

Department of Legislative Services
 Maryland General Assembly
 2007 Session

FISCAL AND POLICY NOTE

Senate Bill 1005 (Senator Kelley)
 Education, Health, and Environmental Affairs

Residential Child Care Programs - Behavior Management Interventions

This bill prohibits a person from using seclusion or mechanical restraint on a child or from using physical restraint as a means of disciplining a child in a residential child care program. However, physical restraint on a child is allowed under certain conditions.

Fiscal Summary

State Effect: Department of Human Resources (DHR) general fund expenditures could increase by \$110,500 in FY 2008. Department of Juvenile Services (DJS) general fund expenditures could increase by \$80,000 in FY 2008. Future years for DHR assume inflation, annualization, and annual training materials expenditures. Future years for DJS assume annual training materials expenditures.

(in dollars)	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012
Revenues	\$0	\$0	\$0	\$0	\$0
GF Expenditure	190,500	75,600	77,300	79,200	81,200
Net Effect	(\$190,500)	(\$75,600)	(\$77,300)	(\$79,200)	(\$81,200)

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

Local Effect: None.

Small Business Effect: Minimal.

Analysis

Bill Summary: A person may physically restrain a child if the child poses an immediate physical risk to the child or another individual; there is no known medical

contraindication to its use; the staff using physical restraint has been trained in safely using restraint and has demonstrated the ability to do so safely; less intrusive alternatives for the child have failed or been deemed inappropriate; and positive behavior intervention strategies and supports alone are not effective in preventing the harmful behavior. The use of physical restraint must be documented by staff and the child's parents or guardian must be notified within 24 hours after an incident in which physical restraint is used.

If staff designing a child's individual service plan reasonably anticipates that using physical restraint on the child may be necessary, staff must determine the type of restraint that will be used and put that in the child's service plan. If physical restraint is not included in a child's service plan and an incident occurs in which physical restraint is used, staff must convene to consider the need to include physical restraint in a child's service plan.

The Department of Health and Mental Hygiene (DHMH), DHR, DJS, and the Governor's Office for Children must jointly develop standards for physical restraint training; develop an application and approval process for trainers who wish to provide such training; develop and maintain a list of approved trainers authorized to provide such training; and adopt regulations to implement the bill.

A residential child care program must develop policies and procedures to comply with the bill and the regulations adopted as a result of the bill. A program that uses physical restraint must identify the staff authorized to use physical restraint and ensure those staff receive the required training.

Current Law: DHR, DHMH, and DJS license group homes. Only one license is necessary for a provider, even if services are provided to children placed in a program from multiple State agencies. Licensed group homes provide for the care, diagnosis, training, education, and rehabilitation of children.

Background: DHMH's Mental Hygiene Administration (MHA) advises that it currently provides training to residential child care programs on restraints and on de-escalation techniques. MHA has two videos, one on each topic, for provider staff. MHA also issues a detailed annual handbook for provider staff that covers these same topics.

DHMH's Developmental Disabilities Administration (DDA) advises that it has positive behavioral support services training program for families, caregivers, and provider staff that includes a training book. DDA advises that it prohibits the use of seclusions and prohibits certain types of restraints.

State Expenditures:

DHR: General fund expenditures could increase by an estimated \$110,516 in fiscal 2008, which accounts for the bill’s October 1, 2007 effective date. This estimate reflects the cost of hiring one part-time training coordinator for residential child care programs and \$80,000 for provider training materials: a one-time cost of \$60,000 to produce and make copies of two videos specific to the population served (one on restraints and another on de-escalation techniques) at \$30,000 per video; and \$20,000 for a detailed staff training handbook. It includes a salary, fringe benefits, one-time start-up costs, and ongoing operating expenses.

Positions	0.5
Training Materials	\$80,000
Salary and Fringe Benefits	24,272
Operating Expenses	<u>6,244</u>
Total FY 2008 DHR Expenditures	\$110,516

Future year expenditures reflect: • an annualized salary with 4.5% annual increases and 3.0% employee turnover; • 1% annual increases in ongoing operating expenses; and • \$20,000 annually to update and reprint the staff handbook.

DJS: DJS general fund expenditures could increase by \$80,000 in fiscal 2008: a one-time cost of \$60,000 to produce and make copies of two videos specific to the population served (one on restraints and another on de-escalation techniques) at \$30,000 per video; and \$20,000 for a detailed staff training handbook. Future year expenditures assume \$20,000 in general fund expenditures annually to update and reprint the staff handbook.

DHMH: As both MHA and DDA currently operate training programs in the areas required under the bill, there would not be any additional costs incurred for DHMH.

Additional Information

Prior Introductions: None.

Cross File: HB 1408 (Delegate Griffith, *et al.*) – Health and Government Operations.

Information Source(s): Department of Juvenile Services, Department of Human Resources, Governor's Office, Department of Health and Mental Hygiene, Department of Legislative Services

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