By: Turner of Harris

H.B. No. 1058

	A BILL TO BE ENTITLED
1	AN ACT
2	relating to complaints about medication or medical care provided to
3	foster children.
4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
5	SECTION 1. Chapter 266, Family Code, is amended by adding
6	Section 266.0031 to read as follows:
7	Sec. 266.0031. COMPLAINTS REGARDING MEDICAL CARE. (a) A
8	parent, foster parent, managing conservator, possessory
9	conservator, guardian, caretaker, custodian, court-appointed
10	special advocate, or other person with knowledge of medical care,
11	including medication, provided to a foster child may file with the
12	department a complaint outlining the individual's concerns about
13	the medical care. The department shall:
14	(1) develop a process to review and address each
15	complaint submitted under this subsection; and
16	(2) include the complaint in the child's health
17	passport maintained under Section 266.006.
18	(b) The department shall create a central file of complaints
19	received under Subsection (a). The information in the central file
20	may not identify the foster child who is the subject of the
21	complaint, the individual who submitted the complaint, or any other
22	individual. At least once each year, the department shall submit an
23	aggregate report of the information contained in the central file
24	to the governor, lieutenant governor, and speaker of the house of

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1 representatives. The central file information and aggregate report 2 are public information subject to disclosure under Chapter 552, 3 <u>Government Code.</u>

4 SECTION 2. Section 266.007(a), Family Code, is amended to 5 read as follows:

6 (a) At each hearing under Chapter 263, or more frequently if 7 ordered by the court, the court shall review a summary of the 8 medical care provided to the foster child since the last 9 hearing. The summary must include information regarding:

10 (1) the nature of any emergency medical care provided 11 to the child and the circumstances necessitating emergency medical 12 care, including any injury or acute illness suffered by the child;

13 (2) all medical and mental health treatment that the14 child is receiving and the child's progress with the treatment;

(3) any medication prescribed for the child and the
condition, diagnosis, and symptoms for which the medication was
prescribed and the child's progress with the medication;

18 (4) the degree to which the child or foster care 19 provider has complied or failed to comply with any plan of medical 20 treatment for the child;

21 (5) any adverse reaction to or side effects of any 22 medical treatment provided to the child;

(6) any specific medical condition of the child that
has been diagnosed or for which tests are being conducted to make a
diagnosis;

26 (7) any activity that the child should avoid or should27 engage in that might affect the effectiveness of the treatment,

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including physical activities, other medications, and diet; [and] 1 2 (8) any complaints filed with the department under Section 266.0031; and 3 4 (9) other information required by department rule or 5 by the court. 6 SECTION 3. The heading to Subchapter A, Chapter 266, Family 7 Code, is repealed. SECTION 4. Not later than December 1, 2013, the Department 8 of Family and Protective Services shall develop the complaint 9 process required by Section 266.0031(a), Family Code, as added by 10 this Act, and the central file required by Section 266.0031(b), 11 Family Code, as added by this Act. 12 13 SECTION 5. This Act takes effect September 1, 2013.