

**TUSCARAWAS COUNTY JOB & FAMILY SERVICES
CHILDREN SERVICES POLICY**

**MONITORING THE USE OF PSYCHOTROPIC MEDICATIONS BY
CHILDREN IN AGENCY CUSTODY**

POLICY

Tuscarawas County Job & Family Services will follow approved safeguards and procedures to insure that psychotropic medication use by children in its custody are prescribed and used in a safe manner that promotes the health and welfare of the child.

PROCEDURE

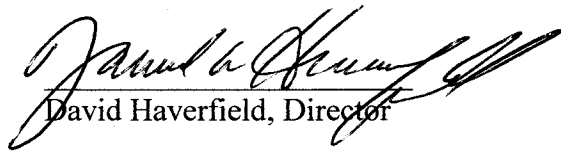
1. Prior to approving the use of any psychotropic medication by a child in the custody of the agency, the prior approval of the Director or their designee is required. If the Director or their designee determines that additional information is necessary in order to evaluate the required consent, a consultation with a mental health professional independent of the prescribing physician shall be made.
2. Any approval of psychotropic medication needed at times when the agency is closed shall be made by the Director or their designee whenever possible. In the event that said medication must be administered on an emergency basis and the Director or their designee are not available, approval must be made by the on-call supervisor subject to review by the Director or their designee the next business day.
3. Prior to seeking approval from the Director or their designee for the provision of psychotropic medication, the case manager assigned to that child or their supervisor shall attempt to contact the prior custodial parent or guardian of any child in the temporary custody or planned permanent living arrangement of the agency. For children in the custody of the Agency on the effective date of this policy, the case manager assigned to that child or their supervisor shall attempt to contact the prior custodial parent or guardian if there are changes to the psychotropic medication. The purpose of said contact is to seek input and involvement from the parent on the decision to administer psychotropic medication. The approval or objection of the parent or documentation regarding efforts to contact the parent shall be documented and provided to the Director or designee at the time the authorization for provision of the medication is sought. The same shall be considered by the Director or their designee in determining whether approval of the medication is in the best interest of the child. Nothing in this section requires the approval of the parent for the administration of psychotropic medication for children in the custody of the agency.
4. Prior to seeking approval from the Director or their designee for the provision of psychotropic medication, the case manager assigned to that child or their supervisor shall discuss the same with the child, giving due regard for their age and maturity. At a minimum this includes all school age children who do not have any developmental

or other delays that would make the same inappropriate. Said discussion shall include the risks and benefits of this treatment as well as the risks and benefits of not taking the treatment including possible side effects. There should also be a discussion with the child regarding their assent to being placed on this medication. Said discussion may take place with assistance and input of a mental health professional. Documentation of this discussion and the assent or refusal to assent of the child shall be provided to the Director or their designee at the time authorization is sought. The same shall be considered by the Director or their designee in determining whether approval of the medication is in the best interest of the child. Nothing in this section shall prohibit the provision of these medications over the objection of any child in the custody of the agency.

5. Psychotropic medication should only be prescribed by a licensed physician who practices as a psychiatrist or a nurse practitioner who works under the supervision of a physician practicing as a psychiatrist. It is recognized that there are circumstances when the same is not possible. In the event that a general medical practitioner is prescribing psychotropic medication, the same shall be noted in the necessary approval and shall be considered by the Director or their designee in granting approval for the use of the medication.
6. The Director or their designee shall consult with a medical expert when any of the following circumstances exist:
 - A. Medication does not match the diagnosis;
 - B. Dosages of the medication are not within recommended prescribing parameters;
 - C. Polypharmacy is used without a pretrial or monoparmacy;
 - D. When four or more psychotropic medications are used concurrently;
 - E. When two or more antidepressants are used concurrently;
 - F. When two or more antipsychotics are used concurrently;
 - G. When two or more stimulants are used concurrently;
 - H. When three or more mood stabilizers are used concurrently;
 - I. When any child under the age of 6 is prescribed a psychotropic medication;
 - J. For any child with three or more mental health admissions during any one-month period;
 - K. When the Director or their designee is not satisfied with the prescriber's stated justification for medication use.
7. As part of the semi-annual administrative review conducted for each child in the custody of the agency, a review of psychotropic medication shall be conducted. At a minimum, the case manager and their supervisor shall be responsible for reviewing medications prescribed by the child and requesting a verbal or preferably written report from the prescribing medical practitioner indicating that the same have been reviewed and continue to be medically appropriate for the child.
8. When the agency obtains custody of a child who is already taking psychotropic medication, the same shall be documented as outlined below. Within 30 days of the

child entering the custody of the agency, the child shall be evaluated by a licensed medical professional to determine if the prescribed medication is appropriate and medically indicated for the child. After said evaluation, the Director or their designee shall approve the existing psychotropic medication regimen or any changes recommended to the same utilizing the process outlined in this policy. No changes in the medicine being prescribed to the child shall be undertaken until this evaluation is conducted.

9. For purposes of this policy, psychotropic medication means a prescription drug that is used to treat or manage a psychiatric symptom or challenging behavior. These include, but are not limited to: Antipsychotic drugs; Anti-depressants; Anti-obsessive Agents; Antianxiety Agents; Mood Stabilizers; Anti-panic Agents; and Stimulants used to treat ADHD.
10. The Med/Ed Clerk in the placement unit is responsible for documenting the provision of any psychotropic medication to a child in the custody of the agency. The same shall be documented in the Medical Information section of SACWIS.
11. Every child that comes into foster care undergoes a diagnostic assessment (screen) to identify any potential issues, including trauma. If necessary, a psychiatric or psychological assessment would be obtained.


David Haverfield, Director

April 7, 2015
Effective Date