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Patrick Moran – President

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**SB 196 – Correctional Services – Medication Review Committee – Administration of  
Psychotropic Medication to an Incarcerated Individual  
Judicial Proceedings Committee  
Wednesday, January 21**

**LETTER OF INFORMATION**

AFSCME Maryland Council 3 represents approximately 55,000 public service workers across varying levels of government including city, county, state, and higher education. AFSCME members are on the frontlines every day delivering critical public services our communities depend on. This includes workers in our state correctional and mental health facilities who directly witness and experience the impacts of individuals with severe mental illness who refuse medication after being sentenced to a state facility.

Senate Bill 196 allows the Department of Public Safety and Correctional Services to establish a process for the involuntary administration of psychotropic medication for an incarcerated individual in a state correctional facility.

In 2018, AFSCME worked with the General Assembly and allies to pass legislation to expedite the Clinical Review Panel process in state mental health facilities operated by the Maryland Department of Health. The goal was that patients who pose a danger to themselves or others receive timely treatment after being admission.<sup>1</sup> This legislation was prompted by AFSCME members working in hospital admissions and long-term care units who witnessed firsthand the challenges of providing meaningful care before a patient had the opportunity to become stabilized with medication. Every day the stabilizing medication could not be administered, was a day the patient could not feel better. During the stabilization process, state hospital staff carefully monitor patient behaviors, assess side effects, and ensure patient safety. With adequate resources, these dedicated professionals help patients adhere to their treatment plans, engage patients in rehabilitative services, and play a critical role in restoring individuals to a point where they can safely return to their communities.

AFSCME remains concerned that inadequate staffing levels, aging facility infrastructure, and the Department's primary role as an incarcerating—rather than treatment-focused—agency continue to hinder the effective implementation of this program. Last year, the Department of Corrections spent more than \$200 million on overtime costs due to chronic staffing shortages.<sup>2</sup> The professionally trained treatment teams that operate in state mental health facilities to monitor individuals following the involuntary administration of psychotropic medication do not exist in state correctional facilities.

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<sup>1</sup> 2018, Ch. 702/703. [Criminal Procedure – Incompetency and Criminal Responsibility – Court-Ordered Evaluation](#)

<sup>2</sup> December 1, 2025, DBM Overtime Report – Key Findings – [Presentation to JCFPPO](#)

As a result, AFSCME members continue to have serious unanswered questions about the proposed legislation. For example, what protections will be in place for an incarcerated individual who is adjusting to a new medication and may feel sluggish, vulnerable to assault, and leaves the infirmary for the mess hall? Will an untrained correctional officer who is already responsible for the movement of hundreds of incarcerated individuals also be expected to monitor and safeguard this person?

AFSCME Maryland Council 3 members in our state correctional facilities and in our state mental health facilities continue to believe that Corrections is no place to treat mental illness. Our state mental health facilities should be properly resourced and utilized for these purposes.

Thank you for considering this information as your deliberate on Senate Bill 196.

