mary Bonauto: I apologize, it's my first meeting. Thank you for being here Mark and Lisa. Thank you. My question is, I know there are a lot of important people here, how can we actually help Mark? Sorry if I missed that somehow. Because we've got DHHS doing incredibly important work trying to provide super responsive services that are informed by all these different perspectives that are important. And DOC is doing a lot of thinking and collaborating and Margot mentioned and other people mentioned the importance of the youth voice here. And I know you are going to talk to all these people and you're going to have what sounds like, tell me if I'm wrong, like a high level of analysis of this. But in the meantime there are all these people here who know people and you're not going to be ever able to interview them all, but who have things to contribute to the solutions. I'm trying to figure out are there two tracks going on here? Because at the end of the day when you have a report well then what gets done in the legislature? I know, I see you're looking at me senator. How does this get effectuated and on the ground. I'm trying to understand that. How can we be building to those solutions now while you're also doing that analysis now? And how can we all be used effectively in that regard?

Mark Soler: It's a wonderful question, and it gives me an opportunity to explain more about what we're doing. When we went through Long Creek, and spend three days there and talked to the 79 or 80 kids who were there. We came out, and we said at the close out session that we thought that half those kids could go home quite quickly, if the right kind of programs were there, if the parent or guardian had the right kind of support for supervision. We thought the other half of the 80 could be supervised appropriately, and probably more effectively, in small maybe secure, but in a much smaller surroundings, which we know are much better for children. Large congregate care facilities are basically not good for children. There is lots and lots of research to show that. And so Mary, I think we will do a high level analysis but we also, we want to solve the problem. So we want to look at the profile of all the children who have come through Long Creek in the last year, and we want to be able to tell where all of them would go.

So you see in the questions, one of our questions is, in the world without Long Creek where would the children go? We are going to ask everybody that question. And I think people will have very different responses to that, and some people will say all of them can be in the community and we can put them in various kinds of programs, and some will say well we need three lockup facilities that maybe smaller than Long Creek. But that's all the kind of information that we want. We want to be able to start our analysis with the children who are in Long Creek and have gone through Long Creek and figure out where all of them should be. Some of them should be in a secure setting. A number of them should be under different kinds of supervision in the community, and some of them can go home to their parent/guardian. And we talked last month at the task force meeting about a continuum of care. And the continuum of care is a continuum. It has a range of different types of supervision. Some is a less intense level of

supervision, all the way to a much higher level of supervision, but not quite behind locked of bars, doors. And so our goal is to actually get at the nitty-gritty level and make suggestions to the Task Force as to what can be done to appropriately address the needs of those children who've been through Long Creek, and then expand out in terms of the children in the system. That's why we asked for a lot of data.

We want to know what the history of delinquency is of the children who've come through the system and what they're charged with, and if they're getting back into the system because they violated probation in some ways, and if it's a technical violation of probation, why are they back in secure detention. Well maybe because it's always been that way, but there are many, many places in the country where children who are found are technically violated don't go back in detention. There other things that are done. They are held accountable. We are in favor of accountability. I really need to emphasize that point. Because people don't associate that with me. I think that children should be held accountable. That's how I learned what was the right thing to do and the wrong thing to do. And that's how everybody learns what it was. All of you on the Task Force, and I've only met some of you, but you've all risen to a certain level of prominence in your field, but you were held accountable by somebody when you made mistakes. That's part of the learning process. But children can be held accountable without being locked up. Some children need to be locked up, for their own good and for the good of the community. But many children are locked up now don't need to be locked up, can be held accountable, and can thrive in the different kind of environment that may be able to focus more on opportunities, anchors for them, and other positive parts of their development that we want to stress.

Mary Bonauto: May I ask a follow up to that? Thank you for that. When you are thinking about where this child should go does that mean you are going to make recommendations about what the continuum should look like specifically, and therefore what programs should be in place that are funded by any number of the agencies here?

Jill Ward: And let me just say too, part of your question is getting at, and I said this earlier, the way in which that information is gathered, because we have lots of organizational people here, and system people here who have staff and structures, and can provide that information. And sometimes the mechanisms to get the information from the impacted communities, the end receiver, the process is a little bit more difficult. And I think we would like to use the site visits to exploit that a little bit. For instance, I'm going to put Julia on the spot, but she came up to me after the last Task Force meeting and said, what are we doing here exactly? Where are we going to start hearing from the communities that are actually impacted by this and are the end receivers of this? And I said, well what do you want to do? And she said we should have a Task Force meeting at Tree Street, and I said let's do that.

So, in September we're going to be there, and part of the agenda is going to be used for youth dialogue at this table to start to connect with who we're actually talking about when we talk about the kids in the system. So my sort of response to that is, if you have ideas about that bring them here, we don't have all the ideas. There is some limited capacity, but there are organizations and people here who have some capacity, and if they're willing to put a little elbow grease into it and it's not too stressful on the 75% of your time you try to raise the money to stay in business and meet the kids that are right in front of you, let's get creative about making some

of that part of the process that informs what the narrative is, that supports the data that supports the recommendations that Mark is putting together.

Mark Soler: I wanted to ask if Lisa, if you have anything you wanted to add to what we are saying.

Lisa Macaluso: So I guess at the end of the day what we're trying to do here is really think about what this, what a reimagined system would look like, that would reduce the number of kids at Long Creek that don't need to be there because you have a different system at the local level, and also ensure public safety for all communities in Maine. Right? That's really sort of at the end of the day that's the bottom line of this work. And going to your question about how the Task Force members can be helpful, I think that's partly a question you have to answer for yourselves. So you heard what Mark has said about what we're going to do and we are committed to doing that. It's my first time ever in Maine so I'm just going to say, I don't know you. Hello!

I think that's partly an evolutionary process. As we go through this process and we share information with you, there may be things that, sitting right here right now, but I can't tell you that it's something you would do, but you know when you hear something, right. I think the most important thing from a contribution perspective is that there is no problem in the juvenile justice system that is solely created by one person or entity or agency in the system. So as we go through what we're lifting up through this data collection process it's going to be really important to acknowledge the group of stakeholders that are involved in that decision-making point and for you all to be engaged in really thinking in a problem-solving way about how your agency or entity contributes that problem, and what we need to do, or what you want me to handle it. And that's really how you build a new system at the end of the day. That's the most important contribution you can make.

Rodney Mondor: As Mary was saying earlier, in my mind, looking at the future, I'm like summer is over, I'm already getting ready for this fall semester and what we can be doing now until February. And I think we're talking about 80, but there's 12 months in a year, that by the time this comes out we'll get another 80 and is there a way we can prevent the future 80 from coming in. And what can we do talk about the cultural differences in schools, and about parents and with Christine about parents and how to help them. Because those are all part of that, is parents do not know what to do if they have a juvenile in distress and how to work through it. I mean I'm educated and I understand student development theory. I will tell you that when my son went into the system, I disconnected from everyone. I would literally do u-turns in grocery stores before I would see the teacher or see a friend down the street because I didn't want to have to explain it. So if that is what this is about, how can we now, maybe over the next few months, while we are still learning, how can we start bringing in programs to schools, to parents, to start talking about some of these issues while we're doing this instead of waiting 12 months and saying now here is what we are going to do.

Victoria Morales: I like the idea of doing a case study of the children that we have in Long Creek and I'm hoping too that we take a step back and learn about how they got there. And I don't mean to call out Caroline Raymond, but I would love to hear what the kids are saying in Long Creek, because they must know what we're doing here. You are on the ground everyday

with them. I don't mean to put you on the spot, but can you let us know what they are thinking about it?

Caroline Raymond: Well they obviously know and they see the paper as well and everything that shows up in the press as well. Most of them are pretty focused on their own programming and what they're sort of working towards. What I hear people say, what can you do? I mean we rely heavily on our volunteers, our volunteers, we have some sitting in the room today, make a world of difference for our kids. And they connect kids back into communities and Long Creek is also it's moving towards opening a transitional program, called Bearings and, again, volunteers are going to be a huge piece of that, but you know we want as many people involved as possible to support these kids as they transition from Long Creek into a step-down program that connects them back to the community to reduce the amount of time in secure confinement. That to me is where I think we'll see we're all heading. We would love for people to be involved in that.

Jill Ward: I heard something over here and there are people in the room who have been in Long Creek and are listening to a lot of adults talk about it who have never had to spend the night in that facility. So I'm going to just acknowledge that and see if Zack or Ryan have anything you'd like to add not putting you on the spot, but just opening it up because it's an intimidating room. I think it's an intimidating room anyway. I'm just going to put that out there if you feel like you want to say something.

Zack Gregoire: I feel like as far as services go in Long Creek, it's really cookie-cutter. You all fit the same description; you all get the same treatment. I think it's more; you need to individualize it. You're not going to help me develop my behavior the same way you're going to help Ryan develop his. Everybody is there not because they want to be but because the community failed them, not because they failed their community.

Christine Thibeault: And just to kind of follow up on what Zack said. Over the last 14 months there have been four females who have asked to be committed and I'm really perplexed and I'd love to hear some thoughts from you guys about why. When we look at who the decision makers are in the room sometimes the kids themselves are making that decision that they would rather be committed to Long Creek than whatever they perceive the alternative to be. Now I'm not saying that maybe they do know what the alternatives are or maybe they just have fears about what those alternatives might look like. But in my world, in my county in the last 14 months for four females to ask to be committed when a prosecutor is saying I do not want this juvenile committed to Long Creek, they are telling us we don't have what they need in the community. So I think you're right. That the community out there has failed me, I would rather be at Long Creek.

Susan Deschambault: Can I just follow up? Can I call you Mark? You mentioned you were going to speak with Justices to find out what is it that they take into consideration in deciding where someone goes or knows what happens to them. You made that kind of comment. I hope whatever you do for a study, I'd like to look at the State of Maine as more than just York and Cumberland County, where the services are. In my experience has been a kid can commit 14 burglaries in Portland and maybe go to Long Creek, and another one up in Ashland, Maine or Van Buren commits two its tolerance for crime and behavior from the community and I'm always interested about that.

Having worked with juveniles that was my introduction to corrections, juveniles, it always bothered me that I could see two kids one, the little son of a gun, got away so much and had chances and the other one was really stolen from their family to go all the way from Van Buren to South Portland or Hallowell. That's like driving to New York for families. We've got to look at the state like that. So it's the tolerance and where the resources are. And not to put a finger on Washington County or Aroostook, they think they are doing the child a favor because that's where the services are. We are going to send them to Portland, and that's where the jobs are anyways, so maybe you can get a job there and live there and you know. So those are the things that we have to get ourselves out of our environment. I live in Biddeford and there are services all around there. I want to look at the kid from Machias and Piscataquis County.

Jill Ward: I think Ryan you wanted to say something.

Ryan Birkbeck: I've seen kids commit themselves too and sometimes it's not what they want to do but sometimes they feel it's their only option or they get sick of being put in this group home or rehab and this place and that place when they could just stay in one place. Because ultimately with some of these programs you have to be there regardless for a year, six months to nine months or whatever. And some kids think, well I've already spent the last 4 years in that home and why don't I just do my time and then go home. It's not about, kids aren't thinking I need help, I need help. Kids are thinking, I want to go home, I want to go home. I don't want to do this or that, I want to go home. It's not about how in the moment, they are kids, they don't have the mindset to understand that they have to go through these things. I used to panic when I was going through that, it was fight or flight and I would run every time. I would not see the need to get help, I would just take off because that's what was comfortable for me, to be by myself and take off, and not be thrown into counseling, or not being thrown into something that I feel like I'm being forced to do. If I'm feeling like I'm forced to do something you are not going to get 100% of my effort.

Jill Allen: First of all thank you for speaking up; that was probably the best thing I've heard all day. Very well put. I just wanted to mention as part of the process. I'm the regional director for NFI North and we keep talking about community-based services and we had three of them. You know many years ago we responded to a bid for three secure treatment programs in three different sections of the state and we developed them. And for the most part, of course I'm biased, but for the most part they were fairly successful. Their demise was that not everyone agreed. When I say everyone, we had a reduction in police involvement, we had a reduction, we had an overwhelming crisis in the hospitals. We used to have mobile crisis that was part of the whole equation. Mobile crisis disappeared. So initially though, we had three really good programs that serve hundreds and hundreds of kids so they wouldn't have to be at the Youth Center. And they could go to public school if that was appropriate, they could be involved in the community, work on farms, get a job, feel successful. I just want to put it out there because we keep talking about this model like we've never seen it before. But we have seen it and it worked. And I think we should talk about what was working with it and maybe try to build upon that for the future.

Malory Shaughnessy: I would tag on to that and put out a concept that we talked about at the Children's Behavioral Health Task Force and it gets to what Jill was saying. We really need to be thinking of things that are put in place that are sort of post-administrative long term, not

subject, we've got to stop being subject to the wind as we change our leadership. And things that work, how do we set them in place to keep them moving forward. Winds have changed and we shut them all down and did something else, we do that. We really need to think of continuity and what to do we establish and invest and how do we bake it in.

Inaudible on the recording: Member of the public who attended and asked about when was the group going to start talking about the money and funding.

Lindsey Tweed: Trying to learn our system as it is now. So we are trying to rehabilitate. Will we be able to have data about where are youth who have been served in our JJ system are now? In particular, did they end up re-involved in the adult correctional system? Is that doable?

Randall Liberty: The missing point is the counties. The county information. So if they do state time, the state would have that access. The counties are really siloed, it's difficult to grab that data.

Colin O'Neill: We are able to go in and get arrest data. We can do some of that. Like Randy said it's tough, we can go backwards to the folks that are in our charge and adult facilities but we are able on some level, who ends up getting charged as an adult a few years out at 18.

Lindsey Tweed: Because just to follow the other gentleman's point you know, resources. Certainly that costs a lot of money. You could make the argument for resources

Zack Gregoire: I feel like if you go based off of off county data that is an unfair representation of the youth of Long Creek. Because some youth in Long Creek opt to go to county. They would rather deal with what they get at county then what they get at Long Creek. And that is so common in there. So common. I've seen it a hundred times probably more than that. So if you are going to include data from counties, then I feel like there is more than that. There are people who continuously will bounce back from county to Long Creek, because at that age, where they'd rather be in county. So I feel like you know that's their choice to be in that. Rather be there than Long Creek and if that's their decision you can't hold that against them. State time is fair. But County is often their choice.

Charlotte Warren: I just wanted to go back to the question that Christine asked because I've heard her ask that question before. The question of why are children asking to be committed at Long Creek. I think probably the more important question for us to answer is what have we done to allow our community to be a place where children are choosing incarceration over what's happening to them because we are talking about children. We are talking about kids. So I think that probably some of the solutions that we are trying to find in this Task Force together, are answered in the question if we flip the question and say, what is going on in our community that kid's best place is to be incarcerated? Because it also is why so many kids are incarcerated.

Ryan Birkbeck: We all have different lives. I come from a different family than everybody in here, and just like everybody else, so my normal could be a different normal than your normal, or from anybody else's normal. So me thinking my only way out is to go to jail and be committed, might be my normal solution other than a different kid with different background and

his solution is to go to a counselor or in or outpatient or whatever. So it also depends on where you come from, what kind of family or background you may or may not have.

Joseph Jackson: One of the things that we have done in our communities especially oppressed communities is normalize incarceration. If it's not the boogie man, then some folks are going to go right back, because the streets are the boogie man. That doesn't mean that what was happening to them inside is not wrongful. I think that when you're there, and you're afraid and you make a decision based off fear and based on uncertainty and based on 'I don't have any knowledge'. I don't know what else is outside that system. I don't know what other choices there are. So my cousin, my uncle, my so and so he's in jail, so at least I know I have some security when I get there. But in the unknown I don't know what that is. So a lot of people feel like, I know what that is, and maybe I can handle that, but I can't handle where I'm at.

And that is what we do with folks, we put them in unwinnable choices, especially young people. And as he indicated when you're a young person I'm not thinking about tomorrow, what I'm thinking about is how do I get this to stop right now and the soonest I can get it to stop is to go in and finish my time and not have probation and not have somebody looking over my shoulder. They think that's what ends it. It's a false belief, it's a false narrative, because it doesn't. But that's the belief that folks have; they believe that once I go through this it's over. And I just need it to be over. That's the kind of stress and strain and trauma that they are experiencing in their communities.

Today, I'm bringing two young folks, I said I'm going to give you a stipend to come okay, if you say I'm going to give it two weeks later, if you are hungry can't give me money two weeks later and so we really have to start looking at resources are real, money is real, what people are facing out there is real. This generational component of what we're talking about deviants, it's also associated with poverty. If my young person has just passed away. There is a lot going on with folks. So I can't escape my reality and find whatever gratification I can, and I can't drive there, so I'm going to use a drug. These are all these manifestations of things that were saying is because of what we have compounded on folks. Community of Lewiston, they don't have jobs, where are they going to go?

You've got this whole generation of young men between 16 and 20 and 25 they got no job. No transportation to get there. Our answer then when this person got to eat, got to sleep, need a house, whatever is that takes money and resources to do that. You got a kid it takes resources to do that. I don't have. I can't put on blinders of morality and ethics when it comes to feeding me. And we close these narrative off when we start talking about what a kid did. What is the story behind that 12-year-old young person that ran away. I don't know. But I do know the act is not good. And that's all the system gets involved in. We rarely know how we got to this place in the first place. How did that kid get there? We almost know 100% is because 100% of all them all suspended.

So now we've identified a kid that's 100% suspended and then what we do after that those are the choices that are made that lead to these other things. So I'm glad that we are all here at the table, and I'm glad that we are all having these conversations about you know folks that are struggling out there. Reality is it's hard to put myself in his shoes or Zack's shoes or anybody else's shoes. But those shoes are all different and they are hard. And we are watching hard stuff

everyday with young people who've been through that system. Feel for them. I'm glad we're doing this, I'm glad we were starting with folks that are there, but we really, I mean, this is big. This is not small. There is a lot of interconnectedness or pieces that are not being discussed here. We're talking about generational racism; institutional racism is generational. And so we have to come here, I think we're starting in the right place. I just want to say that part because it's real hard to answer that question. When someone is seeking the trauma itself but they are running from a greater trauma.

Margot Fine: I couldn't really say it better Joseph. To your point Representative Warren, why are they asking to be committed? It's like Zack said. Something has happened in the community and they've been let down. And it's easier to share in a story. We have a 13-year-old boy that passed for commitment this year against the JCCOs recommendations against both sides, prosecution and defense. Nobody wanted this child to be committed, but he said to the judge, this is the first time I've ever felt safe in my life being at Long Creek. Katrina's heard me talk about this, because Katrina and I meet every month from Disability Rights Maine, and I said that's not okay. That should not happen. This child doesn't belong here, he shouldn't be here, and what are we doing to not take care of this child in their own community. So, that's my story.

Jill Ward: So we are a few minutes over and they are getting ready to close the courthouse. So let me just close by thanking everyone for being here and reminding you the next meeting is August 27th at 9 a.m. back in this room and there will be more information coming as we continue to work through the month.