

By: Nelson

S.B. No. 424

A BILL TO BE ENTITLED

AN ACT

relating to the administration and monitoring of certain medications provided to foster children.

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

SECTION 1. Section 264.121, Family Code, is amended by adding Subsection (g) to read as follows:

(g) For a youth taking prescription medication, the department shall ensure that the youth's transition plan includes provisions to assist the youth in managing the use of the medication after leaving foster care, including information that educates the youth in the use of the medication and provides the youth with information about the resources that are available to assist the youth in managing the use of the medication.

SECTION 2. Section 266.001, Family Code, is amended by adding Subdivision (6) to read as follows:

(6) "Psychotropic drug" has the meaning assigned by Section 261.111.

SECTION 3. Section 266.004, Family Code, is amended by adding Subsection (a-1) to read as follows:

(a-1) Consent to the administration of a psychotropic drug is valid only if it is provided in the manner provided by Section 576.025(b), Health and Safety Code. The evidence of the consent may be included in the foster child's health passport.

SECTION 4. Section 266.005, Family Code, is amended by

1 adding Subsection (b-1) and amending Subsection (c) to read as
2 follows:

3 (b-1) The department shall notify the child's parents of the
4 initial prescription of a psychotropic drug to a foster child and of
5 any change in dosage of the psychotropic drug at the first scheduled
6 meeting between the parents and the child's caseworker after the
7 date the psychotropic drug is prescribed or the dosage is changed.

8 (c) The department is not required to provide notice under
9 Subsection (b) or (b-1) to a parent who:

10 (1) has failed to give the department current contact
11 information and cannot be located;

12 (2) has executed an affidavit of relinquishment of
13 parental rights;

14 (3) has had the parent's parental rights terminated;
15 or

16 (4) has had access to medical information otherwise
17 restricted by the court.

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

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

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

27 (2) all medical and mental health treatment that the

1 child is receiving and the child's progress with the treatment;

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

5 (4) any non-pharmacological interventions attempted,
6 plans for discontinuing the psychotropic drug, and the child's
7 prognosis with and without the psychotropic drug;

8 (5) the degree to which the child or foster care
9 provider has complied or failed to comply with any plan of medical
10 treatment for the child;

11 (6) ~~(5)~~ any adverse reaction to or side effects of
12 any medical treatment provided to the child;

13 (7) ~~(6)~~ any specific medical condition of the child
14 that has been diagnosed or for which tests are being conducted to
15 make a diagnosis;

16 (8) ~~(7)~~ any activity that the child should avoid or
17 should engage in that might affect the effectiveness of the
18 treatment, including physical activities, other medications, and
19 diet; and

20 (9) ~~(8)~~ other information required by department
21 rule or by the court.

22 SECTION 6. The heading to Subchapter A, Chapter 266, Family
23 Code, is repealed.

24 SECTION 7. This Act takes effect September 1, 2013.