



**STATE OF MAINE | CHILDREN'S CABINET**  
**2025 ANNUAL REPORT**

**MARCH 2026**

# 2025 CHILDREN'S CABINET REPORT

## Governor Mills' Children's Cabinet

Soon after taking office in January 2019, Governor Mills reinstated the Children's Cabinet following an eight-year hiatus. Maine Children's Cabinet members include the Commissioners of the Departments of Health and Human Services, Education, Labor, Public Safety, and Corrections. DHHS Commissioner Sara Gagné Holmes serves as chair of the Children's Cabinet. In collaboration with key staff from each of these agencies, the work of Governor Mills' Children's Cabinet is coordinated by Ana Hicks, Policy Director for Human Services in the Governor's Office of Policy Innovation and the Future.

The Children's Cabinet plays a vital role in convening and facilitating coordination across State agencies on initiatives and policies that will improve and promote the healthy development of children and youth in Maine. Staff from the Departments comprising the Children's Cabinet meet regularly to maintain open communication about changes and developments in programming and policies across state agencies for

children and youth, coordinate the implementation of specific strategies, and identify new opportunities to collaborate across programs to advance the Children's Cabinet's strategies and goals.

The Children's Cabinet strategic plans lay out two overarching goals:

- All Maine children enter kindergarten prepared to succeed.
- All Maine youth enter adulthood healthy, connected to the workforce and/or education.

## Children's Cabinet Achievements in 2025

In 2025, state agency staff involved in the work of the Children's Cabinet continued to meet regularly and make progress on advancing strategies to meet the Children's Cabinet goals with a focus on policy and programming for young children and youth aged 12 to 24.

This report outlines the initiatives for young children and youth that moved forward in 2025 and provides some highlights of plans for continued implementation of the Children's Cabinet strategies in 2026.



# STRATEGIES TO PREPARE CHILDREN FOR KINDERGARTEN

Staff from the DHHS and DOE are collaborating and coordinating efforts to strengthen and integrate programs within Maine’s early childhood system. Multiple state offices are involved in this effort including staff from DHHS’s Office of Child and Family Services (OCFS) and Maine Center for Disease Control and Prevention (Maine CDC) and DOE’s Early Learning (EL) Team and Office of Special Services and Inclusive Education (OSSIE). Maine’s early childhood system includes critical early intervention services, health care programming for young children, and early care and education programs such as licensed child care programs, Head Start and public pre-k.

## Strengthening Maine’s Early Childhood Education System

Through the work of the Children’s Cabinet, staff from DHHS and DOE are coordinating efforts to increase access to quality and affordable early childhood education programs through a mixed delivery system serving children from birth to age 5. This mixed delivery system includes multiple types of organizations providing care and education to young children. These organi-

zations include child care programs (both center-based and home-based), private preschool programs, Head Start, public pre-k programs for four-year-olds operated by public schools and Child Development Services.

OCFS at DHHS plays a key role in providing services to support families and their children in accessing quality early childhood education. OCFS oversees the administration of Maine’s Child Care Development Block Grant. This work includes managing the Maine’s Child Care Affordability Program, Child Care Licensing and Investigation Services, Quality Rating and Improvement System, and the state’s contract with the Maine Roads to Quality Professional Development Network (MRTQ PDN) at the University of Southern Maine. The MRTQ PDN works to promote and support professionalism in the field of early childhood education and to improve quality through the provision of a statewide system of professional development. OCFS also oversees and operates Maine’s Help Me Grow program which helps to connect families with children up to age 8 to needed services and programming.

The Children’s Cabinet Early Childhood Advisory Council serves as the state’s official state early childhood advisory council as required by the federal government. The CCECAC plays a critical role in providing on-going feedback to state agency staff from DOE and DHHS as well as serving in an advisory capacity for the Children’s Cabinet on a range of issues related to early childhood. It works to ensure statewide coordination and collaboration among the wide range of early childhood programs and services in the State, including child care, Head Start, IDEA preschool and infants and families’ programs, and pre-kindergarten programs. Its members include parents, child care and health care providers, philanthropy, businesses and organizations that advance the well-being of children.

The council meets monthly to provide input on on-going early childhood initiatives, including the implementation of the Preschool Development Grant and the ECE Consultation for ME, Maine’s statewide Infant and Early Childhood Mental Health Consultation (IECMHC) program. The CCCAC also is required to provide feedback every three years on the development of the state’s Child Care Development Plan and the Child Care Market Study.

Maine DOE's Early Learning (EL) Team promotes children's learning by offering information and resources to support public early elementary, preschool and Head Start teachers and administrators involved in educating Maine's young learners. The EL staff provide guidance and tools to increase access to high-quality public preschool and Head Start; strengthen and align instruction, assessment, and curriculum to established standards; support the professional development of early childhood (pre-k to Grade 3) professionals in public preschools and Head Start; assist families in supporting their child's learning; and inform policy, planning, and research-based practice.

### **Preschool Development Renewal Grant Awarded to Maine**

In 2025, the state wrapped up its final year of its three-year Preschool Development Grant (PDG). The Office of Child and Family Services, in partnership with the Early Learning Team and Child Development Services at DOE, was awarded a Preschool Development (B-5) Renewal Grant in December 2022. The grant award was \$8 million per year for three years. The grant supported efforts to strengthen needed infrastructure and capacity to create a more coordinated, efficient, and high-quality mixed delivery system for children ages birth to 5 and their families, targeting key needs surfaced in the initial PDG needs assessment. Many of the initiatives highlighted in this report were funded through the three-year PDG.



At the end of December 2025, the Early Learning Team was awarded a one-year PDG for the calendar year 2026. This grant will help the DOE and DHHS teams to develop a shared vision for a unified statewide system that improves families' access to quality early care and education. The grant will also support greater facilitation of local partnerships between schools and local community partners such as Head Start and licensed child care programs. These partnerships will help to smooth the transition for children and families between the early care and education system into kindergarten. They will also support the expansion of public pre-k education for 4-year-olds and partnerships around the delivery of special education services for young children with disabilities.

The initiatives funded through Maine's PDG build upon the successful cross agency work of the Children's Cabinet to ensure that all children enter kindergarten prepared to succeed in the early elementary years. Most of the PDG initiatives have wrapped up at the time of the release of this report with a handful continuing into spring 2026.

### **Preschool Development Grant Leadership Team**

The team leading the implementation of the PDG includes staff from OCFS, the Early Learning Team and the Governor's Office of Policy Innovation and the Future. This staff started meeting weekly to coordinate and collaborate on the implementation of the PDG. These weekly meetings have led to greater communication and shared decision making on efforts to coordinate and collaborate across the entire early childhood care and education system.

This leadership team will continue its work in 2026, focusing on implementation of the year long PDG as well as a smaller \$250,000 two-year Early Childhood Governance and Finance Project grant awarded to the Governor's Office of Policy Innovation and the Future. This governance grant will align with the PDG effort to develop a unified vision for Maine's early care and education system. It will support the development of a plan for identifying ways to solidify current efforts



of coordination and collaboration across agencies by identifying and implementing new procedures and policies to continue to breakdown silos and allow for shared decision-making across agencies with a goal of strengthening Maine’s ECE mixed delivery system.

### **Grants to Improve Program Quality**

In 2024 and 2025, the PDG funded Maine’s Quality Improvement Award initiative. The grant program operated by Maine Roads to Quality, Maine’s Professional Development Network for the early care and education field, provided grants to licensed child care programs to increase the quality of their programs and increase their star ratings which range from Star 1 to Star 5, in Rising Stars for ME.

In 2024 and 2025, 149 child care programs earned quality improvement awards. 50.3% were child care centers and 49.7% were family child care programs. 27 programs (18%) were able to sustain their quality rating with the award. 122 programs (82%) increased their star rating during the award period.

- 75 programs increased to Star 3
- 35 programs increased to Star 4 (including programs that moved from Star 2 to Star 4)
- 12 programs met or maintained national accreditation, a Star 5

In total, there were 152 Star increases, with 92 programs successfully moving up one Star, and 30 programs moving up two Stars.

### **Continued Investments in Maine’s Early Childhood Education Workforce**

One of the key strategies for the Children’s Cabinet is recruiting and retaining a diverse, qualified early childhood workforce. To address concerns about recruiting and retaining staff during the pandemic, the Office of Child and Family Services included \$200 per month stipends as part of the monthly Child Care Stabilization Grants funded through the federal American Rescue Plan. In the Governor’s 2022- 2023 Supplemental Budget, \$12 million (annualized to \$15.9 million), was included to establish a state source of funding for the program as ARPA funding came to an end. With this funding, the Early Childhood Educator Workforce Salary Supplement Program was officially established. The biennial state budget, passed in 2023, increased the funding for the salary supplements to \$30 million annually and required the implementation of a tiered system for stipends with increased payments as staff ascend Maine’s early childhood career lattice, advancing their education and gaining experience.

The program is now reaching an average of 7,755 educators per month. The tier levels are linked to the state’s quality registry level with Tier 1 at \$240 per month, Tier 2 at \$360 per month and Tier 3 at \$540 per month.

The decision to move to a system of tiered salary supplements was informed by feedback from the child care listening sessions in the fall of 2021. A majority of participants from all of the listening sessions advocated for a tiered approach based upon education and experience. There was a clear preference for monthly payments and wage supplements over tax credits.

The Center for Early Learning Funding Equity (CELFE) conducted an evaluation of the Salary Supplement System beginning on 7/1/2025. The evaluation included surveys from the field, focus group interviews, data analysis by the Maine DOL and CELFE, and culminated in a report that will drive system improvements through the rule making process.

Stipend Tier	ECE Workforce Registry Levels
Tier 1	Levels 1, 2, 3, and 4
Tier 2	Levels 5 and 6
Tier 3	Levels 7 and 8

The evaluation found that Maine’s Salary Supplement program has improved teacher and staff retention in child care programs, decreased financial stress for early educators and child care program owners, and encouraged further education and credentialing for the early care and education workforce. The program supports the operating expenses of child care programs, which helps to keep child care more affordable for Maine families. Many family child care owners and center directors reported that the supplements allowed them to avoid raising parent fees.

**Decreased Financial Stress**

The majority of survey respondents and focus group participants reported that the salary supplements are

reducing the overall financial stress of the early childhood workforce. Focus group participants reported using the additional income for basic life expenses like child care, car payments, groceries, and utilities.

**Encouraged Further Education & Credentialing**

- 86% of center-based staff, 54% of center-based directors, 88% of home-based staff, and 80% of home-based owners reported that the program encouraged them to complete further training.
- Young adults were most likely to report that the tiered qualification levels encouraged them to attain higher degrees.

**Improved Retention**

- Over 80% of both center-based and home-based educators reported that the salary supplements have encouraged them to continue to work in early childhood, while 62% of center directors and 67% of home-based owners reported the same.

In addition, since the program began in 2021, Maine’s Department of Labor estimates that employment in the child care sector rose 13%, creating more stable jobs, a trained and qualified workforce, and better options for working families with young children.





Governor Janet Mills cut the ribbon on Space to Thrive, a new state-of-the-art child care center in Windham, on September 18, 2025. It was constructed using \$250,000 from her Maine Jobs & Recovery Plan, and is one of nearly 300 child care facilities and family child care providers to receive a grant through the Governor's Maine Jobs Plan. The 6,000-square-foot facility includes five classrooms for infant, toddler, and preschool age children. Credit: Governor's Office

### Statewide Operation of Early Childhood Mental Health Consultation Program

Stakeholders participating in both the 2019 and the 2024 PDG needs assessment identified the increased stress of working with children with high needs as a factor in staff retention and identified the need to provide the necessary tools to early childhood educators to address the social emotional needs of children in their programs.

Maine's Infant and Early Childhood Mental Health Consultation (IECMHC) program was established in Maine following the passage of Public Law 2019, Ch. 481, *An Act to Promote Social and Emotional Learning and Development for Young Children*. In 2021, Maine adopted ECCP®, an evidence-based model developed in Connecticut. Initial pilot sites launched in January 2021, expanding statewide by January 2023. With a goal to build a sustainable and Maine-specific model, OCFS transitioned to ECE Consultation for ME in July 2025. The new model offers cost savings to the state and is designed to be culturally and contextually aligned with Maine's early childhood system. Grounded in evidence-based practices and supported by embedded continuous quality improvement

processes, ECE Consultation for ME is positioned to sustain and enhance mental health supports for children ages 0–8 across licensed child care, Head Start, public pre-k, and out-of-school programs.

#### Child-Level Impact

At the child level, 56% of children showed improvement on the Child Behavior Checklist (CBCL). Improvements in CBCL scores reflect that consultation successfully supports caregivers and educators in understanding behavior through a developmental lens, responding more effectively to children's needs, and promoting emotional regulation and resilience within the classroom and home environments.

#### Classroom-Level Impact

At the classroom level, 82% of classrooms demonstrated improvement in CLASS domains, an increase from 77% the previous year. This finding underscores the program's continued success in enhancing educator practice, classroom climate, and the quality of adult-child interactions. IECMHC effectively strengthened classroom environments, demonstrating that reflective, capacity-building consultation can produce sustainable, measurable change at scale.

## Program Reach

Program reach expanded significantly between FFY 2024 and FFY 2025. The number of programs served increased from 130 to 159, and unduplicated children served rose from 1,388 to 1,706. The number of teachers and providers supported grew by more than 25%, while the number of child welfare-involved children served also increased, highlighting the program's ability to engage with higher need populations.

During FFY 2025, Maine's Infant and Early Childhood Mental Health Consultation (IECMHC) program demonstrated strong, measurable outcomes across all levels of impact — child, classroom, community, and system.

## Improving Transitions for Young Children into Public School

Starting public school can be a significant transition for children and families, filled with mixed emotions, worries, and many questions. Smoothing this transition for children can help them to adjust to their new settings and better prepare them to learn and succeed in school. The implementation of effective practices and strategies that build connections across schools and communities and improve family engagement can lead to better outcomes for children.

During the 2024-2025 school year, and in the fall of 2025, the PDG funded a Transition to Kindergarten mini-grant opportunity for School Administrative Units (SAUs) to build out community-wide transition teams and year-long transition plans. SAUs were tasked with bringing community partners, school administration and staff, and families together to ensure support for children and families as they made their transition into public kindergarten. In all, the projects support approximately 850 incoming Kindergarten children.

The PDG provided grants to six SAUs to build out a year-long plan for family outreach and identification of incoming kindergarten students, host family events to acclimate children and families to public school, and educate both families and staff, including community child care partners, on the importance of this transi-



tion. SAUs met monthly through the school year with the Public Pre-K Consultant at the Maine DOE for learning, guidance and resources. They gathered data on what was already happening across the SAU, and input from school staff and families on past transition events, to better understand what was working and where gaps existed. The transition teams focused on increasing family attendance at transition events, earlier school registrations for children, connecting with community early care and education programs in their catchment areas, and positively supporting families and children through the transition process.

The schools expanded existing events and created new events to engage parents and early childhood educators in their communities. These events included:

- Family education meetings with child engagement sessions, providing opportunities for children to interact with peers and families to meet with administrators and educators to learn about the school community, what to expect in kindergarten, and how to support their children's learning and development through a home-school connection.
- Opportunities for school staff to visit community child care programs to observe children prior to the transition and discuss children's assessments and family assets.
- Community wide workshops where public school staff, community partners and members

and families were invited to a three-part learning series that included understanding childhood trauma, adverse childhood events, positive childhood experiences, and staff resilience.

- Community wide playgroups and gatherings for meeting school staff and other families as a way to build a community for incoming families.

In addition, schools developed educational materials for parents about child development, activities to support their children’s learning and development, what their children would be doing in kindergarten and expectations for child outcomes throughout the year.

SAUs and their transition teams and partners continue to gather data to inform their practices to ensure that they are looking at possible changes to the plan going forward. They are doing this through family and staff surveys, family focus groups, attendance numbers of kindergarten students, and other avenues. The teams met with the DOE consultant to discuss their data, successes and challenges, potential changes to their transition plans and teams, and their ongoing sustainability plan. The DOE consultant gathered data from the participants on the process, outcomes and future support to inform future efforts.

### **Efforts to Expand Public Pre-K to More 4-Year-Old Children**

The Children’s Cabinet is committed to expanding public pre-k for 4-year-old children in Maine. Public pre-k for 4-year-old children is an important component of a mixed delivery system for early childhood care and education for children from birth through age 5. Public pre-k programming, which provides free education for 4-year-olds, is currently provided through SAUs in Maine. The Governor included \$10 million in her Maine Jobs and Recovery Plan to support the expansion of public pre-k. This funding provided four rounds of grants to SAUs for start-up costs to help overcome barriers to expanding or starting up new programs in their schools. In addition, the funding supported SAUs to expand from part-time programming to full day, full week programming. Research

shows that full-day/full-week programming has greater benefits for children including higher scores in school readiness, greater school attendance and reduced chronic absences. Full-day/full-week programming results in children having fewer transitions throughout the day and better meets the needs of working parents who are juggling work and care for their children.

The efforts over the last several years to provide funding for the expansion of public pre-k led to an all-time high enrollment in the 2025/2026 school year with 7,016 children or 64% of all 4-year-olds. This is an increase of more than 500 new students enrolled in public pre-k compared to the 24/25 school year.

### **PDG Funds Pilot Projects to Expand Public Pre-K through Partnerships**

Through the PDG B-5 Renewal Grant, the Early Learning Team led an effort to explore different funding and delivery models for public pre-k expansion by piloting expanded partnerships between schools and community partners. To guide this work, the Early Learning Team at DOE pulled together an Advisory Team, representative of Maine’s early care and education mixed delivery system. This team was tasked with: 1) studying the current funding model for public pre-k; 2) exploring opportunities for greater partnerships between schools and community partners, such as child care and Head Start programs to expand public pre-k; 3) considering the ramifications of various part-



nership and funding designs, and 4) recommending pilot projects to test new designs that will increase access to public pre-k through partnership models.

As part of this effort, the Early Learning Team awarded two pre-k pilot grants for the 2024-25 and 2025-26 school year. The grants supported the opening of two new partnership classrooms in Scarborough and Sanford. Both classrooms are operating full day/full week programs that align with the school day. The Sanford Y operates one full classroom and provides afterschool wrap around programming for 10 of the 4 year olds in its program. Shooting Stars, the partner in Scarborough operating their pre-k program, has been able to mix typically developing children with children with disabilities in their special purpose classrooms during free play and mealtimes, creating an inclusive environment for all the children.

Both programs have been extremely successful. The Sanford schools are looking for opportunities to expand partnerships with other partners, beyond the

YMCA. Data collected about both programs provided the following feedback:

- Families praised teachers and reported children became more confident, independent and kindergarten-ready.
- Staff highlighted growth in literacy, social-emotional skills and daily routines, even for children who had never been in care.
- Partnerships with districts strengthened community connections and expanded supports for families (transportation, meals and wrap-around care)

The Pre-K Advisory Committee wrapped up its work at the end of 2025 after meeting for two and a half years to discuss issues and challenges for expanding public pre-k through increased partnerships between schools and community partners, including child care and Head Start programs. In early 2026, the Committee will be releasing a series of recommendations regarding public pre-k financing, strengthening of pre-k partnerships, and teacher requirements for pre-k community partners.



## Strengthening Early Childhood Care and Education Through Local Collaborations

### First 10 Community School Pilots

With funding from the PDG (B-5) Renewal Grant, the Early Learning Team at DOE has awarded grants to 6 SAUs to establish First 10 Community School Pilots. In 2023, the team awarded a first round of four grants and in 2024, the team awarded two additional grants to SAUs. First 10 Community Schools (F10CS) bring together school systems, early childhood programs, and community partners/agencies to improve care and education for young children and their families throughout the first 10 years of children's lives.

F10CS partnerships work to improve teaching and learning, deepen partnerships with families, and connect comprehensive services to children and families. Typical First 10 practices include, but are not limited to:

- fostering engagement of families with schools and community partners,
- providing play and learn groups linked to elementary schools,
- coordinating connections to health and social services,
- connecting child care providers with elementary schools,
- improving the quality of early childhood programs,
- coordinating the transition to kindergarten,
- conducting joint professional learning among early childhood, pre-k and elementary teachers, and
- aligning and improving elementary grade curriculum and instruction.

During their initial years of operation, the F10CS teams completed a strategic planning process, identifying strengths, needs and resources in their communities and goals for engaging families and supporting smooth transitions into school. They established working groups to implement key strategies to reach their goals.



All of the awardees hired F10CS Outreach Coordinators to build connections and relationships with parents of young children in the community through play and learn groups and with staff at local child care programs to strengthen connections across the early care and education system and the school system and begin to develop and implement strategies for supporting smoother transitions into kindergarten for children and families.

The F10CS Pilots are implementing key strategies to breakdown silos between the early care and education system and elementary schools as well as build relationships with and engage families with young children, even prior to their children entering school:

- **Play and Learn Events:** Play and Learn events connect children from birth to age 5 and their families with school staff. Children engage in playful activities that support their development across domains and provide experience with group settings. Facilitators model quality interactions and support families in building an understanding of their child's development. Families are introduced to The Basics parenting framework and receive support in connecting with needed resources and services. The goal is for Play and Learn series to run fall, winter and spring with some teams considering a summer session as well.

## WISCASSET SCHOOLS

At their central office, the Wiscasset Schools have opened a First10 Hub which serves as a family resource center for their community. The F10CS Coordinator hosts traditional play and learns in this space and holds office weekly "Office Hours" when families can visit for free play and to access any needed resources. Families have been dropping in more frequently during these office hours and participants have included a balance of mothers, fathers, and kinship caregivers. Best of all, they are building connections with each other in addition to accessing resources and being provided with caregiver education through The Basics. Several of the families have exchanged numbers and are getting together outside of the hub.



Ollie at one of the Play and Learn sessions at the First10 Hub in Wiscasset. Credit: First10

- **Joint Professional Development:** Several of the First 10 Community Schools sites have hosted joint professional development for early childhood educators from local child care programs and elementary schools. These trainings provide an opportunity for teachers to build skills and capacity as well as build relationships across the systems, helping to better support transitions for children and families as they move from the community ECE system into the local public school system.

Comprehensive plans to support children and families during the transition into public school are another key strategy. Each community's plan is unique and builds upon practices and traditions already in place. Efforts include beginning the transition process earlier and providing clear communication and support to families around the registration process. Transition plans include opportunities for families and children to explore the school, meet staff, learn about school procedures and ask questions. Teams also explore strategies for connecting with community-based providers to learn from their experiences and ensure a warm hand off for families between early childhood programs and providers.

With the end of the PDG funding, the F10CS pilot sites will officially wind down their work in the spring of 2026. Schools are working to identify opportunities to continue key First 10 strategies without the PDG funding.

## SANFORD

Over 40 early childhood educators from elementary schools and early learning centers in Sanford came together in October for the second annual joint professional learning event. Training was differentiated to meet the needs of the age span that providers worked with. Training for infant and toddler providers focused on emotional regulation and sessions for Pre-K and Kindergarten focused on the Young Mathematicians program. All of the teachers had opportunities to interact with one another throughout the day in order to build relationships with teachers across the age ranges.

# Playmaker U starts with you

We understand the challenges that early childhood educators face. Playmaker University provides helping spark and sustain their own sense of joy, inspiration, and community. Because we know that it is hard to share children what you don't have in yourself.

Just for kids. It's a powerful way to combat it to remember why you fell in love with the first place.

research-based, trauma-informed and. All Playmaker University support NAEYC program professional development earning

## We're saving you a spot

Playmaker University is designed for early childhood educators working with children under the age of 5. However, since the Playmaker approach can be easily adapted to work with children of all ages, those who couldn't use a little more play in their lives?

## Take your own sweet time

We know you're busy. That's why Playmaker University offers flexible learning paths. After completing a 1-hour virtual kick-off event, you can complete your learning online at your own pace. For organizations interested in partnering with us, we also offer a blended approach that combines dynamic online training modules with in-person learning opportunities. Learn more about us to bring Playmaker Live experiences to your institution on our website.

enroll today or learn more at [playmakerproject.org](http://playmakerproject.org)



# Playmaker University Course Descriptions

## Playmaker University Overview & Course Catalog



### Behind every change-maker is a Playmaker

Many of the people who dedicate their careers to caring for our nation's most vulnerable kids were once vulnerable kids themselves. It took a special person to help them see their inherent goodness and value. To make them believe in themselves. We call those people Playmakers.

Our children are suffering. Today, we are facing a national mental health crisis. Rates of depression, anxiety and trauma are at their highest levels. All of which negatively impact social, emotional, and cognitive development. We believe that early childhood educators are perfectly positioned to be a powerful first-line of defense in addressing this crisis.

That's why we created Playmaker University. Playmaker University is a groundbreaking learning program designed to help early childhood educators use the healing power of play to address the children's mental health crisis head on. Through it, we provide training, resources and ongoing support to the frontline professionals dedicated to caring for our nation's youngest, most vulnerable citizens.

## GREATER BELFAST

The Greater Belfast First 10 team hosted a joint professional learning opportunity for their elementary educators and community care and education providers in August. They were joined by facilitators from the Life Is Good Playmaker project for a two-day retreat which kicked off their Playmaker University "semester." Playmaker University builds understanding on the impact of trauma and provides educators/caregivers with playful strategies for building resilience. This retreat is addressing the requests of community educators and leadership reports that teachers have been implementing strategies from the training and there has been a shift in the approach to challenging behaviors, engaging families and supporting access to comprehensive services.



## INTEGRATING AND ALIGNING PROGRAMS

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### **Integrating and Aligning Programs and Services for Children from Birth through Age 5**

The Children's Cabinet Early Intervention Workgroup is comprised of DHHS and DOE staff who provide early intervention services for children birth through 5 years old. Members of the workgroup include staff from the Maternal and Child Health Division at the Maine CDC, the divisions of Children's Behavioral Health and Early Care and Education at the Office of Child and Family Services, the Office for Family Independence, the Early Learning Team at DOE, Child Development Services, Office of MaineCare Services and the DHHS Commissioner's Office.

The Early Intervention Workgroup provides an opportunity for staff managing early intervention policies and programs for young children to coordinate and collaborate efforts to better serve families with young children and ensure that young children receive the necessary screenings, evaluations, and services to support their healthy development. The Early Intervention Workgroup is focused on the implementation of three key initiatives that support its goal of integrating and aligning maternal and early childhood programs and services. This includes: 1) the implementation of Help Me Grow, 2) efforts to increase rates of developmental screenings through the implementation of the Ages and Stages Questionnaire (ASQ-3) on-line and 3) the alignment of the perinatal system of care initiatives with other early childhood initiatives.

## Connecting Families to Needed Programs and Services Through Help Me Grow

Help Me Grow (HMG) is a free informational service linking families and professionals to information about child development, pregnancy, and community resources for children and families. The intent of the program is to increase knowledge of the services available for children and families and connect families to service providers. HMG also enhances connections among service providers to ensure an accessible and interconnected system. HMG offers developmental screenings to help parents better understand their children's developmental milestones and support referrals to needed services. Parents can complete the ASQ screening tool and if the results indicate areas of concern, they can use the information to speak with their child's primary care provider and/or other providers.

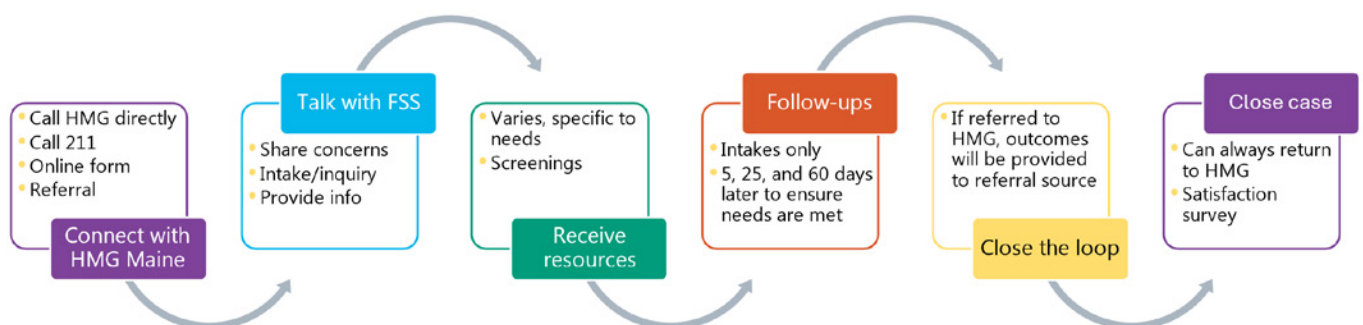
HMG has been fully operational in Maine since November 2022. In calendar year 2025, HMG served 1,232 unique children and provided 1,042 developmental screenings for 557 unique children. Many families called HMG to obtain information and resources about their child's developmental milestones or to get support to address their child's behavioral and/or mental health issues. Parents' basic needs for their child, such as diapers, formula, and car seats were the second most common concern among parents statewide. Parents of the youngest children served by HMG

most commonly seek out resources to meet their child's basic needs, with many of these concerns voiced by parents who were New Mainers.

Since its inception, HMG has been closely tracking data to understand resources that families need when they contact HMG. As a result of this work, in 2024, the HMG team trained five of their staff to become trained Child Passenger Safety Technicians, certified by Maine's Highway Safety Department, who can provide child passenger seats at no cost to qualifying families. As HMG works with families to provide child safety seats and educate about proper use and installation, they also connect families to additional resources.

Over the 2025 calendar year, a total of 186 car seats were distributed by HMG. Recognizing the critical service gap, HMG supported one staff member in obtaining certification as Maine's only Adaptive Car Seat Technician. Additionally, several counties were identified as lacking certified technicians. HMG has conducted outreach to community partners and identified 22 individuals who will complete Child Passenger Safety certification training with Safe Kids Maine by the end of 2025. This training will be provided at no cost to the participants and will expand CPS-T coverage in under-resourced regions and strengthen statewide capacity for safe car seat education and distribution.

## Quick Review: HMG Experience



## Partnering with Wabanaki Public Health and Wellness to Strengthen Maternal and Child Health

The PDG provided funding to Wabanaki Public Health and Wellness (WPHW) to strengthen their maternal and child health efforts in all five tribal communities. The partnership with provided funding for safety bundles for families welcoming newborns and with young children, books for the Literacy and Love program, doula training, parenting education classes, and staff to oversee this project.

### Safety Bundles

In 2025, safety bundles were provided to over 100 families in all five tribal communities. Safety bundle items included smoke detectors, carbon monoxide detectors, safe sleep materials, baby safe cabinet locks and latches and other safety materials for the home. Each bundle was created individually to meet the unique needs and circumstances of each family. These safety items helped families who were anxious about welcoming newborns into the home feel more confident and prepared for their arrival.

### Early Literacy Programming

WPHW distributed over 200 picture books to families with young children in all five tribal communities in Maine. These books came with basic information for parents about the importance of reading to their young children and how reading to children at an early age provides a strong foundation for early literacy skills and development. Many of these books are written in tribal languages and all of the books include stories about tribal cultures, communities and history.

The funding supported the purchase of books such as:

- Many Hands: A Penobscot Indian Story
- Mi'kmaq Stories: Legends of the Look
- Little People of the Dawn, and Wabanaki Seasons
- A Maliseet Story



### Doula Training

WPHW partnered with Zaagi'diwin Doula Services to offer a full week immersive Full Spectrum Indigenous Doula Training program to 24 tribal members, including 10 WPHW staff members and 14 participants from all five tribal communities. The intensive full week training prepared tribal members to serve as doulas in their communities.

Doulas serve as nonmedical personnel who provide support, encouragement, and guidance before and during the labor and delivery process. Doulas often serve as advocates and intermediaries for pregnant individuals, helping with communication between health care providers and patients. In addition, they educate pregnant individuals on what to expect during labor and work with them to establish birthing plans. Studies have shown that the support provided by doulas can reduce anxiety and stress and build confidence for patients during labor as well as reduce the length of labor.

The Zaagi'dwin Doula Services weaves in traditional tribal teachings and ceremonies to their intensive training. The program focuses on ensuring that participants get the training needed to provide holistic, trauma-informed support and care to pregnant, birthing, and postpartum individuals and families.

A number of the trained tribal doulas will participate in the newly formed MaineCare Doula Council. The council, established by the Office of MaineCare Services, will support the implementation of the Transforming Maternal Health Model and the process for establishing doula services as a reimbursable service under MaineCare.

## Strengthening Maine’s Perinatal Systems of Care

Since 2019, the Department of Health and Human Services (DHHS) has led the Perinatal System of Care (PSOC) Working Partners group to work on strengthening the system with partners in health systems, social services, and state agencies. The Working Partners Group defines the perinatal period as preconception (three months prior to pregnancy) to one-year post-partum, after delivering a baby, and includes the care of the baby from birth to first birthday. Overarching goals of the work are to achieve healthy pregnancies and the best possible maternal and birth outcomes in all areas of the state across all populations.

DHHS has been focused on reducing the rate of infant mortality and maternal morbidity and mortality rates up to 12 months post-partum. In 2024, Maine’s infant mortality rate was 4.5 infant deaths per 1,000 live births, which is the lowest it has been since 1996. Additionally, PSOC goals are reducing Maternal Morbidity and Mortality Rates up to 12 months post-partum and ensuring all mothers and infants receive the right care in the right place at the right time with the appropriate transport of women and infants. This is measured by the percentage of very low birth weight (VLBW) infants (<1500 grams or 3.3 pounds) born at Level 3 or higher hospitals with a goal of 90% based on the CDC

Healthy People measure. These rates were in Maine were 85.2% in 2017, 78.1% in 2021, 81.9% in 2023, and 87.1% in 2024.

Foundational work was completed in 2019-22 to strengthen the Perinatal System of Care including quality improvement efforts to reduce infant mortality rates by improving Safe Sleep practices and care of Substance Exposed Infants through the implementation of the Eat, Sleep, Console protocol in birthing units. In 2020-21, DHHS expanded its work with work groups to evaluate the Levels of Care (LOC) at hospitals in Maine, assess maternal transportation, and work with clinicians on standardization of a preterm labor risk assessment.

In 2020, Maine DHHS and the Maine CDC asked all Maine hospitals to complete a U.S. CDC assessment on maternal and neonatal LOC using the LOCATe tool. Maine DHHS then met with each hospital to review results and determine the appropriate maternal and newborn LOC. This document includes guidance on services based on the level of care, a map of Maine hospitals, and contact details. In 2022, Level of Care Guidance was released. In 2025, the three-year review of the guidance was completed. The updated guidance is posted on the Maine CDC website. Documents include:





- Maine Perinatal and Neonatal Level of Care 2025 Guidelines (PDF)
- Maine Hospitals Level of Maternity and Newborn Care Map with Contacts (PDF)
- Notice of Maternity and/or Newborn Care Changes Policy Effective (PDF)

In 2025, there were many programs, working groups, activities, public education campaigns, and policies across DHHS, DOE, and the Department of Public Safety (DPS), to improve the Perinatal System of Care. The state also worked with several organizations and health systems that received federal funding to work on the Perinatal System over the last five years.

### **Maine CDC Programs Support Newborns, Pregnant People and New Parents**

The Maine CDC oversees many programs that directly impact the care for children and families in the perinatal period. The Maternal and Child Health program runs Newborn Screening and Surveillance that includes newborn bloodspot screening for 57 genetic conditions, the newborn hearing program, CMV and congenital heart disease screening. The screening and surveillance team also makes referrals to early intervention services and care coordination for babies born in Maine.

In 2025, the Maine CDC redesigned and relaunched its [Safe Sleep Campaign](#) to better reflect family-cen-

tered and trauma-informed principles. The campaign's messaging was updated to shift the focus of the letter "D" from Drug Free to Danger, accompanied by the tagline "Be Aware, Know the Dangers Beyond the Crib." As part of this effort, Maine CDC also developed a Safe Sleep Checklist for Emergency Medical Services (EMS) providers. The checklist allows EMS personnel to conduct a brief safe sleep assessment when engaging with families in their homes and provide educational materials. The Maine CDC launched the [Healthy Habits: Ready, Set, Grow webpage](#). This new resource page is specifically for expecting and new parents to help connect families to support, services and information to "promote maternal well-being and ensure babies grow strong and healthy." Together, these efforts represent a comprehensive, coordinated approach to promoting safe sleep practices and supporting healthy beginnings for Maine families.

### **Maine Immunization Program and Protecting the Health of Infants**

Other critical infant health work at the Maine CDC that impacted the perinatal system of care was the Maine Immunization Program roll-out of the new Respiratory Syncytial Virus (RSV) drug, Nirsevimab, which helps prevent RSV in newborns and young children, to the birthing hospitals and primary care offices in the state during the 2023-24 RSV season with over 2,700 doses administered. The total number of doses increased to 5,008 in the 2024-2025 RSV season. The Maine CDC also worked to spread awareness of sexually transmitted illnesses that impact infants including Hepatitis C and Congenital Syphilis with the state seeing an increase in cases. In 2023, Maine CDC hired a new Hepatitis C Navigator who is improving Perinatal education, testing, and connecting clients to treatment. Since the inception of this perinatal project in 2023, information and assistance were provided to clinicians and birthing parents for more than 385 pregnancies affected by Hepatitis C. In 2024, the Maine CDC also hired a

part time Cytomegalovirus (CMV) coordinator to create a CMV screening program which is required by Public Law 2021, Chapter 698. In 2025 this position was made full time and now includes staffing the Rare Disease Advisory Board, which is slated to start up in 2026.

### **Maine CDC Partnership with EMS and Hospitals to Address Maternal Emergencies**

The Maine CDC is also working with their Perinatal Outreach Education Coordinator (POEC) Perinatal Nurse Educators and the Maine EMS for Children (EMS-C) program to continue to build infrastructure in the state around caring for maternal emergencies. Maine EMS for Children (EMS-C) program, within the DPS, received federal grant funding in April of 2023, providing 100% funding for the next four years. Efforts are focused on EMS and Emergency Department readiness for pediatric and infant emergencies, improving quality metrics for care and transport of infants and children, improving education opportunities, and collaboration across the continuum of care for infants, children, and pregnant people.

In 2024 and 2025, the two Perinatal Nurse Educators that work with hospitals in the northern and southern regions, continued to teach educational courses, including Advanced Life Support in Obstetrics (ALSO<sup>®</sup>), [Basic Life Support in Obstetrics](#) (BLSO), Fetal Monitoring, S.T.A.B.L.E. program that provides post-resuscitation/pre-transport stabilization care of sick infants, Transport Conferences with the birthing hospitals, and simulation training for maternity emergencies with obstetric providers, called Moms 1.0, MOMs 2.0, MomsSim ED in partnership with the MaineHealth Hannaford Simulation team. In 2025, the Perinatal Nurse Educators also supported non-birthing hospitals and developed several resources, including the Maine Perinatal Nurse Outreach Educator OB Resource Guide for non-birthing hospitals 2025, Triage of Pregnant Patients in Emergency Department (without Obstetric Coverage), virtual training availability through a

new Perinatal Outreach YouTube channel, and a Post Birth Alert Program to all birthing hospitals which is a visual cue (orange bracelet) to consider whether this patient's chief complaint could be pregnancy related when seeking medical care.

Since 2023, Perinatal Nurse Educators and the EMS-C program have offered (BLSO) to ensure training in maternity emergencies. In 2025, the Southern region held 9 BLSO courses with a total of 137 participants. 56 RNs, 67 EMS, 9 physicians and 5 physician assistants. In the Northern Region, 114 providers were trained in the S.T.A.B.L.E course, 127 in BLSO, 14 in Fetal Monitoring and 35 providers in the Neonate in ED course. Of these 290 providers, there were 31 medical providers, 209 RNs, 47 EMS, and 9 others.

As part of this educational process, the EMS-C program worked with the state EMS Medical Direction and Practices Board to update protocols for maternal and newborn transport. In 2025, EMS-C work involving the perinatal system of care included: adding a new section (Lavender) in Treatment Protocols for Obstetrical Care, providing Basic Life Support in Obstetrics (BLSO) trainings for Prehospital Personnel, finalizing a \$100,000 grant for Neonatal Resuscitation Program (NRP) classes statewide for EMS and EDs, and studying the use of Kangoofix transport devices for newborns.





### **Transforming Maternal Health in Maine**

In January 2025, MaineCare was the recipient of U.S. Centers for Medicare and Medicaid Services (CMS) Transforming Maternal Health (TMaH) grant. This grant is designed to improve maternal health care for women enrolled in Medicaid (MaineCare) and the Children’s Health Insurance Program (CHIP). DHHS will receive up to \$17 million in funding over 10 years to invest in infrastructure, planning, and services to support 13 elements of the national TMaH model. The work will also expand MaineCare coverage for perinatal supports and services.

In 2025, MaineCare started the three-year pre-implementation planning period which will be followed by a seven-year implementation period. In the first year of the TMaH model, the MaineCare Doula Council was established to ensure doulas have a voice in shaping implementation of services throughout the state. This is in preparation for MaineCare to reimburse for doula services starting January 2028.

Other first year initiatives in 2025, included perinatal rural regional planning focused on ensuring access to perinatal health care services, engaging the community to bring awareness to these efforts, and guiding individuals of each region to work together to improve maternal and infant outcomes. The TMaH model is also funding Perinatal Transitions, a program aimed at improving the transition process of community births to in-hospital births. Efforts have focused on bridging communication between hospital staff, EMS providers, and community birth providers, and educating all parties on best practices for these scenarios.

Lastly, MaineCare utilized TMaH resources to partner with the Maine Primary Care Association to create a multi-session webinar series for Maine’s Federally Qualified Health Centers (FQHCs) on resources and best care practices for pregnant individuals to potentially increase the number of FQHC providers to feel more comfortable in delivering maternity care in the state.

## Improving Care for Pregnant People with Substance Use Disorder

### MaineMOM Program

Improving care for pregnant people with substance use disorder and infants exposed to substances during pregnancy is also part of the perinatal system of care work. DHHS continues to lead a monthly Substance Exposed Infant (SEI) and Maternal Substance Use State Steering Committee meeting to support the work of the Maine Opioid Response Plan. In 2024 and 2025, MaineCare continued to work with perinatal, behavioral health, and addiction medicine care providers in the [MaineMOM program](#) to improve care for pregnant and postpartum people with opioid use disorder and their infants by integrating maternal and substance use treatment services. Now that MaineMOM is an official Medicaid payment model, MaineCare has worked to enroll new providers across the state into a new section of policy, Section 89, for MaineMOM Services. In addition, the MaineMOM program worked with the CradleME referral team to update their [referral form](#) to increase referrals and jointly supported a care coordinator on the CradleME team with the Maine Families Home Visiting (MFHV) program. MaineMOM also supported the PQC4ME's [Universal Naloxone Project: A Postpartum Toolkit for Harm Reduction](#) to complete a pilot at a fourth birthing hospital.

As part of the last year of grant funding in 2025, MaineMOM partnered with [Cornerstone](#), to offer Substance Use Disorder (SUD) doula training to six individuals working within the MaineMOM system of care. The training focused on harm reduction, stigma awareness and reproductive justice. In addition to this initiative, MaineMOM also coordinated with the [Maine State Breastfeeding Coalition](#) to create an SUD and breastfeeding toolkit for perinatal and pediatric providers which includes a comprehensive assessment of national policies, as well as care recommendations around breastfeeding in the presence of substance use.

### Whole Person Care Demonstration

In addition, in July 2022, the Office of MaineCare Services received federal approval to expand services for MaineCare-enrolled parents with SUD, who are involved with Child Welfare Services under the Office of Child and Family Services (OCFS), or at risk of being involved with Child Welfare under a Medicaid SUD 1115 Waiver first approved by CMS on December 22, 2020. With this waiver, Maine is the first state in the nation approved to offer continued Medicaid coverage for members who might otherwise lose access during the Child Welfare process due to changes in household size. This was operationalized and implemented on May 1, 2023. Parents who are successfully engaging with the Department through the rehabilitation and reunification process can continue their coverage, supporting them in accessing SUD treatment and other critical medical care. OMS has submitted the renewal application for Maine's Section 1115 demonstration—currently titled the Substance Use Disorder Care Initiative—CMS. The existing waiver is limited to SUD services, supporting treatment access and residential SUD care. In contrast, the renewal application broadens the demonstration to also include SMI and is now under review as the Whole Person Care Demonstration. The renewal, now under review as the “Whole Person Care Demonstration,” places a strong focus on expanding coverage and quality standards for individuals with SMI. The current demonstration remained active through December 31, 2025, and the renewal, if granted, would extend the waiver authority for an additional five years at some point in 2026.

Under this expanded design, the demonstration would extend federal authority for Medicaid reimbursement of clinically appropriate mental health as well as continue the current authority for SUD treatment in facilities with more than 16 inpatient beds. It also promotes integration of community-based and residential services, adherence to evidence-based mental health care standards, and quality monitoring to ensure safe, effective, and recovery-oriented treatment environments.

## Creating Plans of Safe Care for All Substance Exposed Infants

The OCFS Child Well Being Team continues to work collaboratively with prenatal providers and birthing hospitals, as well as the CradleMe team, to create a [Plan of Safe Care \(POSC\)](#) for all substance exposed infants (SEI) and their caregivers. OCFS hired a dedicated POSC nurse in late 2020 that ensures that each SEI receives a Plan of Safe Care and connects caregivers to resources to help with identified needs. In the fall of 2023, a new online POSC portal was implemented to allow for transition from paper to electronic versions of a Plan of Safe Care.

In 2024 and 2025, trainings on the POSC with medical providers, including those that provide treatment for substance use disorder, and OB/GYN offices are being done to work towards getting the POSCs completed before the birth of infant(s) to better connect families to resources. The Vital Records Program at the Maine CDC also updated the birth certificate worksheet to add a module on substance exposure during pregnancy and POSC completion to improve surveillance data in 2023 which was rolled out to all the birthing hospitals in 2024.

In 2025, DHHS and OCFS proposed legislation to clarify reporting requirements and create rules around Substance Exposed Infant reporting. [Public Law, Ch 353](#) was signed into law and OCFS is currently working with the Maine Child Welfare Action Network (MCWAN) on facilitating workgroups around rulemaking in 2025-26.

## Strengthening Early Intervention for ME Services for Infants and New Parents

Complementing these DHHS perinatal efforts, the Department of Education and Early Intervention for ME (EIFM), Birth to Three (Part C) supported perinatal health, improving family and professional partnerships by training all early intervention, birth to three staff in evidence-based models supporting early infant brain development and early, healthy primary caregiver relationships. In 2023, Early Intervention for ME, Birth to Three designed a pilot in York County with the mobile based Mammha program, a virtual maternal

mental health support and referral service for pregnant and postpartum women who think they may be experiencing maternal mental health symptoms.

During 2024-2025, the preliminary data from this pilot was reviewed with state and community partners also supporting infants, young children, and parents during the perinatal period. Since, additional collaborations with Mammha include MaineHealth RMOMS, WIC, and Maine Families Home Visiting. In July 2025, through a contract with the Maine Medical Association, supports providing the Mammha app to Maine Families Home Visitors (MFHV) to support maternal mental health of the families they serve. The family visitors introduce the Mammha app to families, which has questions to screen for behavioral health concerns, and can help families engage with a peer, get involved in groups and provide referrals for mental health therapy and medication management, if needed.

EIFM staff also continue training in the [Brazelton Touchpoints Approach](#)™ (0-36 months) and Newborn Behavioral Observations (NBO) System™ (0-3 months). Early Intervention for ME, Birth to Three also continues to review and update the Maine's Birth to Three (Part C) [Established Conditions of Risk List](#) which identifies conditions or event that make young children up to 36 months and their families automatically eligible for Early Intervention for ME Birth to Three (Part C), a voluntary family-centered early developmental support program. Starting in 2023, all infants and young children with prenatal alcohol and/ or substance exposure born in Maine are eligible for enrollment in CDS and receipt of services.

## Building an Early Childhood Integrated Data System

The PDG (B-5) Renewal Grant is supporting the development and implementation of a new Early Childhood Integrated Data System (ECIDS). An ECIDS collects, integrates, maintains, stores, and reports information from early childhood programs across multiple agencies within a state that serve children and families from birth to age 8.



Maine’s ECIDS will provide state leaders with information to make informed decisions about programs and policies that promote access, quality, and a strong workforce to support all Maine children ages 0-5. The ECIDS will serve as a tool to promote alignment and coordination of the early childhood system through better information sharing and a clearer picture of needs, gaps, and strengths of the system and it will be a resource that provides data-driven insights that can improve short- and long-term outcomes for children and families in Maine.

Maine has made progress in advancing the development of an ECIDS over the last several years. Maine worked with a national technical assistance team to draft and publish an *ECIDS Road Map for Maine* in 2022.

The ECIDS Project Lead conducted a readiness assessment to map the data landscape for young children in Maine, supported the state to develop a clear purpose and vision for an ECIDS, informed the development of the State Longitudinal Data System at the MDOE in order to identify connections to a future ECIDS, and developed a plan for conducting data matches across

early childhood programs to answer key policy questions and inform the development of an integrated data system.

In 2025, the team conducted a programmatic data use case that matched and integrated data across five data systems to inform the development of an integrated data system and answer policy questions about Maine’s publicly funded early care and education programs (including the reach of these programs, overlap between these programs and the percentage of low-income children and children with disabilities served through these programs.) The policy and program team developed the data use case which included identifying the data systems that would be integrated, conducting a cross walk of data elements across these systems, and identifying key policy questions to answer through the integration. Legal teams supported efforts to develop data sharing agreements to allow for the sharing of data with Maine Office of Information Technology. The data sets were shared with staff at Maine OIT that conducted the actual integration of the data. At the time of the writing of this report, the data was still being finally integrated and analyzed.

## STRATEGIES FOR ENTERING ADULTHOOD

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Staff from several state agencies support the Children’s Cabinet to reach its goal of ensuring that all Maine youth enter adulthood healthy, connected to the workforce and/or education. This team includes: DHHS staff from the Office of Child and Family Services, the Maine CDC, MaineCare Services, and the Commissioner’s Office; DOE staff from the Office of Student and School Supports, Workforce Development and Innovative Pathways, the Commissioner’s Office and the Maine School Safety Center; Department of Corrections staff from the Office of Juvenile Services; Department of Labor staff from the Division of Vocational Rehabilitation and Bureau of Employment Services; staff from the Governor’s Office of Policy Innovation and the Future.

This team has focused its efforts on expanding access to resources and services, including mental and behavioral health services and prevention programs that provide opportunities for youth to build positive relationships, leadership skills and make other connections that support their positive growth and development.

### **Increasing Prevention Services and Programming in Schools and Communities**

#### **Expansion of School Based Health Centers to Better Meet Physical and Mental Health Needs of Youth**

In 2022, the Department of Education allocated American Rescue Plan ESSER grant funding to middle and high schools to expand the number and scope of Maine’s School Based Health Centers (SBHCs). The funding allowed for the start-up of new School Based Health Centers at four high schools. In addition, existing School Based Health Centers at seven sites received enhanced funding to improve operations, expand outreach and coordination of services to increase enrollment of students, and strengthen and expand their oral health services.

Maine CDC provides grants to 21 School Based Health Center sites at middle and high schools across the state. SBHCs share a commitment and collaboration between a school, community, and health care organization(s). SBHCs support students’ health, well-being,



# All SBHCs in Maine

2024–2025 School Year

**RSU #38**

Maranacook  
Community Schools

**MSAD #75**

Mt. Ararat High School

**Greater Portland Health**

Casco Bay High School  
Deering High School  
King Middle School  
Portland High School  
South Portland High School  
Westbrook High School  
*South Portland Middle School*

**Western Maine Pediatrics**

Oxford Hills Comprehensive  
High School  
Oxford Hills Middle School

**HealthReach**

*Lawrence High School*

**Hometown Health**

Nokomis Regional High School

**Penobscot Community Health Center**

Brewer Community School  
Brewer High School  
*Bangor High School*

*James F. Doughty Middle School*  
*William S. Cohen Middle School*  
*Leonard Middle School\**  
*Old Town Elementary School*  
*Old Town High School\**

**Calais School Department**

Calais Middle and High School

**Bucksport Regional Health**

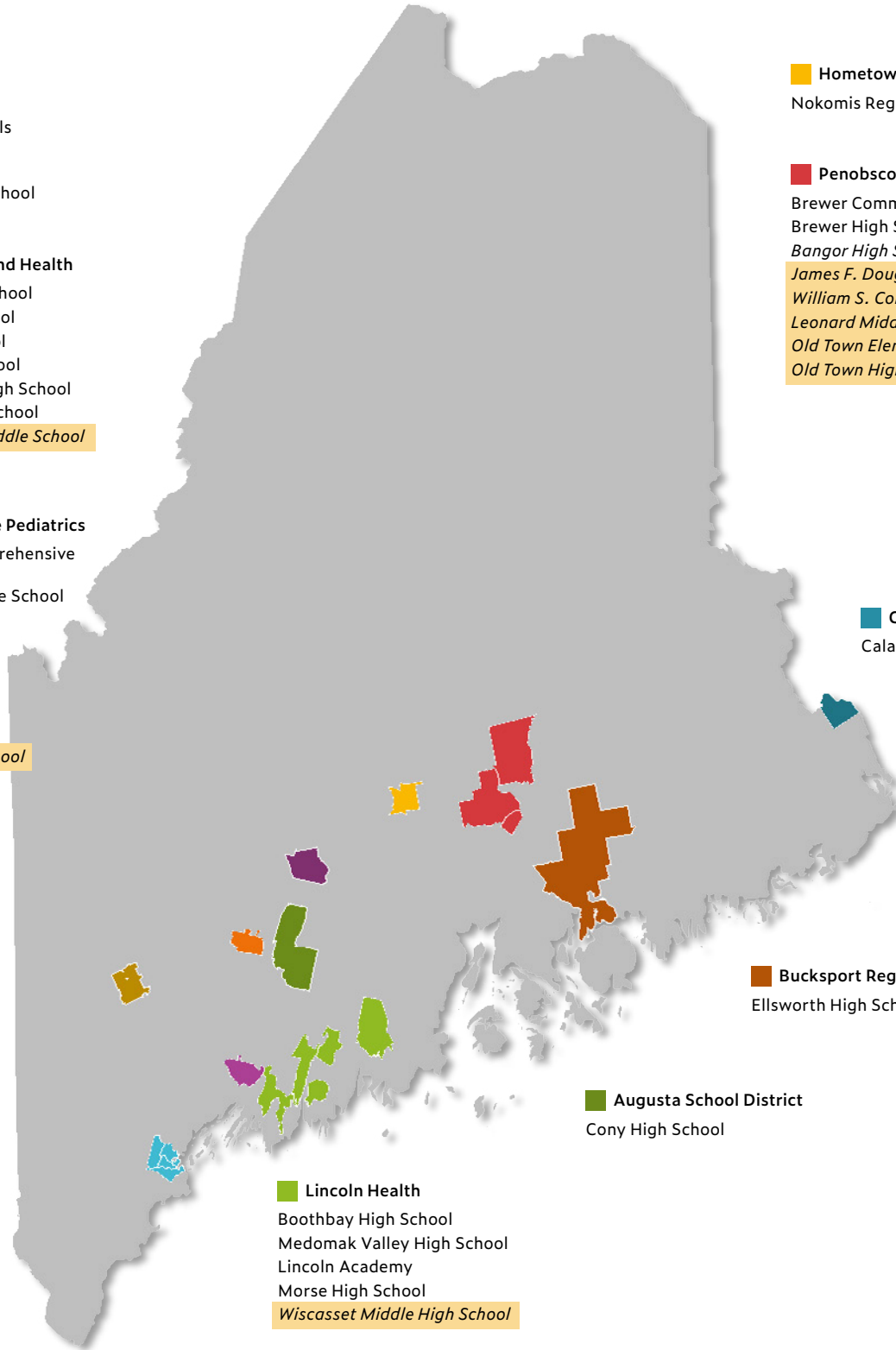
Ellsworth High School

**Augusta School District**

Cony High School

**Lincoln Health**

Boothbay High School  
Medomak Valley High School  
Lincoln Academy  
Morse High School  
*Wiscasset Middle High School*



Note: The High Schools and Middle Schools in yellow engage with the statewide School Based Health Center Network, but their programs do not receive funding from the state. These SBHCs operate with support from direct federal funding or support from their sponsoring site.

Non-state funded schools shown in gray italics

\*Indicates school provides mental health services only with medical services referred to Old Town Elementary School

and academic success by providing integrated medical, behavioral health and prevention services aimed at improving health equity. Services are student focused and offered to all eligible students regardless of insurance status or ability to pay.

The expansion in programs and services has led to increases in enrollment and services for students. In the 2024/25 school year, the number of students enrolled in a School Based Health Center receiving funding from the state increased by 29% and the number of visits to SBHCs by students increased by about one-third. These increases were driven by a combination of increased use of dental, behavioral and medical services and were on top of the significant increases in participation in 2023/2024 school year.

Concerned about being able to secure on-going funding, Maine CDC included the additional funding for School Based Health Centers in the application for the recently awarded Rural Transformation Health Program (RHTP). The RHTP will support the state to maintain expanded programming that was originally supported through federal ARPA funds as well as allow for expanded programming in future school years.



## Supporting the Expansion of Community Schools

The community school strategy is a holistic approach to school improvement to support stronger conditions for student learning and healthy development. The goal of community schools is to meet the needs of students and families by leveraging local and state resources and creating partnerships with community-based organizations to coordinate and integrate academic, developmental, family, health, and other comprehensive services. With federal funding, DOE's Office of School and Student Supports (OSSS) was able to bring on a dedicated staff person in 2023 and 2024 to provide direct support to these three grantees as well as to staff at other schools interested in implementing key components of community schools.

In 2023, OSSS provided grant funding and technical assistance to three SAUs to support them to become community schools: Old Town Elementary, Cape Cod Hill School in New Sharon, and Gerald E. Talbot Community School in Portland.

In early 2024, the team at the OSSS reopened grant opportunities and technical assistance to a new round of SAU awardees that resulted in funding three additional community school sites: Deer Isle-Stonington High School, Shead High School in Eastport and South Portland Middle School. For the 2025-26 school year there are six SAUs in Maine who are receiving some funding as part of the grant process from the DOE to support implementation of their community school strategies. These six SAUs are implementing programming to connect students and families to comprehensive services within the school and community. These services include increased physical and mental health support, after school and summer academic and enrichment programming, increased support to address food insecurity, and expanded family engagement opportunities. Each school has employed staff to serve as Community School Coordinators who are responsible for making connections with the school and families to community-based organizations and linking families to needed services

and resources. Each school is also working to implement more rigorous, community-connected instruction as part of their curriculum to engage students in meaningful, inquiry-based learning.

In addition, the Community School Consultant has promoted awareness of the community school strategy in Maine by presenting informational and professional development sessions at Maine educator conferences. The Community School consultant provides ongoing support and technical assistance to the six community school sites through coaching and technical assistance and is facilitating monthly Community of Practice meetings with the coordinators.

The team at DOE recently released another Request for Applications of Community Schools Grants to support a new round of community school grantees.

### **Investments to Increase School-Based Mental Health Staff and Services**

In the spring of 2023, Maine DOE was awarded \$9 million, funded through the Bipartisan Safer Communities Act, to increase school-based mental health staff and services in Maine over the next five years. With this funding, the DOE has established the Expanding Access in School Environments (EASE) Maine which is providing grants to nine high-need SAUs to support efforts to recruit and retain mental health providers and expand services to students.

DOE awarded grants to Eastport Public Schools, Jefferson Public Schools, Lewiston Public Schools, RSU 12, RSU 24, RSU 54, RSU 73, RSU 79, and RSU 85. These SAUs were identified as high need because they had low student to mental health provider ratios relative to the rest of the state and nation. Through the EASE Maine grants, the Maine DOE has partnered with these SAUs to develop and implement whole student-focused strategies to meet the unique needs of each community, increase student access to much-needed mental health services, and recruit, retain, and re-specialize staff to support the mental health and wellbeing of students, staff, and families. The funding has enabled SAUs to collaborate with one another and with community

organizations, state agencies, and other partners to confront growing mental health needs following the pandemic by increasing the number of highly qualified mental health services providers in schools. Eight out of nine of these SAUs have used the funding to hire at least one mental health provider to serve students in their schools.

### **Improving School Environments for All Students Through Restorative Practices**

The Maine School Safety Center's (MSSC) has implemented free training and on-going coaching to schools interested in improving their environments for all children through restorative practices. *Creating a Culture of Care in Schools Using Restorative Practices* aims to provide schools with the tools needed to help create an environment of safety, belonging, and accountability for students, staff, and community members that increases learning while reducing undesirable behavior and exclusionary discipline. Since starting the project in early 2024, the MSSC provided trainings to more than 40 schools, including elementary, middle and high schools. The nearly 2,500 teachers and staff who have been trained are estimated to have benefited more than 14,000 students in the state.

The skills staff learn in this training help them to:

- Build trust and better relationships with colleagues, students, and families
- Improve communication
- Identify and apply consistent responses to typical student behavior
- Handle minor behavior in the classroom

Create a team that will respond to more serious behavior using Restorative Principles and develop re-entry plans for students who have been out of school for an extensive period.

Each of the participating schools established an implementation team of administrators, teachers and staff who are responsible for training other staff and teachers in the school and supporting the implementation of practices and changes to school policies with the goal

of improving student behavior, decreasing the use of exclusionary discipline, and improving school climate for all students.

The team at DOE includes eight consultants who are restorative practice professionals and serve as coaches for this project. These coaches live throughout the state to ensure that coaches can visit schools in person and have a better understanding of local needs and culture. All trainings are completed on site at the school and via asynchronous training modules. The planning team at DOE felt strongly that staff should not be required to travel in order to participate in this program. Following the in-depth training, the implementation teams meet regularly with coaches to receive support in reaching their goals as they implement their learnings and to ensure they can put their learnings into practice.

### **Expanding Opportunities for Youth in Meaningful Paid Work Experience and Career Exploration**

The Governor's Maine Jobs and Recovery Plan (MJRP) included \$25 million in funding for building out career exploration programming for Maine youth. Since kicking off in the 2022/2023 school year, the MJRP Career Exploration Program has served more than 8,000 students. The purpose of the Career Exploration Program is to support young people to gain a better understanding of career opportunities, build foundational skills and make connections to employers through work-based learning.

### **Maine Career Exploration Badge through Jobs for Maine Graduates**

With MJRP funding, Jobs for Maine Graduates (JMG), a statewide non-profit working in 93 Maine high schools, implemented the Maine Career Exploration Badge Program for high school juniors and seniors. The program connects students to a 40-hour paid work experience to receive hands on employer engagement experiences. This experience is coupled with on-line modules and direct support from JMG specialists to help students to learn about career opportunities, set goals, document and reflect upon their employment experiences, and develop plans for their futures.

### **Extended Learning Opportunities Expansion in Schools**

With MJRP funding, Maine DOE awarded grants to 23 high schools/ Career and Technical Education schools (CTEs) and three community-based organizations in 13 counties to implement or expand Extended Learning Opportunities (ELO) programming for youth. The DOE released a second round of grant funding with \$1.5 million in state general funding in the fall of 2024 to support the expansion of ELO programming to 10 high schools and two community-based organizations.

ELOs are hands-on, credit-bearing experiences outside of the traditional classroom with an emphasis on community-based career exploration. These grants are focused specifically on connecting juniors and seniors to meaningful paid work experiences through ELO programming. Other components of these ELO programs also include the development of work skills and exposure to careers and career opportunities through job shadowing, career fairs, informational interviews, mentorships and other similar programming.

Since these grants were awarded, there have been 5,322 ELO student participants, 3,122.25 credits awarded to students, and 2,895 new partnerships created between schools and businesses and community organizations.

### **Career Exploration Grants to Community Based Organizations**

The Children's Cabinet awarded grants to five community-based organizations to provide career exploration programming to historically disadvantaged youth aged 16 to 24 years old, including youth with disabilities, connected to the juvenile justice system, experiencing homelessness, transitioning in or out of the foster care system, with low-income, of color and from indigent communities. All of these programs are recruiting youth in their communities to participate in job readiness programming, connecting youth to meaningful paid work experiences and ensuring youth have services and supports needed to overcome barriers to employment.

## ELO Student Finds the Belfast Teen Center

Through her Extended Learning Opportunity program, Bunny Perez, a student at the Belfast Area High School, pitched the idea of starting a teen center in downtown Belfast. The idea was originally generated by a group of students experiencing homelessness who shared the need for a space within walking distance of the school for students to gather, do homework and grab a hot snack or a meal.

As part of her ELO, Bunny led this group of students to take the steps needed to build community support for this idea. To build traction for the center, she conducted outreach to key community leaders about the potential of a center for local teens. She developed marketing materials and speaking points used by all of the students. In the spring of 2025, a group of students, school staff, and local residents began meeting biweekly to form the Teen Center Board, which included one community member who agreed to provide the physical space for the center and another who coordinated volunteers to staff and provide hot meals to students at the center.

In the fall of 2025, the Belfast Teen Center formally opened on Wednesdays from 2-6 p.m., with the goal to expand hours in future years.



Credit: The Belfast Teen Center was created by teenagers for teenagers as a place to hang out and connect through community support.

## Expanding Participation of Young People in Pre-Apprenticeship and Apprenticeship Programs

The Maine Jobs and Recovery Plan (MJRP) also included funding for the Department of Labor to expand pre-apprenticeship and apprenticeship programming. In 2025, 568 youth between the ages of 16 and 24 participated in either a certified pre-apprenticeship (338) or apprenticeship program (230) through the support of MJRP funding. High-quality pre-apprenticeship programs provide foundational job and soft-skill training necessary to bridge trainees to successful employment as apprentices. Pre-apprenticeship programs are delivered by a variety of partners, including high schools, adult education providers, community colleges, labor organizations or community-based organizations.

In Maine, there are now over 68 certified pre-apprenticeship programs across the state in sectors ranging from healthcare and trades to manufacturing and finance. Apprenticeship is a workforce training model that combines on-the-job learning and formal classroom or online instruction to help a worker or young person gain the knowledge, skills and competencies needed for career success.

Many pre-apprenticeship programs specifically target youth between the ages of 16 to 24 at Career and Technical Education (CTE) schools, high schools, and out-of-school youth in need of a connection to gainful employment leading to financial stability and professional success. For example, Somerset Career and Technical Center in Skowhegan partnered with SAPPI to launch a pre-apprenticeship program for Electrical and Instrumentation (E&I) Technicians. The program provided CTE students with job safety, financial literacy, career exploration, job shadows, and interview preparation. Upon completion, two students entered SAPPI's apprenticeship pipeline and are now working toward journey worker E&I Technician roles, earning at least \$46 per hour after completing the two-year apprenticeship.

MDOL is also focused on increasing access to pre-apprenticeship and apprenticeship opportunities for people with disabilities through a dedicated Division of Vocational Rehabilitation Career Pathway Navigator. With this dedicated capacity, 14 young adults with disabilities participated in pre-apprenticeships in high-demand fields, including construction, solar panel/electrical work, and carpentry and three are now working full time as concrete laborer, sheet metal worker and welding apprentice, earning high wages.



Governor Janet Mills visited the Sanford Regional Technical Center in Sanford on September 11, 2025, to see firsthand how her Administration's record investments in career and technical education are helping Maine students enter the trades. Through her Maine Jobs & Recovery Plan, Governor Mills has invested \$20 million to expand career and technical education (CTE) across the State, including \$4.5 million in awards to 23 CTE programs to purchase and upgrade equipment to enhance student learning experiences and career preparation for high-skilled, in-demand industries. Sanford Regional Technical Center, above, received a grant of nearly \$117,000 that it used to purchase equipment for its Engineering Architectural Design and Machine Tool Programs. Credit: Governor's Office

MDOL looks forward to partnering with the Maine Department of Education to build on this work and expand clear career pathways for Maine students and adult learners through pre-apprenticeship and apprenticeship as part of the Maine Career Pathways pilot launching in early 2026.

### **WIOA Connects Youth to Paid Work Experience and Education**

Workforce partners funded by the Workforce Innovation and Opportunity Act (WIOA) Youth programs served 535 young adults aged 16-24 statewide in program year 2025, which included 476 low-income youth, 373 individuals with disabilities, and 45 unhoused youth. Of these 535 youth participants, 287 participated in paid work experiences, 74 partici-

pated in pre-apprenticeship or apprenticeship, and 387 entered in employment or postsecondary education one year after exiting the program.

### **Vocational Rehab Supports Students with Disability to Explore Careers and Connect to Work**

Through its Vocational Rehabilitation “VR” programs in the Division of Vocational Rehabilitation and the Division for the Blind and Visually Impaired, the Bureau of Rehabilitation serves approximately 3,000 students and youth each year. Beginning with Pre-Employment Transition Services at age 14 and followed by an Individualized Plan for Employment, VR services introduce young people to the world of work – allowing them to explore careers, learn about their strengths and skills, explore post-secondary education and training and engage in work-based learning – including paid employment. Support services and assistive technology is provided as needed. VR works closely with youth and their families, schools and employers to offer services that lead to meaningful competitive integrated employment in their career field of choice.

### **Pathways to Partnerships (P2P) Supports Professionals To Expand Career Pathways**

This five-year grant — awarded in 2023 — is a collaboration between the Division of Vocational Rehabilitation, Maine Department of Education’s Office of Special Services and Inclusive Education, and Alpha-One (Maine’s Center for Independent Living). The

### **WIOA Youth Success Story**

RJ, an Indigenous high school senior with a disability, lacked transportation, employment, and funds for postsecondary education. Interested in outdoor careers, he enrolled in WIOA Youth Services through Eastern Maine Development Corp. (EMDC) and completed the 10-unit Young Mainers Workforce Program, gaining confidence and job-readiness skills.

After graduating in June 2025, RJ began a paid work experience at SweetLand Farms, where he learned dairy and field work and excelled. Transportation barriers limited his job options, so EMDC supported him through an e-bike pilot with the Maine Departments of Transportation and Labor and the Bicycle Coalition of Maine. In October, RJ received an electric bike, safety gear, accessories, and training.

With reliable transportation, RJ secured full-time employment at Ray Farm within a month. The job includes housing, further supporting his transition to independence. He continues to receive EMDC support and is co-enrolled in the Dairy Skills Training Opportunity, a workforce program led by the Maine Dairy Industry Association and EMDC to train and retain dairy workers statewide.



grant’s advisory group includes representation from youth, DHHS - OCFS, DHHS-OADS, Maine Parent Federation, Disability Rights Maine, Division for the Blind and Visually Impaired, Center for Workforce Research and Information, State Workforce Development Board, MaineHealth – Benefits Counseling Team, MADSEC, and more. Additionally, the Children’s Cabinet provides feedback, guidance and connections to support the grant’s work. P2P aims to increase the number of young people with disabilities who enter post-secondary education and competitive integrated employment by delivering innovative model services for children and youth ages 10-24.

P2P is providing training and professional development to educators, families, case managers, Vocational Rehabilitation Counselors and other service providers. After launching with pilot schools RSU 71 (Belfast area) and RSU 29 (Houlton area), the grant has now expanded to Sanford, Jackman, and the Katahdin area schools – with additional schools slated to come on

board in the coming weeks. Services provided under the grant include Career Exploration, Benefits Counseling, Intro to/Pre-Employment Transition Services, Financial Literacy and Self-Advocacy.

### **Strengthening Families through Family First Prevention Services**

In 2021, Maine began implementation of the Federal Family First Prevention Services Act and the corresponding Maine Family First Prevention Services State Plan (updated in 2022). This State Plan outlines the strategies and evidence-based services that are funded through state and federal Title IV-E dollars with the goal of preventing removal and keeping children safely in their home. Maine has implemented two programs under Family First, (Parents as Teachers and Homebuilders) and more recently has tested the Intercept model, to meet the overarching goal of strengthening families to prevent children from being removed from the home due to child abuse and neglect.

### **Vocational Rehab Client Lands Welding Job**

Kamron King, shown here with his father, is a Baxter School for the Deaf graduate and a Vocational Rehabilitation client. Kamron was having trouble obtaining work in the trades as employers were concerned about his ability to hear on worksites and their capacity to train him. Initially interested in electrical work, he enrolled in the Department of Labor’s Union Construction Academy Pre-Apprenticeship program, where he also learned about and grew interested in welding careers. Upon completion, he was hired on the spot as a Welder Apprentice at Portsmouth Naval Shipyard earning \$24 per hour and joined the International Brotherhood of Boilermakers, Iron Ship Builders, Blacksmiths, Forgers and Helpers (IBB) Local 920.





### Prevention Services:

- Through Family First, Maine expanded the Maine Families Home Visiting (MFHV) program (which delivers the Parents as Teachers (PAT) curriculum) to serve more child welfare involved families with children up to the age of 5. PAT is an evidence-based home visiting model that promotes early development, learning, and health of children through parental engagement and support. (The standard program accepts referrals for children prenatal to 3.5 months old and serves them to the age of 3.) Expansion has allowed child welfare involved children aged 4 months to 4.5 years to be served until the age of 5. Since the early spring of 2022, there have been 169 children served in this expansion program under Family First.
- OCFS has also implemented the Homebuilders Intensive Family Preservation and Reunification Program (Homebuilders) statewide through a

competitive bid contract with Bethany Christian Services of Northern New England (BCSNNE). Homebuilders is an evidenced based intensive, in-home counseling, skill building and support service for families who have children (0-18 years old) at imminent risk of out-of-home placement or who cannot be reunified without intensive in-home services. Homebuilders is being implemented statewide, although teams are not yet fully staffed due to workforce challenges. To date, the Homebuilders program has served 270 families impacting 533 children and has worked to not only prevent the need for foster care but also served several families through the safe reunification of children with their families after a foster care placement.

- The Youth Villages Intercept model is an intensive in-home parenting skills program that works with families with children aged 0-18. Family Intervention Specialists work with both the child and the

caregivers to address issues impacting the stability of the family. Implementation of this service under Family First began in August 2024 in three counties (York, Cumberland, and Oxford) and to date has served 89 families impacting 252 children. After successful implementation of this program, Maine has sought and is currently awaiting federal approval to claim Title IV-E federal prevention funding to match state funds used to implement Intercept. OCFS wishes to expand this service to statewide if additional state funds become available.

Preliminary evaluation findings have shown that these interventions are working to prevent the need for removal from the home and placement in foster care. Maine is just under 4 years of implementation and there remains opportunity to strengthen the program including examining and exploring other programs to strengthen and support Maine’s continuum of Family First Prevention Services to keep children safely at home and prevent entry into foster care.

OCFS and Maine Children’s Trust continue to collaborate on a webinar series highlighting strategies that everyone can use to promote protective factors for families and uplifting state and local efforts. The Child & Family Well-Being Webinar Series is in its fourth year of bringing people together for conversations about supporting families and regularly draws an audience of more than 100 providers, parents, and state agency partners. In 2025, topics included parent leadership, balancing the role of family supporter and mandated reporter, economic and concrete supports, the fundamentals of collective impact, and building relationships with families.

### **The Child Safety and Family Well-Being Plan builds momentum**

DHHS continues to partner with the Maine Child Welfare Action Network (MCWAN) on the [Child Safety and Family Well-Being Plan](#) aimed at promoting the safety and

well-being of children in Maine by supporting families. In February 2025, a comprehensive five-year plan was released. In the first year of implementation, state agencies, community partners, and individuals have advanced efforts to strengthen Maine’s child safety and family well-being system. Key efforts not captured in other areas of this report include:

- **Be There for ME** is a movement to support parents and caregivers and provide a place to start to find support. The campaign and website were co-designed with parents and caregivers and launched in July 2024. In 2025, DHHS and MCWAN made intentional efforts to raise awareness of the campaign and website among child welfare staff, the medical community, early childhood educators, schools, and community organizations. State funding and the PDG supported a statewide multi-channel marketing campaign. MCWAN also launched the “Be There for ME Parent Reps,” a group of eight trained parents to represent the campaign at events in their community.





Everyone needs help sometimes and **support is out there.**



Head to [BeThereForME.org](https://www.BeThereForME.org) for support with what feels most stressful

MCWAN, in partnership with DHHS, continues to strengthen and support community collaboration. In October 2025, they hosted a series of regional convenings in Millinocket, Farmington, Saco, and Rockland to bring together state agency partners with local convening entities. The objectives of these convenings were to strengthen community-level partnerships and identify opportunities to collaborate and adapt resources for families. [A summary is available here.](#)

- MCWAN and OCFS continue to partner on an initiative to explore mandated reporting and community support for families. In September 2025, mandated reporter training and internal OCFS policy were updated to reflect statutory changes distinguishing poverty from child neglect. A more comprehensive update to the training and a guide to help mandated reporters better understand their role and consider opportunities to support a family are under development.

## CONCLUSION

The Children’s Cabinet will continue to focus on ways to strengthen programs and policies for children and youth by continuing and increasing collaboration and coordination across agencies and the engagement of parents, youth, and key stakeholders. The Children’s Cabinet plans and initiatives in 2026 will build off the learnings and the successes of their work in previous years.



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