

Department of Legislative Services
 Maryland General Assembly
 2020 Session

FISCAL AND POLICY NOTE
Third Reader - Revised

Senate Bill 918
 Finance

(Senator Carter)

Health and Government Operations

Human Services - Trauma-Informed Care - Commission and Training

This bill establishes the Commission on Trauma-Informed Care as an independent commission in the Department of Human Services to coordinate a statewide initiative to prioritize the trauma-responsive and trauma-informed delivery of State services that affect children, youth, families, and older adults. The Governor’s Office of Crime Prevention, Youth, and Victim Services must provide staff to the commission. The bill requires each commission member to participate in specified training, and each specified agency head to designate two staff members to carry out specified responsibilities. Members of the commission may not receive compensation but are eligible for reimbursement under standard State travel regulations. **The bill takes effect July 1, 2020.**

Fiscal Summary

State Effect: General fund expenditures increase by \$61,000 in FY 2021 to staff the commission. Other State agencies can likely carry out the bill’s requirements with existing resources. Any expense reimbursements are anticipated to be minimal and absorbable within existing budgeted resources. No effect on revenues.

(in dollars)	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025
Revenues	\$0	\$0	\$0	\$0	\$0
GF Expenditure	61,000	72,200	73,900	76,400	79,100
Net Effect	(\$61,000)	(\$72,200)	(\$73,900)	(\$76,400)	(\$79,100)

Note:() = decrease; GF = general funds; FF = federal funds; SF = special funds; - = indeterminate increase; (-) = indeterminate decrease

Local Effect: None.

Small Business Effect: None.

Analysis

Bill Summary: The commission must:

- assist in the identification of any State program or service that affects children, youth, families, and older adults;
- assist in the development of a statewide strategy toward an organizational culture shift into a trauma-responsive State government;
- establish metrics to evaluate and assess the progress of the statewide trauma-informed care initiative;
- coordinate and develop any formal or informal trauma-informed care training;
- disseminate information among agencies regarding best practices for preventing and mitigating the effect of trauma on children, youth, families, and older adults;
- advise and assist the Governor in providing oversight and accountability in implementing the bill's requirements;
- submit a report using the commission's established evaluation and assessment metrics; and
- make recommendations regarding improvements to existing laws relating to children, youth, families, and older adults in the State.

By June 30 of each year, the commission must report its findings and recommendations to the Governor and the General Assembly.

The bill defines "formal training" as a didactic course or curriculum in trauma-informed care that is developed by the U.S. Department of Health and Human Services or the Maryland Department of Health (MDH) and provided by MDH or its designee. Each member of the commission must participate in at least one formal training each year. In addition, each State agency represented on the commission must designate two staff members to participate in at least one formal training each year and carry out other specified responsibilities related to enhancing trauma-responsiveness in the State.

MDH must provide technical advisory support to designated agency staff in carrying out their duties. By March 31 of each year, each agency director must submit a progress report to the commission detailing the agency's progress and compliance in carrying out the bill's requirements.

Current Law: State law does not incorporate trauma-informed delivery of services for children, youth, families, and older adults in the State.

Background: Trauma-informed care (TIC) emerged as a strategy for addressing symptoms of traumatic stress in the early 2000s. In 2005, the Substance Abuse and Mental
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Health Services Administration within the U.S. Department of Health and Human Services provided funding for a National Center for Trauma-Informed Care to support efforts to eliminate the use of seclusion, restraints, and other coercive practices and to develop the knowledge base on TIC.

According to the center, TIC (1) realizes the widespread impact of trauma; (2) recognizes the signs of symptoms of trauma in clients and others; (3) responds by fully integrating knowledge about trauma into policies, procedures, and practices; and (4) seeks to actively resist re-traumatization. Ultimately, it seeks to change the paradigm from asking “What’s wrong with you?” to one that asks “What happened to you?”

TIC intervention programs generally recognize (1) the survivor’s need to be respected, informed, connected, and hopeful for their own recovery; (2) the interrelation between trauma and symptoms of trauma such as substance abuse, eating disorders, depression, and anxiety; and (3) the need to work in a collaborative way with survivors, family and friends, and other human service agencies.

State Fiscal Effect: The Governor’s Office of Crime Prevention, Youth, and Victim Services cannot provide ongoing support to the commission with existing staff. Therefore, general fund expenditures increase by \$60,997 in fiscal 2021, which accounts for a 90-day start-up delay from the bill’s July 1, 2020 effective date. This estimate reflects the cost of hiring a program manager to provide staff support to the commission and coordinate the work of member agencies. It includes a salary, fringe benefits, one-time start-up costs, and ongoing operating expenses.

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Salary and Fringe Benefits	\$55,631
Operating Expenses	<u>5,366</u>
Total FY 2021 State Expenditures	\$60,997

Future year expenditures reflect a full salary with annual increases and employee turnover and ongoing operating expenses.

This estimate assumes MDH can provide the additional support to designated agency staff with existing resources. It further assumes that MDH does not develop the required formal training but that existing formal training is used and minimal effort is necessary to train commission members and designated staff. Otherwise, general fund expenditures also increase for MDH.

Additional Information

Prior Introductions: None.

Designated Cross File: None.

Information Source(s): Governor's Office of Crime Prevention, Youth, and Victim Services; Maryland State Department of Education; Department of Budget and Management; Maryland Department of Disabilities; Maryland Department of Health; Department of Juvenile Services; Department of State Police; Department of Legislative Services

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Analysis by: Michael C. Rubenstein

Direct Inquiries to:
(410) 946-5510
(301) 970-5510