

A LIFEBRIDGE HEALTH GROUP

# CENTER FOR HOPE

Advancing hope, healing and resilience



Date: March 13, 2024

To: Chair Pena Melnyk, Vice Chair Cullison, Health and Government Operations Committee Members

Reference: House Bill 1100- Health - Child Advocacy Centers - Reporting Requirements and Investigations

Position: **UNFAVORABLE**

Dear Chair Pena Melnyk and Committee Members,

On behalf of LifeBridge Health's Center for Hope we thank you for this opportunity to provide information in opposition to HB1100 and ask for an unfavorable report. Center for Hope is a comprehensive program that in 2023 provided trauma-informed crisis intervention and prevention services for over 7,700 survivors and caregivers impacted by child abuse, domestic violence, community violence, and elder justice. Over 4,300 of our population helped last year were children. At LifeBridge Health, we recognize the devastating impact of violence in our communities, and the growing number of victims of all ages. This is a public health issue. We help our communities by partnering with the people in them to break the cycle of violence.

**Child advocacy centers are nationally accredited.** Center for Hope (formerly Baltimore Child Abuse Center) is the oldest child advocacy center (CAC) in Maryland and third oldest in the nation. Our services include Maryland's first nationally accredited child advocacy center that provides an evidence-based multidisciplinary team response to abuse and trafficking. Since 1987, our team has helped over 40,000 children and families. We employ over one hundred employees, many of whom are licensed social workers and other health care providers. With six fulltime mental health therapists on staff, including a manager of our mental health and clinical director, we have one of the largest mental health teams of any child advocacy center in the state.

For over 35 years we have followed the standards and procedures set forth by the National Children's Alliance. These ten evidence-based standards, including one for behavioral health services, have been established with voluminous research and the support of the US Department of Justice. They set the standard for over 900 centers across the United States. Locally in Maryland, the state chapter Maryland Children's Alliance, helps all of Maryland's CACs meet and exceed these national standards. Every five years leaders review and update national accreditation standards from the National Children's Alliance, then incorporated in Md. Code- Criminal Procedure §11-928. All of Maryland's accredited centers are required to meet these standards. Maryland CACs receives training and technical assistance in meeting these standards via NCA's state chapter, the Maryland Children's Alliance.

**HB1100 is a solution in search of a problem.** The bill's requirements are unwarranted and hinder CAC's ability to focus on response and support for those most vulnerable. The National Children's Alliance currently accredits Maryland's Child Advocacy Centers (CACs), with standards endorsed by the USDOJ and the Maryland Children's Alliance. These standards, which include mental health, are evidence-based. Moreover, behavioral health professionals at CACs are required to adhere to their respective licensing boards' guidelines and requirements. The bill aims to grant authority to the Maryland Department of Health, which already possesses the power to investigate health practice complaints. Existing oversight for licensed mental health providers is provided by

licensing boards and the Health General section of Maryland law. Any provider that demonstrating a breach of standards can be investigated by the licensing board.

HB 1100 proposes redundant procedures for licensed mental health providers. Systems and oversight currently involved with the practice of CAC's include the Office of the Inspector General, the Behavioral Health Administration, the Maryland Children's Alliance, Medicaid, other commercial payors, and professional licensing boards. Licensed mental health providers are already accountable through professional licensing boards and corresponding professional ethics. For instance, the MD Board of Social Work Examiners complaint process investigates fraud, unethical professional behaviors, negligence, and incompetence. While HB1100 intends to "ensure that standards are in place to protect individuals receiving and providing behavioral health care services at CACs," this is also redundant for licensed providers. Providers are already regulated through each State Licensing Board, the Code of Maryland Regulations (COMAR), and the Health Occupations Article, which covers various disciplines, including social workers.

**HB1100 employs a definition of "Child Advocacy Center" that encompasses a broad range of entities involved in the investigation, diagnosis, and treatment of abused or neglected children. This definition extends beyond the designated Child Advocacy Centers in Maryland, to include other organizations that meet the criteria of investigating, diagnosing, and treating abused and neglected children.** These organizations include pediatric emergency departments and hospital SAFE programs across the state, which, while not named as "Child Advocacy Centers," perform similar functions. *The bill's inclusion of "other children and family service providers" (page 3, lines 15-16) is worryingly vague. This term could potentially cover hundreds of organizations, such as Court Appointed Special Advocates (CASA), Legal Aid offices, the Department of Juvenile Services, county Departments of Child Protective Services, and even some domestic violence and rape crisis programs. All these organizations play crucial roles in investigating, diagnosing, and treating children affected by abuse and neglect.*

Maryland's Child Advocacy Centers, operated by various entities including local police departments, county governments, local departments of social services, sheriff offices, medical programs, and non-profit organizations, adhere to the same National Children's Alliance standards but implement different approaches. Many of these centers lack the resources to run their own in-house behavioral health programs, leading them to engage with external providers for some or all their behavioral health service needs.

The bill does not clarify whether these external partners, or their actions, fall under this legislation. It mandates that organizations contracting with, referring to, or engaging with external behavioral health providers must be responsible for the care plans of these external entities (page 3, lines 26-27). Despite its broad scope, HB1100 seems to focus solely on standardized Child Advocacy Centers, overlooking other providers such as non-profit organizations and agencies that provide behavioral health services to hundreds of children outside of regulated healthcare facilities. These providers may not adhere to the structure of the National Children's Alliance standards, raising concerns about how organizations dealing with domestic violence and rape crises provide behavioral health care.

The focal point of this unnecessary legislation can be found on page 3, lines 24-27 to make sure there is a process regarding the continuity of care of children in mental health treatment at a child advocacy center. Despite allegations raised by the bill's proponents during last year's hearing on this bill, all children at the Montgomery

Tree House CAC still had continuity of care after their previous care providers (who are the bill's proponents) were terminated from their employment as was testified to during last year's hearing. In fact, the Montgomery County Office of the Inspector General wrote in a 2020 report that "approximately 27 clients were affected by the terminations. It was reported that each family was called directly and told their therapist no longer worked for Tree House per existing protocols. Some clients were reassigned internally right way. Others were offered a choice to be referred to another provider free of charge or continue with Tree House and potentially have to wait for a therapist to become available." See attached, *OIG Report Page 14-15* [MC\\_OIG\\_Report\\_of\\_Investigation\\_Tree\\_House\\_CAC\\_Report\\_Number\\_21-007 \(montgomerycountymd.gov\)](https://montgomerycountymd.gov/Files/2021/07/21-007-01-001-002-003-004-005-006-007-008-009-010-011-012-013-014-015-016-017-018-019-020-021-022-023-024-025-026-027-028-029-030-031-032-033-034-035-036-037-038-039-040-041-042-043-044-045-046-047-048-049-050-051-052-053-054-055-056-057-058-059-060-061-062-063-064-065-066-067-068-069-070-071-072-073-074-075-076-077-078-079-080-081-082-083-084-085-086-087-088-089-090-091-092-093-094-095-096-097-098-099-100-101-102-103-104-105-106-107-108-109-110-111-112-113-114-115-116-117-118-119-120-121-122-123-124-125-126-127-128-129-130-131-132-133-134-135-136-137-138-139-140-141-142-143-144-145-146-147-148-149-150-151-152-153-154-155-156-157-158-159-160-161-162-163-164-165-166-167-168-169-170-171-172-173-174-175-176-177-178-179-180-181-182-183-184-185-186-187-188-189-190-191-192-193-194-195-196-197-198-199-200-201-202-203-204-205-206-207-208-209-210-211-212-213-214-215-216-217-218-219-220-221-222-223-224-225-226-227-228-229-230-231-232-233-234-235-236-237-238-239-240-241-242-243-244-245-246-247-248-249-250-251-252-253-254-255-256-257-258-259-260-261-262-263-264-265-266-267-268-269-270-271-272-273-274-275-276-277-278-279-280-281-282-283-284-285-286-287-288-289-290-291-292-293-294-295-296-297-298-299-300-301-302-303-304-305-306-307-308-309-310-311-312-313-314-315-316-317-318-319-320-321-322-323-324-325-326-327-328-329-330-331-332-333-334-335-336-337-338-339-340-341-342-343-344-345-346-347-348-349-350-351-352-353-354-355-356-357-358-359-360-361-362-363-364-365-366-367-368-369-370-371-372-373-374-375-376-377-378-379-380-381-382-383-384-385-386-387-388-389-390-391-392-393-394-395-396-397-398-399-400-401-402-403-404-405-406-407-408-409-410-411-412-413-414-415-416-417-418-419-420-421-422-423-424-425-426-427-428-429-430-431-432-433-434-435-436-437-438-439-440-441-442-443-444-445-446-447-448-449-450-451-452-453-454-455-456-457-458-459-460-461-462-463-464-465-466-467-468-469-470-471-472-473-474-475-476-477-478-479-480-481-482-483-484-485-486-487-488-489-490-491-492-493-494-495-496-497-498-499-500-501-502-503-504-505-506-507-508-509-510-511-512-513-514-515-516-517-518-519-520-521-522-523-524-525-526-527-528-529-530-531-532-533-534-535-536-537-538-539-540-541-542-543-544-545-546-547-548-549-550-551-552-553-554-555-556-557-558-559-560-561-562-563-564-565-566-567-568-569-570-571-572-573-574-575-576-577-578-579-580-581-582-583-584-585-586-587-588-589-590-591-592-593-594-595-596-597-598-599-600-601-602-603-604-605-606-607-608-609-610-611-612-613-614-615-616-617-618-619-620-621-622-623-624-625-626-627-628-629-630-631-632-633-634-635-636-637-638-639-640-641-642-643-644-645-646-647-648-649-650-651-652-653-654-655-656-657-658-659-660-661-662-663-664-665-666-667-668-669-670-671-672-673-674-675-676-677-678-679-680-681-682-683-684-685-686-687-688-689-690-691-692-693-694-695-696-697-698-699-700-701-702-703-704-705-706-707-708-709-710-711-712-713-714-715-716-717-718-719-720-721-722-723-724-725-726-727-728-729-730-731-732-733-734-735-736-737-738-739-740-741-742-743-744-745-746-747-748-749-750-751-752-753-754-755-756-757-758-759-760-761-762-763-764-765-766-767-768-769-770-771-772-773-774-775-776-777-778-779-780-781-782-783-784-785-786-787-788-789-790-791-792-793-794-795-796-797-798-799-800-801-802-803-804-805-806-807-808-809-810-811-812-813-814-815-816-817-818-819-820-821-822-823-824-825-826-827-828-829-830-831-832-833-834-835-836-837-838-839-840-841-842-843-844-845-846-847-848-849-850-851-852-853-854-855-856-857-858-859-860-861-862-863-864-865-866-867-868-869-870-871-872-873-874-875-876-877-878-879-880-881-882-883-884-885-886-887-888-889-890-891-892-893-894-895-896-897-898-899-900-901-902-903-904-905-906-907-908-909-910-911-912-913-914-915-916-917-918-919-920-921-922-923-924-925-926-927-928-929-930-931-932-933-934-935-936-937-938-939-940-941-942-943-944-945-946-947-948-949-950-951-952-953-954-955-956-957-958-959-960-961-962-963-964-965-966-967-968-969-970-971-972-973-974-975-976-977-978-979-980-981-982-983-984-985-986-987-988-989-990-991-992-993-994-995-996-997-998-999-1000)

**The current regulations lack a clear procedure for investigating complaints, establishing standards, or defining due process for hearings, fines, and appeals.** The proposed sections 24-2403 and 2404 (page 5, lines 1-4) suggest that any "person subject to a complaint... may be liable for a civil fine not exceeding \$5,000." This provision broadly grants the MDH the power to establish a process without public involvement. As it stands, the mere filing of a complaint could result in a fine, with the individual - rather than the agency overseeing behavioral health - being held accountable. To effectively manage and adjudicate such investigations and fines, greater clarity and transparency are essential.

This bill fails to fulfill its stated aim of aiding children in need. Maryland's Child Advocacy Centers (CACs), despite receiving less funding than other victim support programs, excel in providing quality care under challenging circumstances. HB1100 seems to be a response to a single, disputed incident, rather than addressing the broader needs of CACs. These centers, staffed by a diverse team of professionals and volunteers, adhere to a comprehensive set of best practices, and are governed by existing Maryland laws. Continuity of care is ensured through various support mechanisms, with ample remedies in place for rare disruptions. Instead of imposing specific restrictions based on an unresolved incident, the focus should be on bolstering support for Maryland's CACs. This includes promoting their work and ensuring sustainable funding to meet the growing demand for services for children affected by sexual and physical abuse.

For all these reasons, Center for Hope asks for an UNFAVORABLE report for HB1100.

Respectfully submitted,  
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## ADVANCING HOPE, HEALING, AND RESILIENCE

**LifeBridge Health’s Center for Hope works with those impacted by trauma, abuse and violence through comprehensive response, treatment, education and prevention.**

Center for Hope is LifeBridge Health’s comprehensive violence intervention and prevention organization that provides crisis responses and long term solutions for survivors, caregivers and communities. Our programs include:

- **Child Advocacy Center** for child abuse and human trafficking survivors, including 24/7 response
- **DOVE program at Northwest Hospital** for survivors of domestic violence
- **Hospital violence response teams at Sinai Hospital and Grace Medical Center** (domestic violence, community violence, elder abuse)
- **Six Safe Streets** sites in Baltimore City
- **PAAVE (Pathways to Advocacy Against Violence Everyday)**, a youth case management program for children and family homicide survivors

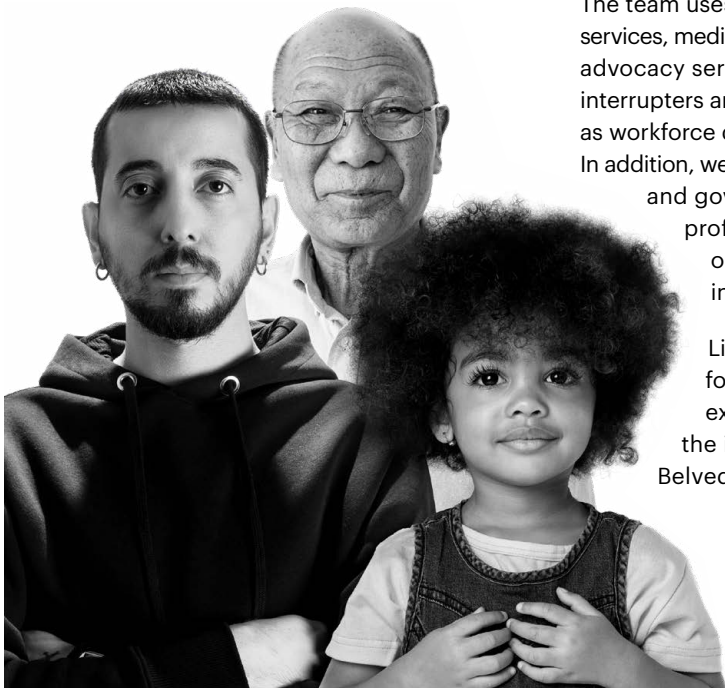
- **Mental health services** for survivors and caregivers of violence
- **Elder justice program** for vulnerable adults faced with violence
- **FIRE (Forensic Interview Research and Education)**, a nationally-recognized program for training and professional development

Working with our partners inside LifeBridge Health and outside in the community, Center for Hope prevents adverse childhood and community experiences from having a lifelong impact for survivors of all races, ethnicities, and religions, from the cradle to old age.

Center for Hope clients are at a crossroads having endured trauma and needing a path forward. The Center is tasked with not only working to manage the trauma one has experienced, but to prevent violence before it happens.

The team uses a variety of tools including forensic services, medical and mental health treatment, family advocacy services, trusted community violence interrupters and provides access to resources such as workforce development and case management. In addition, we also effect change through legislative and government advocacy and training professionals and youth-serving organizations in the field of violence intervention and prevention.

LifeBridge Health’s Jill Fox Center for Hope building is located on the extended Sinai Hospital campus at the intersection of Pimlico Road and Belvedere Avenue.



## Fiscal Year 2023 Results

Provided help for

5,935

victims of abuse, exploitation and violent crimes

Helped

3,149

survivors of domestic violence

Provided

3,924

therapy sessions

Trained

15,755

people

Conducted

483

child abuse forensic interviews

Conducted

573

medical exams for at risk children

Implemented

902

Safe Streets mediations

## Programs at a Glance

### CHILD ABUSE

#### Child Advocacy Center

Responding to child maltreatment 24 hours a day

When a child is impacted by trauma, lifelong repercussions can result. Enduring physical and sexual abuse, being exposed to gun violence, and being exposed to domestic violence are some of the adverse childhood experiences (ACEs) that greatly affect their lives as they grow into adulthood. As the 3<sup>rd</sup> oldest child advocacy center in the nation, and the first in Maryland, our Child Advocacy Center's team of forensic interviewers, family advocates, anti-trafficking specialists, medical experts, and mental health clinicians work with law enforcement, child protective services, and prosecutors to quickly find answers and develop solutions to prevent an incident of violence from becoming a lifetime of trauma.

### COMMUNITY VIOLENCE

#### Hospital Violence Response Teams

#### Safe Streets Baltimore

#### PAAVE

Breaking the cycles of violence

Youth and young adults in many of our most disenfranchised communities yearn to develop new social norms to change the trajectory of their futures. They need sustainable resources and professional skills development to empower their own hope of shifting the culture of violence. Center for Hope's evidence-based "Cure Violence" approach with our suite of violence interruption solutions at Sinai Hospital, Grace Medical Center and in the community meet survivors and at-risk individuals where they are and when they need help. The team stops violence before it begins through mediation, bedside intervention, coaching, counseling and positive community activity. These programs that break the cycle of violence are of the utmost necessity to keep our youth and young adults alive, to empower them, and to broaden their futures.

Center for Hope's PAAVE (Pathways to Advocacy Against Violence Everyday) is a community-based program that provides trauma-sensitive, intensive case management, mental health treatment and meaningful referrals to youth and their families who have been impacted by a youth homicide or a near-fatal incident. Case managers serve as a link between families and services that are in place within Baltimore through meaningful and appropriate referrals and follow up.



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[lifebridgehealth.org/centerforhope](http://lifebridgehealth.org/centerforhope)

### MENTAL HEALTH

#### Mental Health Team

Fostering resilience and mental well-being

Center for Hope's mental health team provides evidence-based, outpatient therapeutic treatment to individuals as young as three who experience trauma and other adverse childhood experiences (ACEs). Clients are referred to our mental health program by other Center for Hope programs, from LifeBridge Health and from the greater Baltimore community. The mental health team offers individual therapy services, caregiver therapy, intensive case management, referrals to additional mental health services as needed, transportation to and from therapy and HIPAA-compliant therapy via telehealth, all free of charge to the patient, thanks to grants and philanthropic contributions.

### DOMESTIC VIOLENCE

#### DOVE Program at Northwest Hospital

Providing hospital and community-based solutions to intimate partner violence

Domestic abuse, violent behavior in an intimate relationship to exert power and control, is a significant public health issue that can result in serious injuries, emotional trauma, and even death. Physical, sexual, emotional or economic abuse can occur, yet survivors still find it difficult to leave the site of the violence. Our DOVE Program, among the first hospital-based violence response programs in Maryland, provides both bedside response as well as ongoing crisis support and counseling. Often, survivors have nowhere else to go once they find the strength to leave. Our DOVE team helps survivors regain their lives with emergency shelter, counseling, legal support, workforce development, lethality assessments, and safety planning.

### ELDER ABUSE

#### Elder Justice Center

Allowing people to age without victimization

Elder citizens and vulnerable adults may be fragile or even unaware as they experience trauma through abuse and neglect from caregivers, family members, and others in the community. The abuse may be physical, sexual, mental, verbal, or through financial exploitation beyond their control. The National Council on Aging reports that 10% of Americans aged 60+ have experienced some form of abuse but only 7% is ever reported. Using time-tested violence intervention and prevention approaches which our child advocacy and domestic violence programs have mastered, Center for Hope is providing a new approach to this program which will meet the unfortunate increased demand for this population. Like our Child Advocacy Center, our new Elder Justice Center will provide the same 24-hour team-oriented crisis response for every vulnerable elderly adult in our community.

