

**Disability Rights Maryland**  
Testimony before the Senate Finance Committee  
February 23, 2021

**Senate Bill 520 – Behavioral Health Services and Voluntary Placement Agreements -  
Children and Young Adults - Report Modifications**

**POSITION: SUPPORT**

Disability Rights Maryland (DRM) is Maryland’s designated Protection and Advocacy agency, and is federally mandated to advance the civil rights of people with disabilities. DRM advocates for systemic reforms and policies that improve services and supports for youth with disabilities, and ensures that their rights are protected. We regularly advocate for children with disabilities who require a Voluntary Placement Agreement (VPA) to obtain the care and treatment needed to address their significant needs. It is often difficult for parents and guardians to obtain a VPA, and once a VPA has been executed, we continue to see children in DHS care and custody who stay in clinical settings long past when they are recommended for discharge, because DHS has not been able to put in place appropriate supports and services needed by the child. It is important that new community services be developed and funded, including prevention and crisis response services, therapeutic foster care or small community group homes, to prevent crises and psychiatric hospitalizations whenever possible, and SB 520 is a needed step to compile data to assess various categories of need.

DRM supports SB 520’s requirements that additional data be included in the report that BHA is required to compile and provide to the General Assembly. In particular, DRM supports the new requirements that BHA separate its data into racial and demographic categories so that we can discern whether certain groups are being disproportionately affected by the need and wait for behavioral health and habilitative services. DRM also supports the proposed requirement for BHA to compile data on the number and median length of stay in psychiatric units of hospitals and Residential Treatment Centers, including the length of time spent waiting for appropriate services, and the number of children and youth who are persons with developmental disabilities. This information is critical to understand how to direct resources and funding for the creation of new support services, particularly community services that include wraparound and mobile crisis response.

DRM strongly believes that youth with disabilities have the right to live and thrive in their communities. DRM regularly receives calls from foster families, guardians and family members of youth in DHS custody who lack appropriate placements and services. Under the *Americans with Disabilities Act*, public entities, including BHA and DHS, are required to “administer services, programs, and activities in the most integrated setting appropriate to the needs of qualified individuals with disabilities.” 28 C.F.R. § 35.130(d). By definition, children overstaying their clinical treatments have no

medical reason to be in a restrictive hospital setting and are appropriate for community-based placements or residential treatment programs. Requiring BHA to continually assess needs is a key first step to the development of services. BHA has already proposed some new steps in its newly issued Request for Expressions of Interest for providers to begin to address the issue of children and youth overstaying in hospitals and RTCs. More work remains to be done, particularly around the development of additional community services, so that parents and guardians are not required to seek a VPA to access appropriate care in the first place.

**For these reasons, DRM recommends that Senate Bill 520 be given a favorable report.**