

AN ACT

relating to consent for treatment for chemical dependency in a treatment facility and required training for the facility's intake personnel.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Sections 462.009(e) and (g), Health and Safety Code, are amended to read as follows:

(e) Consent given by a patient or by a person authorized by law to consent to treatment on the patient's behalf for the administration of a medication, therapy, or treatment is valid only if:

(1) for consent to therapy or treatment:

(A) the consent is given voluntarily and without coercive or undue influence; and

(B) ~~[(2)]~~ before administration of the ~~[medication,]~~ therapy~~[,]~~ or treatment, the treating physician or the psychologist, social worker, professional counselor, or chemical dependency counselor explains to the patient and to the person giving consent, in simple, nontechnical language:

(i) ~~[(A)]~~ the specific condition to be treated;

(ii) ~~[(B)]~~ the beneficial effects on that condition expected from the ~~[medication,]~~ therapy~~[,]~~ or treatment;

(iii) ~~[(C)]~~ the probable health and mental

1 health consequences of not consenting to the [~~medication,~~
2 therapy~~,~~] or treatment;

3 (iv) [~~(D)~~] the side effects and risks
4 associated with the [~~medication,~~] therapy~~,~~] or treatment;

5 (v) [~~(E)~~] the generally accepted
6 alternatives to the [~~medication,~~] therapy~~,~~] or treatment, if any,
7 and whether an alternative might be appropriate for the patient;
8 and

9 (vi) [~~(F)~~] the proposed course of the
10 [~~medication,~~] therapy~~,~~] or treatment;

11 (2) for consent to the administration of medication:

12 (A) the consent is given voluntarily and without
13 coercive or undue influence; and

14 (B) the treating physician provides each
15 explanation required by Subdivision (1)(B) to the patient and to
16 the person giving consent in simple, nontechnical language; and

17 (3) for consent to medication, therapy, or treatment,
18 the informed consent is evidenced in the patient's clinical record
19 by a signed form prescribed by the commission for this purpose or by
20 a statement of the treating physician or the psychologist, social
21 worker, professional counselor, or chemical dependency counselor
22 who obtained the consent that documents that consent was given by
23 the appropriate person and the circumstances under which the
24 consent was obtained.

25 (g) Consent given by a patient or by a person authorized by
26 law to consent to treatment on the patient's behalf applies to a
27 series of doses of medication or to multiple therapies or

1 treatments for which consent was previously granted. If the
2 treating physician or the psychologist, social worker,
3 professional counselor, or chemical dependency counselor obtains
4 new information relating to a [~~medication,~~] therapy[~~,~~] or treatment
5 for which consent was previously obtained, the physician or the
6 psychologist, social worker, professional counselor, or chemical
7 dependency counselor must explain the new information and obtain
8 new consent. If the treating physician obtains new information
9 relating to a medication for which consent was previously obtained,
10 the physician must explain the new information and obtain new
11 consent.

12 SECTION 2. The heading to Section 462.025, Health and
13 Safety Code, is amended to read as follows:

14 Sec. 462.025. INTAKE, SCREENING, ASSESSMENT, AND
15 ADMISSION.

16 SECTION 3. Section 462.025, Health and Safety Code, is
17 amended by amending Subsections (a) and (e) and adding Subsection
18 (b-1) to read as follows:

19 (a) The commission shall adopt rules governing the
20 voluntary admission of a patient to a treatment facility, including
21 rules governing the intake, screening, and assessment procedures of
22 the admission process.

23 (b-1) The rules governing the screening process shall
24 establish minimum standards for determining whether a prospective
25 patient presents sufficient signs, symptoms, or behaviors
26 indicating a potential chemical dependency disorder to warrant a
27 more in-depth assessment by a qualified professional. The screening

1 must be reviewed and approved by a qualified professional.

2 (e) In accordance with commission rule, a treatment
3 facility shall provide annually a minimum of two [~~eight~~] hours of
4 inservice training regarding intake and screening [~~and assessment~~]
5 for persons who will be conducting an intake or screening [~~or~~
6 ~~assessment~~] for the facility. A person may not conduct intake or
7 screenings [~~or assessments~~] without having completed the initial
8 and applicable annual inservice training.

9 SECTION 4. Section 462.025(h), Health and Safety Code, is
10 amended by amending Subdivision (2) and adding Subdivision (4) to
11 read as follows:

12 (2) "Assessment" means the clinical [~~administrative~~]
13 process a treatment facility uses to gather information from a
14 prospective patient, including a medical history and the problem
15 for which the patient is seeking treatment, to determine whether a
16 prospective patient should be admitted.

17 (4) "Screening" means the process a treatment facility
18 uses to determine whether a prospective patient presents sufficient
19 signs, symptoms, or behaviors to warrant a more in-depth assessment
20 by a qualified professional.

21 SECTION 5. This Act takes effect September 1, 2011.

President of the Senate

Speaker of the House

I certify that H.B. No. 3146 was passed by the House on May 3, 2011, by the following vote: Yeas 144, Nays 0, 1 present, not voting.

Chief Clerk of the House

I certify that H.B. No. 3146 was passed by the Senate on May 19, 2011, by the following vote: Yeas 31, Nays 0.

Secretary of the Senate

APPROVED: _____

Date

Governor