

**Health/Mental Health Care Providers: How Do I? Engage correct consenting party**

The consenting party for health-related activities (i.e. consent for release of information and consent for treatment) varies with the activity and the legal status of the youth. Below is a grid with the basics – please email [Child-Welfare-Policy@michigan.gov](mailto:Child-Welfare-Policy@michigan.gov) for additional questions:

Activity	Consenting Party
<b>INFORMATION TRANSFER</b>	
CPS requesting information for investigation	No consent, only notification that information is needed for the purposes of investigation.
CPS requesting information for ongoing CPS case planning	<p>CPS can sign consent for Release of Information for Case Planning.</p> <p>Alternative practice – birth/legal parent signs consent for release of information between parties for care coordination.</p> <ul style="list-style-type: none"> <li>• NOTE: CPS may only forward records that have been redacted per child welfare policy.</li> <li>• NOTE: HIPAA allows contact between treatment providers for the purpose of care coordination.</li> <li>• NOTE: Michigan MH Code limits some kinds of information transfer unless there is explicit signed consent (birth/legal parent best signer).</li> </ul>
Foster Care requesting information for case planning – temporary court ward	<p>Foster Care worker can sign consent for Release of Information – also provides court order placing child in foster care.</p> <p>Alternative practice – birth/legal parent signs consent for release of information between parties for care coordination.</p> <ul style="list-style-type: none"> <li>• NOTE: Foster care may only forward records that have been redacted per child welfare policy.</li> <li>• NOTE: HIPAA allows contact between treatment providers for the purpose of care coordination.</li> <li>• NOTE: Michigan MH Code limits some kinds of information transfer unless there is explicit signed consent (birth/legal parent best signer).</li> </ul>
Foster Care requesting information – state (MCI) ward	<p>Foster Care worker can sign consent for Release of information whether for case planning or for exchange of information between parties – also provides court order terminating parental rights.</p> <ul style="list-style-type: none"> <li>• NOTE: HIPAA allows contact between treatment providers for the purpose of care coordination.</li> <li>• NOTE: Michigan MH Code limits some kinds of information transfer unless there is explicit signed consent (worker best signer).</li> </ul>

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<b>TREATMENT CONSENT-TEMPORARY COURT WARD</b>	
Routine Health Care*	Foster Parent (residential staff when child placed in residential setting).
Emergency Care	Consent not required-notification of treatment.
Immunization waiver	Birth/Legal Parent.
Non-routine/non-emergency treatment (all settings)	Birth/Legal Parent.
Mental Health Assessment/psychotherapy	Foster Parent.
Psychotropic Medication treatment	Birth/Legal Parent.
Psychiatric Hospitalization	Birth/Legal Parent.
<b>TREATMENT CONSENT-MICHIGAN CHILDREN'S INSTITUTE (MCI) WARD</b>	
Routine Health Care*	Foster Parent (residential staff when child placed in residential setting).
Emergency Care	Consent not required-notification of treatment.
Non-routine/ non-emergency treatment (all settings)	Michigan Children's Institute (MCI) Superintendent or designee.
Mental Health Assessment/psychotherapy	Foster Parent.
Psychotropic Medication treatment	Foster Care Worker.
Psychiatric Hospitalization	Foster Care Worker.
<b>TREATMENT CONSENT-PERMANENT COURT WARD</b>	
Routine Health Care*	Foster Parent (residential staff when child placed in residential setting).
Emergency Care	Consent not required-notification of treatment.
Non-routine/non-emergency treatment	Court order.
Mental Health Assessment/psychotherapy	Foster Parent (residential staff when child placed in residential setting).
Psychotropic Medication treatment	Court order.
Psychiatric Hospitalization	Court order.
<b>TREATMENT CONSENT 18 AND OLDER UNDER COURT JURISDICTION^</b>	
Routine Health Care*	Youth.
Emergency Care	Youth.
Non-routine/non-emergency treatment	Youth.
Mental Health Assessment/psychotherapy	Youth (unless court ordered under mental health code).
Psychotropic Medication treatment	Youth (unless court ordered under mental health code).
Psychiatric Hospitalization	Youth (unless court ordered under mental health code).

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\*Routine Care (includes, not limited to): comprehensive health exams, dental exams (cleaning, filling, extraction), developmental or behavioral assessment, laboratory services as determined by physician, blood pressure measurement age 3 and older, age-appropriate unclothed physical exam, age-appropriate screening, testing, immunizations, immunization review/administration, blood lead testing under age 6, mental health assessment, evaluation, counseling, and/or therapy, nutritional assessment, preventative health services, treatment of communicable diseases, vision and hearing testing, X-rays, routine suturing for minor lacerations, sleep studies, occupational, physical and speech therapy.

^Unless court certifies youth is not legally competent and appoints a guardian.