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CORPORATE OFFICE

House Bill 406
Children in Out-of-Home Placements – Placement in Medical Facilities
Position: Favorable
Budget & Taxation
March 30th, 2022

Good afternoon,

My name is Sumr Farooq and I am a licensed social worker on the inpatient child and adolescent psychiatric unit at the University of Maryland Medical Center, here on behalf of the University of Maryland Medical System. I agree with everything that has been said in support of House Bill 406.

I would like to impress upon you today the human experience for children who are directly affected by the insufficiencies that exist in the current state of the placement process.

I recently cared for 9th grader whom I will call “Angel.” Angel was just starting her first year in high school when she was admitted to our unit for an acute psychiatric admission. Angel had a history of significant trauma and at a young age, had been removed from her parent’s care and custody by the court. After 21 days in our unit, Angel was medically ready for discharge; however, because she was under the custody of local DSS, she had to wait until DSS could find a placement for her. She spent the next 81 days waiting for them to find her a home.

During those 81 days, Angel spent her first semester of high school, Thanksgiving, Christmas, New Years, away from loved ones, and the comforts of simply being a kid. She would often make comments saying that it was her fault she was still here. She thought that she was being punished. She felt rejected and hopeless. One night, unable to express how she was feeling out loud, she wrote a note. It said, “I never said this before, I need my mom, I’m just not myself; I’m losing myself.” This is the reality for these kids. They feel voiceless, unable to truly advocate for what they deserve. There is no end in sight for them. One of the hardest parts about my job was to meet with this child daily, just to tell her “I don’t know where you are going”, and to hear that she was unable to make contact with her DSS worker herself to ask why there were no updates. What is already one of the most traumatic experiences in their young lives, is exacerbated by the inability of local DSS to find suitable placement.

While she was hospitalized, our team tried to collaborate with local DSS, reaching out to them directly for status updates and implementing weekly treatment team meetings to provide our insights into her responsiveness to treatment.

Our team also offered to assist with the referral process. The only information that these placement agencies receive is an initial referral which contains some limited information about the patient. This is the only piece of information they have to decide whether to accept or reject a

placement. Although this child had experienced trauma and had triggered some negative behavior, those experiences are what cultivated a profound resiliency that allowed her to improve during her admission. These strengths and progress must be underscored to families and facilities she was being referred to. Unfortunately, we have no ability to make sure that this is being done. We offered to contact placement agencies ourselves to follow-up, and were denied information on where referrals were sent. Week after week, we were informed that placements were denying her, with no feedback. When pressed for detail about why these placements were denying her, DSS would not provide us with this information.

In February, we ultimately took it upon ourselves to reach out to placement agencies directly in the hope that perhaps one agency would reconsider their prior denial. In doing so, we contacted one facility who stated that they had only received the referral the day prior. With careful and direct follow-up with these agencies, we were able to facilitate an interview with the child, which lead to her discharge the next day. In conclusion, had we not taken it upon ourselves to make this direct contact, this child would have been left to languish far beyond the 81 days she spent unnecessarily.

Thank you Chairman Guzzone and Members of the Committee.