



TIDES FAMILY SERVICES

WE NEVER GIVE UP ON A KID... NEVER!

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March 6, 2025

To: The Honorable Chairman Evan P. Shanley and Honorable Members of the House State and Government Elections Committee

From: Beth Bixby, MSW, LICSW, CEO Tides Family Services

RE: HB 5452 Support

Tides Family Services strongly supports **H 5452 and its goal of strengthening the continuum of behavioral health services for children and families in Rhode Island**. As a provider of critical community-based services in child welfare, juvenile justice, and behavioral health for over 40 years, we recognize the urgent need for a **coordinated, accountable system** that ensures children receive the right care in the right setting.

The Crisis in Children's Behavioral Health

Children in Rhode Island face prolonged emergency department boarding due to a lack of accessible behavioral health services. Many endure extended hospital stays only to face months- or even years-long waitlists for aftercare. With the implementation of the CCBHC model in RI, CCBHCs are being tasked with delivering children's behavioral health programming outside of DCYF's oversight. The result is a fragmented system with no clear oversight, leaving children and families struggling to navigate a complex, uncoordinated network of care.

Why Children's Behavioral Health Must Be Addressed Separately from Adults

Children are not simply "little adults." Their **developmental stages, cognitive abilities, and emotional needs** require a specialized approach to behavioral health. Unlike the adult system, which often intervenes only after symptoms become severe, the children's system must focus on **early intervention and prevention**—before crises occur.

A child-centered behavioral health system requires:

- **Developmentally appropriate, trauma-informed care** tailored to children's unique needs.
- **Stronger coordination across families, schools, and communities** to provide holistic support.
- **Services that "screen in" rather than "screen out,"** ensuring that children receive care before their challenges escalate into crises.



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The Need for Clear DCYF Oversight

While DCYF already oversees children's behavioral health, **there is no clear statutory framework defining its role**, leading to:

- **Service gaps for children with complex needs** due to inconsistent communication between state agencies, managed care organizations, and providers.
- **A lack of accountability and coordination** results in an overreliance on institutional care rather than community-based solutions.
- **Statewide confusion over funding and service administration**, with CCBHCs expanding programming while DCYF services are labeled duplicative—despite serving distinct populations.

DCYF Has Already Taken Steps to Strengthen Community-Based Care

DCYF recently completed a comprehensive RFP process in August 2024, awarding new home- and community-based services contracts to expand the service array and provider capacity. Since these contracts were awarded, referrals to these programs have steadily increased, demonstrating both the demand for services and DCYF's ability to oversee a coordinated children's behavioral health system.

Shifting oversight of children's behavioral health away from DCYF would negate this progress, disrupt services, and create unnecessary inefficiencies—leaving high-need children without access to the full continuum of care.

Why H 5452 Must Be Paired with H 5718

H 5452 ensures DCYF has the authority to oversee a coordinated, accountable system, but authority alone is not enough—DCYF must also have the tools and framework to implement these reforms effectively. That's why H 5718 is equally critical. H 5718 establishes a system of care approach, ensuring that services are:

- Trauma-informed and community-based rather than institutionally driven.
- Accessible and coordinated across agencies and providers.
- Designed to meet children's needs at the right level of care, reducing reliance on crisis-driven interventions.

Together, H 5452 and H 5718 provide both the leadership structure and the operational framework to build a sustainable, effective children's behavioral health system in Rhode Island.



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We urge the committee to support why H 5452 must be paired with H 5718. Thank you for your time and consideration. I welcome any questions.

Respectfully submitted,

Beth A. Bixby, LICSW

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CEO, Tides Family Services