



Springboard
COMMUNITY SERVICES

SB503- Criminal Procedure – Child Advocacy Centers – Care Providers

March 8, 2023

Testimony of F.T. Burden, CEO of Springboard Community Services

Senate Judicial Proceedings Committee

Position: **OPPOSE**

Dear Senate Judicial Committee Members:

I write to express my opposition to Child Advocacy Centers- Care Providers bill (SB503).

For the past 173 years, Springboard Community Services has dedicated itself to transforming the lives of Maryland's most vulnerable. From our earliest efforts identifying and addressing the needs of the working poor, foster children, and single-parent families, Springboard Community Services, formerly Family and Children's Services, has continuously evolved to meet the challenges of our changing world.

We are the on-site mental health provider at the Child Advocacy Centers (CAC) in Carroll, Harford, and Howard counties. We are also the identified comprehensive domestic violence provider for Carroll County.

We oppose SB503 because it does not appear to recognize or understand the relationship of the contracted mental health provider to the child advocacy centers. As such, the bill creates a number of procedural questions and imposes unreasonable and unnecessary burdens on independent mental health organizations like mine. It also creates an unnecessary burden on our staff and on our partner CAC staff to communicate with each other and clients in a small window of time if there is a sudden change, illness, termination, or unavailability of a mental health provider.

The bill says

“EXCEPT AS PROVIDED IN SUBPARAGRAPH (III) OF THIS
17 PARAGRAPH, THE CHILD ADVOCACY CENTERS SHALL PROVIDE WRITTEN
18 NOTIFICATION WITHIN 48 HOURS TO THE CHILD AND THE CHILD'S PARENT OR
19 GUARDIAN WHEN THERE IS A CHANGE IN THE CHILD'S BEHAVIORAL,
MENTAL, OR
20 OTHER HEALTH CARE PROVIDER.
21 (II) THE NOTIFICATION UNDER SUBPARAGRAPH (I) OF THIS
22 PARAGRAPH SHALL INCLUDE THE NAME AND CONTACT INFORMATION OF
THE NEW
23 AND PREVIOUS PROVIDERS.”

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As has been our practice for decades, Springboard promptly notifies clients/guardians of any changes in mental health providers. License and credentialing required procedures already mandate that a parent or guardian execute consent of care agreements. The provision of mental health services in the child advocacy center is “crisis focused” and short term. Mental health providers in child advocacy centers typically meet 3-4 crisis-counseling sessions. Clients are referred outside of the CAC for long-term treatment if required. Given the short duration of care from the CAC mental health provider, the need to abruptly replace a therapist would be rare. Again, referrals and changes in providers already require guardian notification and signed consents. As multidisciplinary team members, we inform our CAC partners about any changes in mental health caseloads or assignments.

As written, this bill would require changes in procedures that are likely to create more questions and confusion for families and providers during a difficult and traumatic time. It would require CAC staff to notify the client, not the provider, who is generally contracted and not a CAC staff member. This is not good care and it’s not a healthy practice.

The 48-hour notice under the bill would also not work for this structure between the agencies. It suggests that, as the mental health provider, Springboard would have to arrange for a new provider or a referral, get the name, then tell the CAC, and the CAC has to notify the family, all within 48 hours.

This 48-hour notice rule does not exist in any health regulation we are aware of and is not the industry standard for CACs or mental health.

In all of our years of caring for vulnerable patients, and in partnership with the CACs we have never failed to notify children or families if a staff member was unable to provide service. We have internal procedures in place for continuity of care in the event any of our therapists leave, cannot provide service or in the very rare instance when one is terminated. We also have licensure requirements for the clinical social workers and professional counselors that are on staff.

Thank you for your time. We urge an UNFAVORABLE report.