

Legislative Analysis

**DHS MUST AUTHORIZE FOSTER PARENTS
CONSENT TO ROUTINE, NONSURGICAL CARE**

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House Bill 4409 (Substitute H-1)

Sponsor: Rep. Dudley Spade

Committee: Families and Children's Services

Complete to 3-26-09

A SUMMARY OF HOUSE BILL 4409 AS REPORTED FROM COMMITTEE ON 3-25-09

House Bill 4409 would amend Section 14a of the Social Welfare Act (MCL 722.124a) to require the Department of Human Services to issue a written instrument granting a foster parent authority to consent to *routine, nonsurgical medical care* of the child in the foster parent's care.

The bill would not affect the provision that allows only the minor child's parent or legal guardian to consent to *non-emergency, elective surgery* for a child in foster care.

Currently, a probate court, a child placing agency, or the department may consent to routine, nonsurgical medical care, or emergency medical and surgical treatment of a minor child placed in out-of-home care. If the minor child is placed in a child care organization, then the probate court, the child placing agency, or the department making the placement must execute a written instrument granting that organization authority to consent to emergency medical and surgical treatment of the child. The department may also execute a written instrument granting a child care organization with authority to consent to routine, nonsurgical medical care of the child.

If the minor child is placed in a child care institution, the probate court, the child placing agency, or the department making the placement must in addition execute a written instrument granting that institution with authority to consent to the routine, nonsurgical medical care of the child. The bill, as noted above, would add language *requiring* the department to issue a written instrument to a foster parent granting the foster parent the authority to consent to routine, nonsurgical medical care for the child.

The act says that "routine, nonsurgical medical care" does not include contraceptive treatment, services, medication or devices, or psychotropic medications.

FISCAL IMPACT:

The bill is expected to have no impact on costs to the State or on local units of government. The Department of Human Services indicates the bill codifies existing DHS practices.

POSITIONS:

Department of Human Services testified in support of the bill. (3-25-09)

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■ This analysis was prepared by nonpartisan House staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.