

BILL ANALYSIS

C.S.H.B. 2580
By: Naishtat
Human Services
Committee Report (Substituted)

BACKGROUND AND PURPOSE

The 79th Legislature passed legislation providing for informed consent to medical care for a child in the state's foster care system. However, there is confusion about whether the Department of Family and Protective Services has the authority to designate a foster parent or the child's parent, if parental rights have not been terminated, to provide informed consent.

C.S.H.B. 2580 clarifies that when the court authorizes the Department of Family and Protective Services as the entity to provide consent to medical treatment to a foster child in the state's care, the department may designate the child's foster parent, or parent if parental rights have not been terminated, to provide consent.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

Authorizes the Department of Family and Protective Services to designate the child's foster parent, or the child's parent, if parental rights have not been terminated, to provide informed consent to medical treatment on behalf of the department. Requires the department to file notice of the change with the court and each party if the individual designated under this section changes.

EFFECTIVE DATE

Upon passage, or, if the Act does not receive the necessary vote, the Act takes effect September 1, 2007.

COMPARISON OF ORIGINAL TO SUBSTITUTE

C.S.H.B. 2580 strikes "informed" to conform this subsection with other references in Chapter 266, Family Code, regarding consent to medical treatment for a foster child. The bill, as filed, referred to "informed" consent on behalf of the department.