

MdCSWC

The Maryland Clinical Social Work Coalition

The MdCSWC, sponsored by the Greater Washington Society for Clinical Social Work, represents the interests of more than 9,500 licensed clinical social workers in Maryland.

TO: The Honorable Delores G. Kelley, Chair
Members, Senate Finance Committee
The Honorable Chris West

FROM: Judith Gallant, LCSW-C, Chair, Maryland Clinical Social Work Coalition

DATE: February 16, 2021

RE: **SUPPORT** – Senate Bill 466 – *Certificates for Involuntary Admission – Licensed Certified Social Worker-Clinical*

The Maryland Clinical Social Work Coalition (MdCSWC), sponsored by the Greater Washington Society for Clinical Social Work, represents the interests of more than 9,500 licensed clinical social workers in Maryland. On behalf of MdCSWC, we **strongly support** Senate Bill 466.

Senate Bill 466 authorizes a licensed certified social worker – clinical (LCSW-C) to be a second signatory on a certificate for involuntary admission. This modification of the involuntary admission requirements will help to ensure that individuals in need of admission have timely access to qualified health care professionals to evaluate their appropriateness for admission. Social workers comprise the largest number of front-line behavioral health care providers and are often the first responders in an emergency. LCSW-Cs are fully licensed and authorized to diagnose and treat all mental and behavioral health disorders independently and therefore have the education and training needed to appropriately perform the required evaluations.

LCSW-Cs can already sign Emergency Petitions (EP) to ensure that patients who are dangerous to themselves or others are taken to hospital ERs for evaluation. Most hospital ERs are thinly resourced and staffed, especially in the behavioral health area. Granting the LSCW-C to be a signatory for involuntary admission facilitates the admission process and makes more efficient the movement of patients to more appropriate treatment settings. This enhanced efficiency is especially desirable in smaller community hospitals and in rural and more remote settings where medical and behavioral health staffing may be especially thin and hard to access, which only delays care and increases costs.

Senate Bill 466 does not alter the current requirement of a physician to be one of the signatories, thereby retaining the involvement of a physician in the evaluation process. Senate Bill 466 is a prudent and much needed expansion of the current certification process for involuntary admission. A favorable report is requested.

For more information call:

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