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March 2, 2023

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Room 101, House Judiciary Committee
House Office Building
Annapolis, MD 21401

**Bill: House Bill 762 - Criminal Procedure - Child Advocacy Centers - Care Providers
Position: Support**

The Maryland Psychological Association, (MPA), which represents over 1,000 doctoral level psychologists throughout the state, asks the House Judiciary Committee to **FAVORABLY report on House Bill 762.**

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House Bill 762 as drafted requires that Child Advocacy Centers (CACs) from across the State institute the following best practices to protect the children receiving services from any lapse in care. The bill accomplishes the following:

- Notification of children and parents or guardians if there is turnover of their health care providers,
- Allowing the departing health care providers, the opportunity to have a final session with the client/family to allow for closure and appropriate transition to the services needed to resolve their mental health challenges,
- Prohibits notification by the provider if it would clear that notification would endanger the child, and
- Prohibits a final session if a provider has been terminated due to harmful actions and behaviors directed towards the child/family in treatment.
- Clarifies that healthcare provider whistleblower protections will apply to healthcare providers who work at or for CACs.

The MPA strongly supports House Bill 762 as it serves to protect the most vulnerable children in our state, and the mental health professionals providing care. This bill will provide safeguards to CACs and the health care providers that work with the centers, and transparency for the children and families that rely on their much-needed services.

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Child Advocacy Centers (CACs) are an essential part of the care spectrum for children who are victims of abuse. CACs operate by and large on limited budgets and despite that, excel at what they do.

However, when situations emerge that create a disruption in the staffing and provision of care, whether by directly employed care providers, or contracted care providers, this bill will make sure that the children and their families are made aware of changes to their provider. This is so they can have closure with the providers they have come to trust and rely on as well as be involved in the process of determining what next steps are most appropriate for their care. Maryland has an obligation to vulnerable youth to ensure that mental health services are competently delivered while minimizing the risk of further traumatizing this vulnerable population.

The impetus for this bill arose from a CAC deciding that their therapists were no longer being cooperative with staff and terminated the therapist's employment. As the law currently stands the organization is under no obligation to the children being served. The organization can fire the therapists, not allow the therapists to have a termination session where treatment planning can take place to address the needs of this particularly vulnerable population.

While most organizations would not act this way, the state of the law in Maryland does not speak to the oversight of these organizations in a manner that clearly protects this vulnerable population and those who endeavor to serve them.

It is important to note that every licensed mental health provider is bound by the regulations of a professional licensing board (e.g., Psychology, Social Work). These regulations only apply to the behavior of licensed individuals. This means that such regulations can neither deter nor sanction the decisions and policies made by unlicensed managers nor administrators: even if those decisions and policies are illegal, unethical or result in harm to children. To make matters worse, the individual providers can be sanctioned by their Boards for following illegal, unethical, or harmful organizational directives and policies.

Even if it was an isolated incident it brought to light the need for standardized procedures and establishment of best practices in the law.

That is why House Bill 762 was introduced. Children losing their therapist with no notice, with no plan and no continuity of care serves as an additional trauma. They will most likely be unwilling to engage in therapy again or if they do so will take years to trust they will not be abandoned again.

We ask for a favorable report on House Bill 762. If we can be of any further assistance as the House Judiciary Committee considers this bill, please do not hesitate to contact MPA's Legislative Chair, Dr. Pat Savage at mpalegislativcommittee@gmail.com.

Respectfully submitted,

Rebecca Resnick, Psy.D.
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President

R. Patrick Savage, Jr., Ph.D.
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Chair, MPA Legislative Committee

cc: Richard Bloch, Esq., Counsel for Maryland Psychological Association
Barbara Brocato & Dan Shattuck, MPA Government Affairs