



Maryland
Hospital Association

February 3, 2022

To: The Honorable Luke Clippinger, Chair, House Judiciary Committee

Re: Letter of Information - House Bill 296 - Interim and Temporary Protective Orders -
Electronic Filing and Video Conferencing Hearings

Dear Chair Clippinger:

On behalf of the Maryland Hospital Association's (MHA) 60 member hospitals and health systems, we appreciate the opportunity to comment on House Bill 296.

Across the state, there are hospital-based programs with specialty trained health care workers, such as forensic nurse examiners and social workers, who care for survivors of [domestic violence](#), [sexual assault](#), and other forms of violence. Safe discharge planning is a key focus for patients and health care workers caring for them. Currently, staff in hospital-based programs help patients print forms if they express an interest in filing a protective order after discharge. These proactive measures promote a safe discharge planning process and potentially prevent readmission.

HB 296 would allow a patient to file an electronic petition for an interim or temporary protective order. The bill allows the patient to attend a virtual hearing at the hospital. Some hospital-based programs may have the physical space, equipment, and staff to assist with this process, yet there are several considerations before implementing this process statewide.

Maryland hospitals are experiencing a staggering workforce crisis. This process would presumably require training to understand the process, risks, and benefits of requesting a protective order. Additionally, supplemental staff could be needed depending on the length of time required to complete the petition and/or participate in the hearing. The legislation allows an individual to file a petition electronically or attend a video conference "while the individual is at the hospital..." This raises questions about the timing and process. Hospitals are open 24/7/365. Would the courts be able to respond to this type of request while a patient is receiving care at the hospital? Would there be parameters around the hours of operation? Would this present any unfairness to individuals ready for discharge outside of typical business hours?

There are hospitals that have the resources and staff to benefit from HB 296. however, it may be burdensome or impractical for other hospitals. We support the intent of the legislation and welcome the opportunity to work with the sponsor and advocates on this issue.

For more information, please contact:
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