

Judicial Proceedings

House Bill 1480: Health – Child Advocacy Centers – Continuity of Care Standards for Health Care Professionals and Reports of Violations

*****OPPOSE*****

The National Association of Social Workers – Maryland Chapter, representing social workers statewide, strongly opposes HB 1480: *Child Advocacy Centers - Continuity of Care Standards for Health Care Professionals and Reports of Violations*. Across Maryland, Child Advocacy Centers (CACs) are structured to meet local needs, operating with different models of care and different funding. Some are fortunate to have the resources to employ behavioral health providers directly, while most others maintain professional partnerships with expert providers in the community.

HB 1480 fails to clarify whether its provisions apply solely to CAC-employed or contracted providers, or if it also extends to community-based professionals with whom CACs collaborate. This ambiguity creates confusion.

Further, HB 1480 mandates that all individuals providing medical or mental health services within CACs be licensed or certified by the appropriate health occupations board and operate within their professional scope. The good news? Maryland law *already* requires licensure to provide medical or mental health services. Practicing without a license is illegal and carries significant penalties, including criminal charges and fines. This provision of HB 1480 is, therefore, redundant and unnecessary.

Another troubling requirement is the obligation for CACs to notify children and their guardians in writing whenever a medical or mental health provider changes - and includes the former provider's contact information - so that families may reach out to them "as needed." This is impractical and can endanger children.

- Healthcare professionals leave positions for many reasons - career changes, family needs, or medical leave. Expecting them to remain available indefinitely places an unfair burden on providers.
- A requirement to notify parents has no exception to keeping the offending parent in the loop without regard to the impact on children - or to the previous provider who may not wish to be available to the offending parent.
- No other healthcare setting imposes this requirement. Why should CACs be treated differently?

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In short, HB 1480 may make sense when viewed through the lens of a well-resourced CAC with the ability to have on-staff therapists. Most CACs do not. Moreover, requiring families be provided with contact information for a former therapist unduly burdens mental health providers. Most don't leave via termination.

Maryland's child welfare system is facing serious challenges, including a placement shortage so severe that the state spent **\$24 million to house children in hotels last year**. This is where legislative attention should be.

We urge you to issue an **unfavorable report on HB 1480**. This bill does not improve care or services for vulnerable children and families—it simply creates bureaucratic obligations where none are needed. Let's focus on real solutions for Maryland's most vulnerable children.

Respectfully submitted,

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Children, Youth, and Families Committee