



To: Texas Judges Who Hear CPS Cases

From: The Honorable Robin Sage Jurist in Residence, Office of Court Administration

Date: January 24, 2014

RE: New Medical Consenter Training

As a follow up to October JIR Letter on the medical care of children in foster care, I wanted to highlight the newly released training for persons who act as medical consenters for youth in foster care.

Q: Who must be trained?

A: This training is required for any person authorized to make medical decisions for children in the legal custody of DFPS. This includes foster parents, case managers for child placing agencies, professional staff of emergency shelters, cottage parents, relative and kinship caregivers, and certain DFPS staff and youth medical consenters. The training must be completed before DFPS can designate an individual as a medical consenter for a child and as a part of the foster parent pre-service training.

Q: What is important for judges to know?

A: Medical consenters must acknowledge in writing that they have: 1) received such training; 2) understand the principles of informed consent for psychotropic medication; and 3) understand that non-pharmacological interventions should be considered and discussed with the prescribing practitioner before consenting to the use of psychotropic medication. Because the law places special emphasis on youth voice, several new requirements support greater involvement from the youth in the consent and decision making process.

- Courts must ensure the child has been provided the opportunity to express their opinion on the medical care being provided.
- Attorneys and Guardians ad Litem must, in a developmentally appropriate manner, seek to elicit the child's opinion on the medical care provided.
- Attorneys ad Litem must advise any child 16 years and older that they have the right to request the court to authorize the child to consent to the child's own medical care.
- DFPS must create transition plans that include provisions to assist the youth in managing the use of the medication and in managing the child's long-term physical and mental health needs after leaving foster care, including how to use the medication and resources available to assist the youth in managing their medications.

Link to the training here: http://www.dfps.state.tx.us/child_protection/medical_services/medical-consent-training.asp