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Multidisciplinary Overview of Psychotropic Medication for Children and Youth in Foster Care and Out-of-Home Placements

December 19, 2017

Hon. Jerilyn Borack, Judge of the Superior Court of California, County of Sacramento

William Grimm, Directing Attorney, National Center for Youth Law

Susan Bullard, RN, PHN, CLNC, Foster Care Public Health Nurse, Madera County Health Department

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Agenda

Overview

- Treatment of Children in Out of Home Care
- California Law
- California State Guidelines
- Multiple Systems of Oversight

The How-To of Quality Improvement

- Hypothetical Situations
- Case Study Activities



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Participants will be able to...

1. Describe their own role and the role of other professionals in the court authorization process;
2. Articulate the process by which foster youth are administered psychotropic medications, as well as drawbacks present in our current system;
3. Become familiar with the circumstances under which a foster youth is overmedicated with psychotropic medication, as well as the means through which such overmedication can be reduced; and
4. Analyze JV-220 forms for psychotropic medication authorization and identify areas for improvement.

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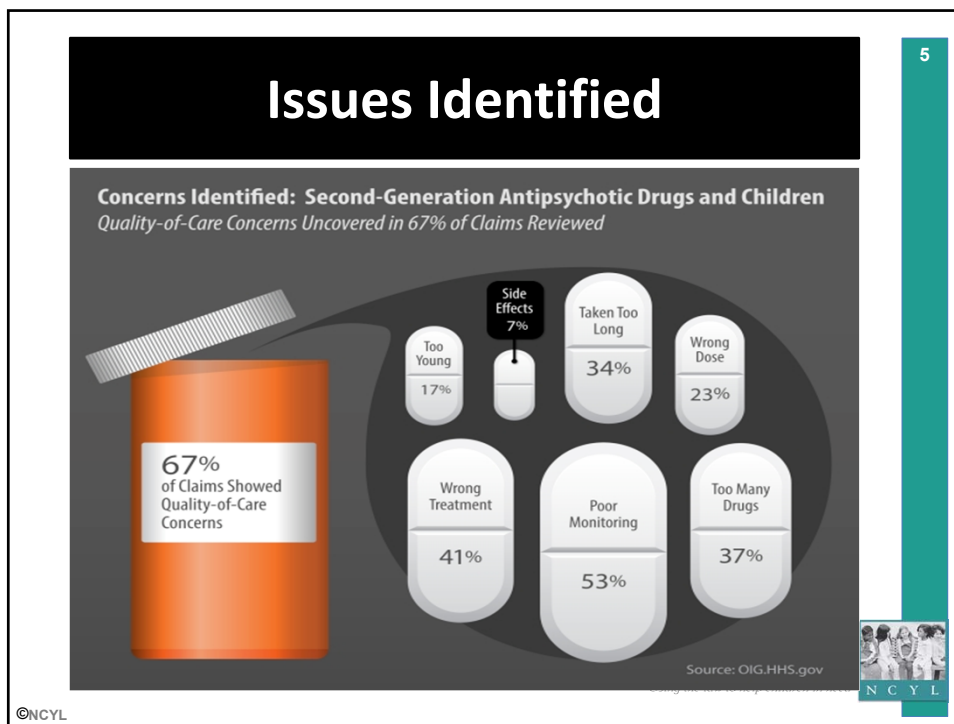
Tisha's Testimony



Oversight Hearing
A Failure of Oversight: Misuse of Psychotropic Medications on California's Foster Children

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Reactions to the Issues

- What issues have you identified related to psychotropic medications with children you work with?
- What strategies or resources have you found helpful in practice about psychotropic medication and the mental health rights of children?

5 minutes

End

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Catalyst for Change: Child & Family Services Improvement & Innovation Act of 2011, P.L. 112-34

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States must adopt “protocols for the appropriate use and monitoring of psychotropic medications”



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Catalyst for Change: California

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California Department of Social Services and
Department of Health Care Services
Foster Care Quality Improvement Project



California Guidelines for the Use of Psychotropic Medication with
Children and Youth in Foster Care

**California Guidelines
for the Use of
Psychotropic
Medication with
Children and Youth in
Foster Care:**
http://www.dhcs.ca.gov/provgovpart/pharmacy/Documents/QIP_Guidelines.pdf

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Catalyst for Change: California



BAY AREA NEWS GROUP INVESTIGATION

DRUGGING OUR KIDS

Children in California's foster care system are prescribed unproven, risky medications at alarming rates

Story by KAREN DE SA
Photographs and Video by DAN BUGARD
Design by GUY CHEN
PUBLICATION: AUGUST 24, 2014

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Catalyst for Change: Three Oversight Hearings

Joint Oversight Hearing: Misuse of Psychotropic Medication in Foster Care: Improving Child Welfare Oversight and Outcomes within the Continuum of Care -- February 24, 2015

- [02/24/15 - Agenda \(pdf\)](#)
- [02/24/15 - Background \(pdf\)](#)


**Psychotropic Medication and Mental Health Services for Foster Youth: Seeking Solutions for a Broken System
August 11, 2015**

- [08/11/15 Agenda \(pdf\)](#)
- [08/11/15 Background Paper \(pdf\)](#)
- [02/24/15 Background Paper \(pdf\)](#)
- [04/09/15 Report: Senate Budget and Fiscal Review Subcommittee #3 \(pdf\)](#)
- [Centers for Medicare & Medicaid Services: Waiver Approval \(pdf\)](#)

**Joint Oversight Hearing with Senate Budget and Fiscal Review Subcommittee No. 3 on Health and Human Services:
A Failure of Oversight: Misuse of Psychotropic Medications on California's Foster Children
September 26, 2016**

- [09/26/2016 Agenda \(pdf\)](#)
- [09/26/2016 Background Paper \(pdf\)](#)
- [09/26/2016 \(Chart\) Attachment A: CDSS Foster Care by DHCS System \(pdf\)](#)
- [09/26/2016 California State Auditor Report 2015-131 \(pdf\)](#)

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Catalyst for Change: California State Auditor

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California's Foster Care System:

Report 2015-131—The State and Counties Have Failed to Adequately Oversee the Prescription of Psychotropic Medications to Children in Foster Care

- [Summary](#)
- [Full Report \(HTML\)](#)
- [Full Report \(PDF\)](#)
- [Fact Sheet \(PDF\)](#)
- [Video](#)

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Legislation: 2015

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Senate Bill 484 (2015): Requires the State to identify the group homes most over-reliant on psychotropic medication and requires these homes to develop alternative treatments.

Senate Bill 319 (2015): Requires public health nurses to improve their monitoring of foster children prescribed psychotropic medications.

Senate Bill 238 (2015): Requires group home administrators, foster parents, social workers, judges, and court appointed counsel receive training on the appropriate uses and effects of psychotropic medications.

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Legislation: 2016

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Senate Bill 1174 (2016): Subjects prescribing physicians to heightened scrutiny by enabling the Medical Board of California to collect and analyze data, and, where warranted, conduct investigations of physicians who frequently prescribe outside recognized safety parameters for children

Senate Bill 1291 (2016): Requires the State to monitor counties to ensure they offer mental health services for children in foster care that include non-drug treatments

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Budgets: 2016 and 2017

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Foster Care Public Health Nurses (2016 and 2017): establishes additional ongoing funding for foster care public health nurses to oversee and monitor the treatment of children in out of home placements on psychotropic medications.

SB 89 (2017): Requires the State Department of Social Services, in consultation with the State Department of Health Care Services, to contract for child psychiatry services to complete a record review for all authorization requests for psychotropic medications for which a second opinion review is requested by a county, as specified.

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Advancing Quality Improvement in Your Area: Email Follow Up

Email ajohnson@youthlaw.org with

- Your Name,
- County or City,
- Agency and Position.

Ask Anna a question or tell her about an issue you are currently trying to address related to psychotropics.

Anna will respond as a follow up to the conference and provide any data, materials, or local connections that may be helpful to you.




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What is the Judge's Role

- **Determining Psychotropic Medication Authorization or Not**
- **Requesting Second Reviews and Opinions**
- **Weighing the Information**
- **When and How to Request More Information**
- **Review Hearings**
- **Attend Psychotropic Medication Trainings**



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Judicial Authorization Process

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JV-217-INFO Guide to Psychotropic Medication Forms

Use these Judicial Council forms to ask for an order to give (or to continue giving) psychotropic medication to a child who is a ward or a dependent of the juvenile court and living in an out-of-home placement or in foster care, as defined in Welfare and Institutions Code, section 727.4. Local forms may be used to provide additional information to the court.

Exception: These forms are *not* required in these situations:

- If the child lives in an out-of-home facility *not* considered foster care, as defined by section 727.4, unless a local court rule requires it, or
- If there is a previous court order that gives the child's parent(s) the authority to approve or refuse the medication.

Required Forms	Optional Forms
JV-220 Application for Psychotropic Medication	The child, caregiver, CASA, or Indian tribe wanting to give input to the court may use one of these forms.
JV-220(A) Physician's Statement—Attachment	JV-218 Child's Opinion About the Medicine
JV-220(B) Physician's Request to Continue Medication—Attachment	JV-219 Statement About Medicine Prescribed
JV-221 Proof of Notice of Application	A person who opposes the proposed medication or who wants to give the court more information may fill out this form:
JV-223 Order on Application for Psychotropic Medication	JV-222 Input on Application for Psychotropic Medication
JV-224 County Report on Psychotropic Medication	

Judicial Rule Change

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- **Input from child, caregiver, parents, tribe, and CASA**
- **Additional Information provided to court:**
 - Use of non pharmacological treatments
 - Lab tests performed
 - Explanation for off-label use, multiple medications, exceeding dosage
- **Review of medication at every juvenile court status hearing**



Success Stories

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What is the Public Health Nurse's Role?

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- Participate in medical care planning
- Assist with court authorizations for procedures or medications
- Monitor and oversee psychotropic medication, authorizations, the Health and Education Passport and labs, screenings, measurements, and assessments
- Collaborate and consult with child welfare and probation staff
- Provide education materials and assistance upon request of non-minor dependents


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Why Use the JV 218?



Child's Opinion About the Medicine



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Tisha Ortiz's testimony
<https://youtu.be/bEEO83wMb50>

Shanequa Arrington's testimony
<https://www.youtube.com/watch?v=wXP8tjxNw4>

THIS IS WHY.....

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2017 California Rules of Court Rule 5.640 Psychotropic Medications

- (c), (2), (A)-Input can be by *Child's Opinion About the Medicine* (form JV-218) or *Statement About Medication Prescribed* (form JV 219; letter; talking to the judge at a court hearing; or through the social worker, probation officer, attorney of record, or Court Appointed Special Advocate.



- Worksheet 1 is the JV-218 form

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JV-218 Child's Opinion About the Medicine

You may use this form to tell the judge what you think about the medicine that a doctor wants you to take.

You do not *have to* use this form if you do not want to. There are other ways to tell the judge how you feel. You can:

- Talk to the judge at a hearing or write the judge a letter, or
- Ask your lawyer, social worker, probation officer, or CASA to tell the judge how you feel.

You may ask someone you trust to help you read and fill out this form. And you may add as many pages as you need. If you add extra pages, please put your name and the number of the question you are answering on each extra page.

1 Your name: Male Foster Child

(first) (middle) (last)

2 Your date of birth: 01-01-2000

(month) (day) (year)

Answer these questions about this medicine:

3 Do you know that a doctor wants you to take a medicine? Yes No Not sure

4 Do you know the name and dose of the medicine the doctor wants you to take? Yes No Not sure

5 Have you taken this medicine before? Yes No Not sure

6 Do you want more information before you decide if you want to take it? Yes No
If **yes**, what do you want to know? Already taking it

7 Did anyone tell you how the medicine is supposed to help you? Yes No Not sure

8 Did anyone explain the possible side effects? Yes No Not sure
If **yes**, what did they say? _____

9 What is your opinion about taking the medicine?
It helps me for now _____

Clark stamps date here when form is filed.

Fill in court name and street address:

Superior Court of California, County of _____

Fill in child's name and date of birth:

Child's Name: Male Foster Child

Date of Birth: 01/01/2000

Court fills in case number when form is filed.

Case Number: MJP0101010101

Judicial Council of California, www.courts.ca.gov
New July 1, 2016. District Court
Website and instructions Code: 8-306-D
California Rules of Court, rule 5.640

Child's Opinion About the Medicine

JV-218, Page 1 of 3

JV-218 Child's Opinion About the Medicine

You may use this form to tell the judge what you think about the medicine that a doctor wants you to take.

You do not *have to* use this form if you do not want to. There are other ways to tell the judge how you feel. You can:

- Talk to the judge at a hearing or write the judge a letter, or
- Ask your lawyer, social worker, probation officer, or CASA to tell the judge how you feel.

You may ask someone you trust to help you read and fill out this form. And you may add as many pages as you need. If you add extra pages, please put your name and the number of the question you are answering on each extra page.

1 Your name: Female Foster Child
(first) (middle) (last)

2 Your date of birth: 01/01/2009
(month) (day) (year)

Answer these questions about this medicine:

3 Do you know that a doctor wants you to take a medicine? Yes No Not sure

4 Do you know the name and dose of the medicine the doctor wants you to take? Yes No Not sure

5 Have you taken this medicine before? Yes No Not sure

6 Do you want more information before you decide if you want to take it? Yes No
 If yes, what do you want to know? tastes nasty, too big and hard to swallow

7 Did anyone tell you how the medicine is supposed to help you? Yes No Not sure

8 Did anyone explain the possible side effects? Yes No Not sure
 If yes, what did they say? _____

9 What is your opinion about taking the medicine?
I'm mad. I don't want to take it.

Judicial Council of California, www.courts.ca.gov
 First July 1, 2016, Optional Form
 Welfare and Institutions Code, § 360.5
 California Rules of Court, rule 6.050

Child's Opinion About the Medicine

JV-218, Page 1 of 3

JV-218 Child's Opinion About the Medicine

You may use this form to tell the judge what you think about the medicine that a doctor wants you to take.

You do not *have to* use this form if you do not want to. There are other ways to tell the judge how you feel. You can:

- Talk to the judge at a hearing or write the judge a letter, or
- Ask your lawyer, social worker, probation officer, or CASA to tell the judge how you feel.

You may ask someone you trust to help you read and fill out this form. And you may add as many pages as you need. If you add extra pages, please put your name and the number of the question you are answering on each extra page.

1 Your name: Female Foster Child
(first) (middle) (last)

2 Your date of birth: 01/01/2004
(month) (day) (year)

Answer these questions about this medicine:

3 Do you know that a doctor wants you to take a medicine? Yes No Not sure

4 Do you know the name and dose of the medicine the doctor wants you to take? Yes No Not sure

5 Have you taken this medicine before? Yes No Not sure

6 Do you want more information before you decide if you want to take it? Yes No
 If yes, what do you want to know? _____

7 Did anyone tell you how the medicine is supposed to help you? Yes No Not sure

8 Did anyone explain the possible side effects? Yes No Not sure
 If yes, what did they say? The doctor said I could be really tired

9 What is your opinion about taking the medicine?
I want to take medication. I like medication. It helps me feel better.

Judicial Council of California, www.courts.ca.gov
 First July 1, 2016, Optional Form
 Welfare and Institutions Code, § 360.5
 California Rules of Court, rule 6.050

Child's Opinion About the Medicine

JV-218, Page 1 of 3

JV-218 Child's Opinion About the Medicine

Clerk stamps date here when form is filed.

You may use this form to tell the judge what you think about the medicine that a doctor wants you to take.

You do not *have to* use this form if you do not want to. There are other ways to tell the judge how you feel. You can:

- Talk to the judge at a hearing or write the judge a letter, or
- Ask your lawyer, social worker, probation officer, or CASA to tell the judge how you feel.

You may ask someone you trust to help you read and fill out this form. And you may add as many pages as you need. If you add extra pages, please put your name and the number of the question you are answering on each extra page.

1 Your name: Male Foster Child
(first) (middle) (last)

2 Your date of birth: 01/01/2001
(month) (day) (year)

Answer these questions about this medicine:

3 Do you know that a doctor wants you to take a medicine? Yes No Not sure

4 Do you know the name and dose of the medicine the doctor wants you to take? Yes No Not sure

5 Have you taken this medicine before? Yes No Not sure

6 Do you want more information before you decide if you want to take it? Yes No
 If yes, what do you want to know? Side effects. I don't know the dosage. I don't need it because I'm not crazy.

7 Did anyone tell you how the medicine is supposed to help you? Yes No Not sure

8 Did anyone explain the possible side effects? Yes No Not sure
 If yes, what did they say?

9 What is your opinion about taking the medicine? I don't need it because I am not crazy and I can control my temper. I feel I was acting out because people were not there for me.

Judicial Branch of California, www.courts.ca.gov
 New July 1, 2016, Optional Form
 Welfare and Institutions Code, § 369.5
 California Rules of Court, rule 6.640

Child's Opinion About the Medicine

JV-218, Page 1 of 3

Example of JV-219 from a Caregiver

JV-219 Statement About Medicine Prescribed

Clerk stamps date here when form is filed.

You may use this form to give the court input on the request for an order for medication for the youth.

You do not *have to* use this form if you do not want to. There are other ways to give input to the court. You may:

- Send a letter to the judge
- Speak to the judge at the hearing, or
- Ask your lawyer or the child's social worker, probation officer, or CASA to tell the judge how you feel.

You may add pages to this form if you need more space for your answers. Please put the child's name and the number of the question you are answering on each extra page.

Child's name: Female Foster Child
(first) (middle) (last)

1 Your name: Grandmother
(first) (middle) (last)

2 Your relationship to the child: Caregiver CASA
 Indian Tribe Parent
 Other (explain):

3 How long have you known the child? 9yrs 3mo 2 days
(years) (months) (days)

4 How long has the child lived in your home or facility? 4mo
(years) (months) (days)

Child's Behavior

5 How does the child act at home? Don't know
 Describe here: She acts like a kid. She plays.

6 How does the child act at school? Don't know
 Describe here:

Judicial Branch of California, www.courts.ca.gov
 New July 1, 2016, Optional Form
 Welfare and Institutions Code, § 369.5
 California Rules of Court, rule 6.640

Statement About Medicine Prescribed

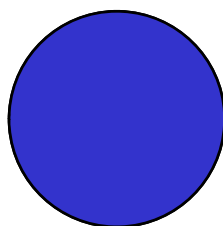
JV-219, Page 1 of 4

How to check Dosages of a Medication and the medical workup

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http://file.lacounty.gov/SDSinter/dmh/1003458_PSYCHOTROPIC_PARAMETERS-6-22-16.pdf

1 minute



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Let's check an actual case

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Probation youth was released from Juvenile Hall and recently placed in a foster home. He was started on Lithium 1000mg twice a day one month ago while in the Juvenile Hall. You receive a JV 220a from the physician for court approval.

- Check his dosage in the Parameters. Is the dosage within the Dose for lithium? See page 15 of the parameters.*
- Check the Medical Workup for Lithium. What labs are required?*

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JV 220a/b concerns

- # 20 – Mandatory Information Attached?
- Are psychosocial services in place?
- Does the information on the JV-218 from the child match the information on the JV 220 from the physician?
- Does the medication log match what is on the JV 220a?
- Is the number of medications on the JV220a consistent with the State Guidelines Appendix A-Prescribing Standards of Psychotropic Medication use by Age Group



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Prescribing Standards of Psychotropic Medication by Age Group

Page 1

Summary of allowable psychotropic medication by age group:

Age (years)	Number of psychotropic medications allowed
0-5	<2 (allows 1)
6-11	<3 (allows no more than 2)
12-17	<4 (allows no more than 3)

Page 2

Prescribing Standards of Psychotropic Medication Use by Age Group:

Age in years	Prescribing Standards
12-17	<4 psychotropic medications <ol style="list-style-type: none"> a. <2 antipsychotics (any combination of atypical and typical) b. <2 mood stabilizers (anti-psychotics not included) c. <2 antidepressants (trazodone as hypnotic excepted) d. <2 stimulants (this does not include a long-activating stimulant and immediate-release stimulant that is the same chemical entity (e.g., methylphenidate-OROS and methylphenidate) e. <2 hypnotics (including trazodone, diphenhydramine, zolpidem and melatonin, benzodiazepines, not including clonidine, guanfacine, and prazosin) f. Medication dose(s) within the usual recommended dose(s) as defined in the most recent version of the State parameters (adaptation of the Los Angeles County Department of Mental Health's Parameters 3.8 For Use of Psychotropic Medication For Children and Adolescents, which can be accessed at: http://dmh.lacounty.gov/wps/portal/dmh/clinical_tools/clinical_practice (Reference 2))
6-11	<3 psychotropic medications <ol style="list-style-type: none"> a. All other restrictions from above.
0-5	<2 psychotropic medications <ol style="list-style-type: none"> a. All other restrictions from above. b. Allows stimulant, atomoxetine, guanfacine, clonidine, or risperidone (for Autistic Spectrum Disorders and associated aggression) only.

What is the attorney's role?

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- **Local Reviews of Psychotropic Medications**
 - Jessie Conradi, M.S.W., J.D.
 - East Bay Children's Law Offices
- **The Attorney's Role**
 - Talking to client about medications
 - Helping child fill out JV-218
 - Considering objections to the JV-220

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What is the attorney's role?

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My process:

1. **Receive JV220**
2. **Utilize review worksheet**
3. **Conduct follow up**
 1. Email the child's attorney
 2. With the prescriber, the therapist, child welfare worker
 3. The child
4. **Sometimes provide input to the court or oppose the medication**
5. **Collect data**

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When are children most at risk of being improperly medicated?

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Data Dashboard: JV220 Tracking November 2017

<p>Diagnoses: I looked at the DX column and found that entries contained anywhere from 1-5 diagnoses. I wanted to know which dx's were most common in the JV220.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>ADHD</td><td>45</td></tr> <tr><td>PTSD</td><td>39</td></tr> <tr><td>Depression</td><td>22</td></tr> <tr><td>Anxiety</td><td>13</td></tr> <tr><td>Bipolar</td><td>12</td></tr> <tr><td>ODD</td><td>9</td></tr> <tr><td>Autism</td><td>6</td></tr> <tr><td>Schizophrenia</td><td>4</td></tr> <tr><td>Schizoaffective</td><td>2</td></tr> </table>	ADHD	45	PTSD	39	Depression	22	Anxiety	13	Bipolar	12	ODD	9	Autism	6	Schizophrenia	4	Schizoaffective	2	<p>Psychotropics and Antipsychotics: I sorted the prescription types by Yes and No antipsychotics and calculated their percentage of all JV220 entries.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Total entries</td><td>166</td><td>% GH - Y antipsychotic</td><td>53%</td></tr> <tr><td>Yes Antipsychotic</td><td>63</td><td>Non GH - Y antipsychotic</td><td>17%</td></tr> <tr><td>Not Antipsychotic</td><td>102</td><td></td><td>61%</td></tr> </table>	Total entries	166	% GH - Y antipsychotic	53%	Yes Antipsychotic	63	Non GH - Y antipsychotic	17%	Not Antipsychotic	102		61%	<p>Placement Type: I sorted by placement type and yes antipsychotic to see the percentage of JV220s that contain an antipsychotic request by type of placement.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Count of "Oppose"</td><td>13</td></tr> <tr><td>Count of "Follow Up"</td><td>100</td></tr> <tr><td>Count of "Confirm"</td><td>36</td></tr> <tr><td>Count of "Call"</td><td>6</td></tr> <tr><td>Count of "approve"</td><td>7</td></tr> <tr><td>Count of "OK"</td><td>38</td></tr> <tr><td>Count of "Consult"</td><td>4</td></tr> </table>	Count of "Oppose"	13	Count of "Follow Up"	100	Count of "Confirm"	36	Count of "Call"	6	Count of "approve"	7	Count of "OK"	38	Count of "Consult"	4	<p>Recommendations: I wanted to see what kind of actions resulted from a review of the JV220 form. I ran a countif function by keywords to find how many times they were included in a recommendation entry.</p>
ADHD	45																																														
PTSD	39																																														
Depression	22																																														
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Bipolar	12																																														
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<p>Race and Antipsychotics: I organized the rows and values by Race total count of JV220s, count of antipsychotic JV220 request, and calculated the percentage by race. There were a number of additional categories of race/ethnicity that were deleted since only one JV220 was represented in that category.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Total</th> <th>Y Antipsychotic</th> <th>% Y Antipsychotic</th> </tr> </thead> <tbody> <tr><td>African American/</td><td>65</td><td>22</td><td>34%</td></tr> <tr><td>Hispanic/Latino</td><td>15</td><td>5</td><td>33%</td></tr> <tr><td>Mixed Race</td><td>7</td><td>3</td><td>43%</td></tr> <tr><td>white</td><td>13</td><td>3</td><td>23%</td></tr> <tr><td>(blank)</td><td>57</td><td>27</td><td>47%</td></tr> <tr><td>Grand Total</td><td>166</td><td>63</td><td>38%</td></tr> </tbody> </table>			Total	Y Antipsychotic	% Y Antipsychotic	African American/	65	22	34%	Hispanic/Latino	15	5	33%	Mixed Race	7	3	43%	white	13	3	23%	(blank)	57	27	47%	Grand Total	166	63	38%	<p>JV220 Type: JV220s could include requests for new, continuing, modifications, emergency or a combination. I sorted into four main groups out of 88 total entries with this coding. I then calculated the percentage of type of JV220 and also calculated what percentage of Emergency JV220s included a request for antipsychotic(s).</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Type</th> <th>%</th> <th>Y-Antipsychotic</th> </tr> </thead> <tbody> <tr><td>New Prescriptions</td><td>28%</td><td></td></tr> <tr><td>Continuing</td><td>25%</td><td></td></tr> <tr><td>Modification</td><td>3%</td><td></td></tr> <tr><td>Emergency</td><td>20%</td><td>50%</td></tr> </tbody> </table>	Type	%	Y-Antipsychotic	New Prescriptions	28%		Continuing	25%		Modification	3%		Emergency	20%	50%		
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The Worksheet

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EBCLO JV-220 Worksheet

Client's Name: [Type Client's Name Here] **Date:** November 13, 2017

Check for the following:

- Is there a DSM-IV diagnosis? (**source:** top of page 2 of the JV-220A)
- 2 or fewer psychotropic medications prescribed? (**source:** top of page 3 of JV-220A)
- A psychiatrist (preferably a child & adolescent psychiatrist) prescribed the medication (**source:** 4.d, middle of page 1 of the JV-220A)
Don't check the box if a primary care provider (PCP) prescribed the medication at the recommendation of a psychiatrist consultant or if a PCP prescribed for the treatment of ADHD, uncomplicated anxiety disorders, and uncomplicated depression.
- The doctor signed within the past 30 days. (**source:** bottom of page 3 of JV-220A)
- Is each psychotropic medication FDA approved for use by children for the purpose for which it was prescribed? (**source:** top of page 3 of the JV-220A)

Find approved uses of medications for children with Epocrates app or online (push "Ctrl" + enter to open): If no "Peds" dosage listed, drug is not approved for kids.
[Epocrates drug lookup](#)

The Worksheet

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- Does each psychotropic medication fall within recommended pediatric dosage? (source: top of page 3 of the JV-220A)

Find medication "Peds" dosage here (push "Ctrl" + enter to open):
[Epocrates drug lookup](#)

- None of the following were prescribed: (source: top of page 3 of the JV-220A)
2 or more antidepressants, 2 or more antipsychotics, 2 or more stimulants, 2 or more mood stabilizers.

Find the class for each medication here (push "Ctrl" + enter to open): sites are safe
[Psychotropic Medication with Drug Class](#)
[Comprehensive psychotropic medication by class with dosage](#)

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The Worksheet

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- Has all the recommended blood work been performed for each psychotropic medication? (source: 10.b, middle of page 3 of the JV-220A)

Find recommended blood work here (push "Ctrl" + enter to open):
[Monitoring Psychotropic Medications](#)

- The child is not under the age of 6: (source: top of page 1 of the JV-220A)
- A single psychotropic medication was prescribed before multiple psychotropic medications for a given mental disorder. (sources: previous JV-220(A)s, DFCS social worker, or the prescribing doctor)
- Has the prescribing doctor not received significant payments from drug companies?

Search the name here (push "Ctrl" + enter to open):
[Dollars for Docs](#)



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The Worksheet

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DIDN'T CHECK ALL THE BOXES? This may indicate a need for additional review of a patient's clinical status and a possible review and/or follow up by a member of the Social Work team.

Helpful resources for answering the above questions:

- <http://www.nlm.nih.gov/medlineplus/druginformation.html>
- <http://www.nlm.nih.gov/health/topics/child-and-adolescent-mental-health/index.shtml>
- <http://www.drugs.com/>
- <http://www.rxlist.com/>

Using the Worksheet: A Model JV220(A)

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JV-220(A) Physician's Statement— Attachment

Case Number:
good example

This form must be completed and signed by the prescribing physician. Read Form JV-217-INFO, *Guide to Psychotropic Medication Forms*, for more information about the required forms and the application process.

- ① Information about the child (name): Billy Smith
 Date of birth: 7/13/2007 Current height: 4'5" Current weight: 100lbs
 Gender: Male Ethnicity: Asian
- ② Type of request:
 - a. An initial request to administer psychotropic medication to this child
 - b. A request to start a new medication or to increase the maximum dose of a previously approved medication
 - c. A request to continue psychotropic medication the child is currently taking
- ③ This application is made during an emergency situation as defined in California Rules of Court, rule 5.640(g). The emergency circumstances requiring the temporary administration of psychotropic medication pending the court's decision on this application are:
Billy was hospitalized for a psych emergency due to suicidal ideation on 8/5/2017. He stated that he was hearing voices instructing him to kill himself.

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Using the Worksheet: Practice JV220(A)

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JV-220(A) Physician's Statement— Attachment

Case Number:
Bad example

This form must be completed and signed by the prescribing physician. Read Form JV-217-INFO, *Guide to Psychotropic Medication Forms*, for more information about the required forms and the application process.

- ① Information about the child (*name*): Bob Smith
Date of birth: 7/13/2007 Current height: _____ Current weight: _____
Gender: Male Ethnicity: _____
- ② Type of request:
 - a. An initial request to administer psychotropic medication to this child
 - b. A request to start a new medication or to increase the maximum dose of a previously approved medication
 - c. A request to continue psychotropic medication the child is currently taking
- ③ This application is made during an emergency situation as defined in California Rules of Court, rule 5.640(g). The emergency circumstances requiring the temporary administration of psychotropic medication pending the court's decision on this application are:
child at risk of losing placement if prescription is not maintained
- ④ Prescribing physician:
 - a. Name: Family Nurse practitioner Marsha Brady License number: PN 12345
 - b. Address: 7788 Billygoat Street, Suite 510
 - c. Phone numbers: 241-577-8898 (Group home nurse)

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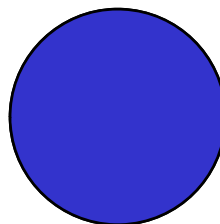
Using the Worksheet: Following Up

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What do you do when:

- Information is missing
- Multiple medications are prescribed
- Labs have not been completed
- No psychosocial services are indicated
- The dosage is too high

Choose One of the Examples on the Left to Discuss per Person:



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Success Stories

Monica, age 17 (collaborative team approach)

Jose, age 6 (confirming what we already know)

Harmony, age 14 (testing the Alameda court review process)

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Success Stories

Talk with a partner about a success story that you have had in your work or that you hope to have now that you have attended this training.

3 minutes

End


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Questions?

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Advancing Quality
Improvement in Your Area:
Email Follow Up

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Email ajohnson@youthlaw.org with

- **Your Name,**
- **County or City,**
- **Agency and Position.**

Ask Anna a question or tell her about an issue you are currently trying to address related to psychotropics.

Anna will respond as a follow up to the conference and provide any data, materials, or local connections that may be helpful to you.

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