Bill No. <u>CS for SB 1578</u>

Amendment No. ____ Barcode 122022

CHAMBER ACTION

	Senate House
1	WD/2R
2	04/27/2004 04:47 PM
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11	Senator Smith moved the following amendment to amendment
12	(800466):
13	(600100)
14	Senate Amendment (with title amendment)
15	On page 2, lines 2 and 3, delete those lines
16	
17	and insert: <u>related services.</u>
18	(2) The State Board of Education shall adopt rules
19	pursuant to ss. 120.536(1) and 120.54 to implement the
20	provisions of this section.
21	Section 2. Section 743.0645, Florida Statutes, is
22	amended to read:
23	743.0645 Other persons who may consent to medical care
24	or treatment of a minor; Center for Juvenile Psychotropic
25	Studies; creation; purpose; advisory board; report
26	(1) As used in this section, the term:
27	(a) "Blood testing" includes Early Periodic Screening,
28	Diagnosis, and Treatment (EPSDT) testing and other blood
29	testing deemed necessary by documented history or
30	symptomatology but excludes HIV testing and controlled
31	substance testing or any other testing for which separate
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court order or informed consent as provided by law is required.

- (b) "Medical care and treatment" includes ordinary and necessary medical and dental examination and treatment, including blood testing, preventive care including ordinary immunizations, tuberculin testing, and well-child care, but does not include surgery, general anesthesia, provision of psychotropic medications, or other extraordinary procedures for which a separate court order, power of attorney, or informed consent as provided by law is required.
- (c) "Person who has the power to consent as otherwise provided by law" includes a natural or adoptive parent, legal custodian, or legal guardian.
- (d) "Psychotropic medication" means a medicine that may not be dispensed or administered without a prescription which is used for the treatment of medical disorders, and includes hypnotics, antipsychotics, antidepressants, antianxiety agents, sedatives, and mood stabilizers such as lithium, Depakote, and other anticonvulsants used as mood stabilizers and psychomotor stimulants. This paragraph expires July 1, 2005.
- (2) Any of the following persons, in order of priority listed, may consent to the medical care or treatment of a minor who is not committed to the Department of Children and Family Services or the Department of Juvenile Justice or in their custody under chapter 39, chapter 984, or chapter 985 when, after a reasonable attempt, a person who has the power to consent as otherwise provided by law cannot be contacted by the treatment provider and actual notice to the contrary has not been given to the provider by that person:
 - (a) A person who possesses a power of attorney to 2

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provide medical consent for the minor. A power of attorney
executed after July 1, 2001, to provide medical consent for a
minor includes the power to consent to medically necessary
surgical and general anesthesia services for the minor unless
such services are excluded by the individual executing the
power of attorney.

- (b) The stepparent.
- (c) The grandparent of the minor.
 - (d) An adult brother or sister of the minor.
- (e) An adult aunt or uncle of the minor.

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provided by law.

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There shall be maintained in the treatment provider's records of the minor documentation that a reasonable attempt was made to contact the person who has the power to consent.

- the Department of Children and Family Services or the Department of Juvenile Justice caseworker, juvenile probation officer, or person primarily responsible for the case management of the child, the administrator of any facility licensed by the department under s. 393.067, s. 394.875, or s. 409.175, or the administrator of any state-operated or state-contracted delinquency residential treatment facility may consent to the medical care or treatment of any minor committed to it or in its custody under chapter 39, chapter 984, or chapter 985, when the person who has the power to consent as otherwise provided by law cannot be contacted and such person has not expressly objected to such consent. There shall be maintained in the records of the minor documentation that a reasonable attempt was made to
- (4) The medical provider shall notify the parent or 3 12:42 PM 04/27/04 s1578c1c-14c3t

contact the person who has the power to consent as otherwise

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other person who has the power to consent as otherwise provided by law as soon as possible after the medical care or treatment is administered pursuant to consent given under this section. The medical records shall reflect the reason consent as otherwise provided by law was not initially obtained and shall be open for inspection by the parent or other person who has the power to consent as otherwise provided by law.

- (5) The person who gives consent; a physician, dentist, nurse, or other health care professional licensed to practice in this state; or a hospital or medical facility, including, but not limited to, county health departments, shall not incur civil liability by reason of the giving of consent, examination, or rendering of treatment, provided that such consent, examination, or treatment was given or rendered as a reasonable prudent person or similar health care professional would give or render it under the same or similar circumstances.
- (6) The Center for Juvenile Psychotropic Studies is created within the Department of Psychiatry of the College of Medicine of the University of Florida. The purpose of the center is to collect, track, and assess information regarding minors in state custody held pursuant to chapter 39, chapter 984, or chapter 985 who have been or are currently being prescribed psychotropic medications.
- (a) In addition to determining the number of children in state custody who are receiving psychotropic medications, the types and dosages of medication being prescribed to those children, and any other data relevant to scientifically assessing the status of minors in state custody who are receiving psychotropic medications, the center shall evaluate:
 - 1. Whether the child received a full and complete

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- 1 medical evaluation and, to the extent that the medication was 2 prescribed for a psychiatric condition and it is possible to
- 3 determine from available records, whether or not all other
- 4 possible physical causes had been ruled out prior to the
- 5 prescribing of psychotropic medication.
- 2. What other treatments and services were recommended
 for the child in addition to psychotropic medication and
 whether or not those services were offered or delivered.
- 9 3. Whether or not informed consent was received from a
 10 parent, legal guardian, or the court prior to initiating
 11 treatment.
 - 4. Whether or not followup monitoring and treatment appropriate to the child's diagnosis and prescribed medication were provided to the child.
- 5. In cases where court authorization was sought,

 whether a full and complete child resource record was provided

 to the court for decisionmaking purposes.
 - 6. Whether or not the prescription for and type of psychotropic medications prescribed for the child were appropriate for the age and diagnosis of the child and consistent with the medical standard of care for the treatment of the child's condition.
 - (b) The director of the Center for Juvenile

 Psychotropic Studies shall be appointed by the Dean of the

 College of Medicine of the University of Florida.
- (c) There is created an advisory board that shall
 periodically and objectively review and advise the center on
 the academic rigor and research parameters of all actions
 taken pursuant to this subsection. The board shall consist of
 the following nine members who have backgrounds in psychiatric
- 31 <u>health:</u>

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1	1. The Secretary of Children and Family Services or
2	his or her designee;
3	2. The Secretary of Juvenile Justice or his or her
4	designee;
5	3. The Secretary of Health Care Administration or his
6	or her designee;
7	4. The Secretary of Health or his or her designee;
8	5. One member appointed by the President of the Senate
9	from the Florida Psychiatric Society who specializes in
10	treating children and adolescents;
11	6. One member appointed by the Speaker of the House of
12	Representatives who is a pediatrician experienced in treating
13	children and adolescents with psychiatric diseases;
14	7. One member appointed by the President of the
15	University of Florida who is an epidemiologist; and
16	8. Two members appointed by the Governor, one of whom
17	has experience serving as a guardian ad litem to children and
18	adolescents in the custody of the state who have psychiatric
19	diseases, and one of whom is employed by the Louis de la Parte
20	Florida Mental Health Institute and has experience in the
21	academic study of children and adolescents with psychiatric
22	diseases.
23	(d) The center shall work in conjunction with the
24	Department of Children and Family Services, the Department of
25	Juvenile Justice, the Agency for Health Care Administration,
26	and the Department of Health, and, to the extent allowed by
27	the privacy requirements of federal and state laws, those
28	agencies shall work with the center and make available to the
29	center data regarding such dependent minors, including, but
30	not limited to:
31	1. Demographic information, including, but not limited 6

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- 1 | to, age, geographic location, and economic status.
- 2. A family history of each dependent minor,
- 3 including, but not limited to, the minor's involvement with
- 4 the child welfare system or the juvenile justice system, all
- 5 applicable social service records, and all applicable court
- 6 <u>records.</u>
- 7 <u>3. A medical history of each dependent minor,</u>
- 8 including, but not limited to, the minor's medical condition.
- 9 4. All information regarding the medications
- 10 prescribed or administered to each minor, including, but not
- 11 limited to, information contained in each minor's medication
- 12 <u>administration record.</u>
- 13 5. Practice patterns, licensure, and board
- 14 certification of prescribing physicians.
- (e) All oral and written records, information,
- 16 letters, and reports received, made, or maintained by the
- 17 center shall be maintained in a manner consistent with all
- 18 applicable state and federal law.
- 19 (f) A privilege against civil liability is granted to
- 20 any person furnishing medical records in furtherance of the
- 21 charge of the center, unless such person furnishing medical
- 22 records acted in bad faith or with malice in providing such
- 23 information. A person who participates in the center's
- 24 research activities or provides information to the center with
- 25 regard to the incompetence, impairment, or unprofessional
- 26 conduct of any health care provider licensed under chapter
- 27 | 458, chapter 459, chapter 460, chapter 461, chapter 462,
- 28 chapter 463, chapter 464, chapter 465, or chapter 466 may not
- 29 be held liable in any civil action for furnishing such medical
- 30 records if such person acts without intentional fraud or
- 31 <u>malice.</u>

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- 1 (q) By January 1, 2005, the center shall report its
 2 findings regarding psychotropic medications prescribed to
 3 dependent minors in state custody to the President of the
 4 Senate, the Speaker of the House of Representatives, and the
 5 appropriate committee chairs of the Senate and the House of
 6 Representatives.
 - (h) This subsection expires July 1, 2005.
 - (7)(6) The Department of Children and Family Services and the Department of Juvenile Justice may adopt rules to implement this section.
 - (8)(7) This section does not affect other statutory provisions of this state that relate to medical consent for minors.
- Section 3. Subsection (1) of section 39.401, Florida

 Statutes, is amended to read:
- 39.401 Taking a child alleged to be dependent into custody; law enforcement officers and authorized agents of the department.--
 - (1) A child may only be taken into custody:
- 20 (a) Pursuant to the provisions of this part, based 21 upon sworn testimony, either before or after a petition is 22 filed; or
 - (b) By a law enforcement officer, or an authorized agent of the department, if the officer or authorized agent has probable cause to support a finding:
 - 1. That the child has been abused, neglected, or abandoned, or is suffering from or is in imminent danger of illness or injury as a result of abuse, neglect, or abandonment;
- 2. That the parent or legal custodian of the child has materially violated a condition of placement imposed by the

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1 | court; or

3. That the child has no parent, legal custodian, or responsible adult relative immediately known and available to provide supervision and care.

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- 6 The refusal of a parent, legal quardian, or other person
- 7 responsible for a child's welfare to administer or consent to
- 8 the administration of any psychotropic medication to the child
- 9 does not, in and of itself, constitute grounds for the
- 10 department to take the child into custody, or for any court to
- 11 order that the child be taken into custody by the department,
- 12 unless the refusal to administer or consent to the
- 13 administration of psychotropic medication causes the child to
- 14 be neglected or abused.
- Section 4. Section 402.3127, Florida Statutes, is
- 16 created to read:
- 17 402.3127 Unauthorized administration of medication.--
- 18 (1) An employee, owner, household member, volunteer,
- 19 or operator of a child care facility, large family child care
- 20 home, or family day care home, as defined in s. 402.302,
- 21 <u>including a child care program operated by a public or</u>
- 22 nonpublic school deemed to be child care under s. 402.3025,
- 23 which is required to be licensed or registered, may not,
- 24 | without written authorization from a child's parent or legal
- 25 guardian, administer any medication to a child attending the
- 26 child care facility, large family child care home, or family
- 27 day care home. The written authorization to administer
- 28 medication must include the child's name, the date or dates
- 29 <u>for which the authorization is applicable, dosage</u>
- 30 instructions, and the signature of the child's parent or legal
- 31 <u>quardian</u>.

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1	(2) In the event of an emergency medical condition
2	when a child's parent or legal guardian is unavailable, an
3	employee, owner, household member, volunteer, or operator of a
4	licensed or unlicensed child care facility, large family child
5	care home, or family day care home may administer medication
6	to a child attending the facility or home without the written
7	authorization required in subsection (1) if the medication is
8	administered according to instructions from a prescribing
9	health care practitioner. The child care facility, large
10	family child care home, or family day care home must
11	immediately notify the child's parent or legal guardian of the
12	emergency medical condition and of the corrective measures
13	taken. If the parent or legal guardian remains unavailable and
14	the child's emergency medical condition persists, the child
15	care facility must immediately notify the child's medical care
16	provider.
17	(3) As used in this section, the term "emergency
18	medical condition" means circumstances in which a prudent
19	layperson acting reasonably would believe that an emergency
20	medical condition exists.
21	(4)(a) A person who violates this section commits a
22	felony of the third degree, punishable as provided in s.
23	775.082 or s. 775.083, if the violation results in serious
24	injury to the child.
25	(b) A person who violates this section commits a
26	misdemeanor of the first degree, punishable as provided in s.
27	775.082 or s. 775.083, if the violation does not result in
28	serious injury to the child.
29	Section 5. Subsection (8) is added to section
30	1006.062, Florida Statutes, to read:
31	1006.062 Administration of medication and provision of

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medical services by district school board personnel.--
          (8) Each district school board shall adopt rules that
   prohibit all district school board personnel from recommending
 3
   the use of psychotropic medications for any student. This
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   subsection does not prohibit district school board personnel
    from recommending that a student be evaluated by an
 6
    appropriate medical practitioner and does not prohibit
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    district school board personnel from consulting with such a
   practitioner with the consent of the student's parent.
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    (Redesignate subsequent sections.)
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    ====== T I T L E A M E N D M E N T =========
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   And the title is amended as follows:
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          On page 2, line 23, after the semicolon,
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18
    insert:
19
           amending s. 743.0645, F.S.; defining the term
20
           "psychotropic medication"; creating the Center
21
           for Juvenile Psychotropic Studies within the
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           Department of Psychiatry of the College of
           Medicine of the University of Florida;
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           providing the purpose of the center; providing
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           for the appointment of a director; creating an
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           advisory board; providing for board membership;
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           requiring the center to work with the
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           Department of Children and Family Services, the
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           Department of Juvenile Justice, the Agency for
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           Health Care Administration, and the Department
           of Health; requiring certain data relating to
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1	dependent minors for whom psychotropic
2	medications have been prescribed to be made
3	available to the center, as legally allowed;
4	requiring the center to report to legislative
5	leaders by a specified date; providing for
6	future repeal; amending s. 39.401, F.S.;
7	providing that the refusal of a parent, legal
8	guardian, or other person responsible for a
9	child's welfare to administer or consent to the
10	administration of a psychotropic medication
11	does not by itself constitute grounds for
12	taking the child into custody; providing an
13	exception; creating s. 402.3127, F.S.;
14	prohibiting the unauthorized administration of
15	medication by personnel associated with child
16	care entities; providing an exception for
17	emergency medical conditions when the child's
18	parent or legal guardian is unavailable;
19	defining the term "emergency medical
20	condition"; providing penalties for violations;
21	amending s. 1006.062, F.S.; requiring district
22	school boards to adopt rules prohibiting
23	district school board personnel from
24	recommending the use of psychotropic
25	medications for any student; allowing such
26	personnel to recommend that a medical
27	practitioner evaluate a student and to consult
28	with such practitioners;
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