

LCCS POLICY 980 Psychotropic Medication

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See new Policy #:	

Scope:	Worker of Record, Substitute Caregiver, Supervisor of Record, LCCS Nursing Staff, Executive Director, LCCS Medical Consultant
Responsibility:	LCCS Services Division Managers, Health Services Supervisor, Executive Director, LCCS Medical Consultant
Purpose:	To ensure that the Executive Director or his designee gives informed consent before a child in LCCS custody is administered a psychotropic medication. Establish a procedure that address the evaluation, justification, and monitoring of children in LCCS custody who is administered a psychotropic medication.
Legal Cite:	O.R.C. §§ 5103.03, 5153.16, O.A.C 5101:2-5-13 (A) (29) O.A.C. 5101:2-42-66, 5101:2-42-66.1, 5101:2-42-66.2.

POLICY STATEMENT

LCCS only approves a child in their custody to be placed on psychotropic medication when there is a diagnostic assessment or psychological/ psychiatric evaluation indicating a diagnosis and a need for the medication. The evaluation must be completed prior to initiation of the medication.

The only exception to the above policy statement is when a psychiatric emergency exists and the Executive Director (or his/her designee), upon verbal consultation with the LCCS Nurse or staff member who spoke directly with the requesting physician (or his or her nurse), consents to a time-limited provision of psychotropic medication directed at alleviating the psychiatric emergency.

LCCS approves psychotropic medication when medically indicated and will not approve its use as a means of punishment or control. The agency approval of psychotropic medication may be done through the Psych Med Team Review process, if requested. Any staff may request a review meeting.

Children have the right to refuse psychotropic medication and have the right to not be penalized for refusing to take psychotropic medication.

All children who are administered psychotropic medication are required to concurrently receive behavior therapy or be referred for mental health or other specialized therapies as appropriate on the basis of his/her needs.

Definition

Psychotropic Medication: Any chemical agent used for the effect that it has upon an individual, in that it alters that person's thoughts, feelings, mental/physical activity, mood or behavior. Medications, which are not usually described as psychotropic, are covered by this policy when they are prescribed for any psychotropic effects.

PROCEDURE

I. While a child is in LCCS custody but NOT already taking any psychotropic medication and it is determined that there may be a need to consider such a medication:

The Worker of Record (WOR), in consultation with his or her Supervisor (SOR) and other members of the child's team as appropriate, shall be responsible for the decision to refer a child for any diagnostic, psychological, and/or psychiatric assessment.

Should a substitute caregiver, service provider, parent, or other agency employee believe a diagnostic, psychological, and/or psychiatric assessment is necessary, this information shall be referred to the WOR for follow-up and determination of appropriateness.

At no time shall the substitute caregiver or other employee make this determination or make any arrangements for any diagnostic, psychological, and/or psychiatric assessment independent of discussion with and direction from the WOR/SOR.

Once the decision is made to have a child undergo a diagnostic, psychological, and/or psychiatric assessment, the WOR informs the substitute caregiver and the Health Services nurse that an assessment is requested.

Substitute Caregiver Responsibilities:

Once the substitute caregiver is advised the agency is requesting a diagnostic, psychological, psychiatric assessment be completed, he or she shall:

- schedule a diagnostic, psychological, or psychiatric assessment as recommended and inform the WOR of this date and time;
- inform the child's WOR of date, time and place of appointment, if known prior to the child's appointment, that psychotropic medication(s) may be prescribed;
- inform prescribing physician of LCCS psychotropic policy; notify the child's WOR as soon as possible, when the child's physician prescribes any medication(s) intended to control the child's behavior;
- **not** take the prescription to the pharmacy until after receiving **notification of the Executive Directors Consent from an LCCS Health Services nurse;**
- **obtain and administer** the psychotropic medication in accordance with the doctor's orders for the prescription;
- maintain medications in locked, supervised storage with access limited to authorized individual and in accordance with law, regulation, and manufacturer's instruction;
- maintain medications in original packaging and labeling with the name of person served, medication name, dosage, prescribing physician name, and number or code identifying the written order;
- inform the prescribing physician and follow his/her instructions if a child refuses to take prescribed psychotropic medication(s). Notification should occur as soon as possible but no later than 24 hours;
- inform the WOR if a child refuses to take psychotropic medication(s). Notification should occur as soon as possible. LCCS Intake can be contacted after hours and on weekends;
- accompany child to all medical and therapy appointments;
- notify WOR and LCCS nurse of any medication or physician changes as soon as possible;
- **If the Executive Director does not give consent for the medication, shred or otherwise dispose of the written prescription in a manner that it cannot be utilized in the future;**
- **ensure all medications are provided to respite caregivers or family members during visitation or reunification, and ensure the person receiving the medication is an adult and is provided necessary information such as name/type of medication, purpose of medication, dosage instructions, side effects and the number for the prescribing physician should concerns arise;**
- appropriately dispose of expired or unused medication, syringes, medical waste, or medication no longer needed or prescribed, and are unable to be returned to the pharmacy (according to the Food and Drug Administration's policy); and
- provide the caseworker with the current medications and a list of the current medications at the time of any placement change.

Worker of Record Responsibilities:

- attend the diagnostic, psychological, or psychiatric assessment if a recent assessment has not been completed;
- attend any appointment at which time a psychotropic medication may be prescribed;
- inform prescribing physician of LCCS psychotropic policy and provide a copy to the physician if requested;
- provide the LCCS nurse with the physician's name and address, including all information regarding the medication(s);
- request parental consent for administration of the medication for any child in Interim, Temporary or Legal Custody (PPLA) of the agency.
- notify the nurse of the parental decision;
- notify the substitute caregiver when the LCCS Executive Director has given consent for the administration of the psychotropic medication(s);
- maintain ongoing contact with the substitute caregiver concerning the child's reaction to the medication(s);
- notify the LCCS nurse of any adverse reaction to the medication(s), effectiveness of the medication, changes in the medication treatment or physician's changes; and
- notify the LCCS nurse if a child refuses to take their prescribed psychotropic medication(s); and
- provide the nurse with the current medications and the list of medications at the time of the change of placement screen for documentation.
- at monthly visits, query caregiver about any new medications/changes in prescribed medications and relay any changes to the Health Services nurse;
- participate and provide pertinent information at the Psychotropic Team Meeting for initial medication and reviews.

LCCS Nurses Responsibilities:

- Nursing staff shall communicate with the physician or other qualified medical staff regarding any actual or request for the prescription of psychotropic medication;
- obtain the Medication Authorization form completed by the physician, diagnostic assessment, psychological/psychiatric report and/or other documentation that justifies the need for the medication;
- obtain clarification of the medication request and any additional information which may be necessary for the Executive Director to make his/her decision;
- document the physician's recommendation in SACWIS and in the Health Services log;
- provide the Psychotropic Med Team with medication recommendations for initial medications;
- consult the Health Services Supervisor or LCCS Medical Consultant if there are questions or concerns about the psychotropic medication or the prescription of any

medication or use of any non-prescription medication that may be of concern with any specific child;

- consult the Health Services Supervisor or LCCS Medical Consultant anytime the prescribed medication falls into the "Criteria Indicating Need for Further Review of a Child's Clinical Status" found on pages 5-6 of the **LCCS Psychotropic Medication Parameters**. These parameters are also listed below in the Case Practice Guidelines for easy access;
- obtain the results of the parental consent request from the WOR;
- submit request for the LCCS Executive Director's Authorization on Psychotropic Medication Authorization form after all information is obtained and reviewed;
- notify the WOR, foster home worker (FHW), and the substitute caregiver of approval to start medication administration if consent is given, or notify the WOR, FHW, substitute caregiver, and physician if consent is denied;
- document all information in SACWIS, in the legacy system and the Health Services log, including the consent approval or denial for the medication, the medication name, dosage, route of administration and time lines for administration of the medication;
- create and maintain a Psychotropic Medication file for all children for whom psychotropic medication has been prescribed and approved;
- obtain and document all medication(s) changes and written progress reports from prescribing physician;
obtain written progress reports from the WOR, therapist, and attend family case conference and/or Treatment Team Meeting of children on medication when requested;
- document in the Psychotropic Medication file and SACWIS when a child refuses medication(s);
- participate in Health Services Bi-Annual Psychotropic Review Team Meeting; and
- document at the time of the change of placement screen the names of the medication (s), dosage, remaining medications and pharmacy name.

II. When a child enters LCCS custody TAKING any psychotropic medication:

Worker of Record Responsibilities:

- provide the LCCS nurse with the physician's name and address, including any information regarding the medication(s), if child is taking the medication, and length of time on the medication;
- provide the nurse with bottles of medication at the time of the screening;
- notify the substitute caregiver to continue medication without interruption;
- schedule a diagnostic, psychological, or psychiatric assessment if no current assessment is available; and
- attend the diagnostic, psychological, or psychiatric assessment; and
- provide the nurse with the current medications and the list of medications at the time of the change of placement screen for documentation.

- at monthly visits, query caregiver about any new medications/changes in prescribed medications and relay any changes to the Health Services nurse.

LCCS Nurses Responsibilities:

- **review and document the name of medication (s), dosage, route and timelines of administration at the time of the screening;**
- obtain the Medication Authorization form completed by the physician, diagnostic assessment, psychological/psychiatric report and/or other documentation that justifies the need for medication, including the physician's progress notes for the last 3 months;
- document the physician's name, current medication(s), dosage, route and time in SACWIS and on the Health Services log;
- communicate with the physician or other qualified medical staff regarding any actual or request for the prescription of psychotropic medication;
- notify the substitute caregiver to continue medication without interruption;
- consult the Health Services Supervisor or LCCS Medical Consultant if there are questions or concerns about the psychotropic medication, or the prescription of any medication or use of any non-prescription medication that may be of concern with any specific child;
- consult the Health Services Supervisor or LCCS Medical Consultant anytime the prescribed medication falls into the "Criteria Indicating Need for Further Review of a Child's Clinical Status" found on pages 5-6 of the **LCCS Psychotropic Medication Parameters**. These parameters are also listed below in the Case Practice Guidelines for easy access;
- submit request for the LCCS Executive Director's Authorization on Psychotropic Medication Authorization form after all information is obtained and reviewed;
- notify the WOR, FCW, and the substitute caregiver of the medication approval or notify the WOR, FCW, substitute caregiver, and physician if consent is denied;
- document all information in SACWIS, in the legacy system and the Health Services log, including the consent approval or denial for the medication, the medication name, dosage, route of administration and time lines for administration of the medication;
- create and maintain a Psychotropic Medication file for all children for whom psychotropic medication has been prescribed and approved;
- obtain and document all medication changes and written progress reports from prescribing physician;
- obtain written progress reports from the WOR, therapist, and attend family case conference and/or Treatment Team Meeting of children on medication(s) when requested; and
- document in the Psychotropic Medication file and SACWIS when a child refuses his/her medication(s); and
- document at the time of the change of placement screen the names of the medication (s), dosage, remaining medications and pharmacy name.

Substitute Caregiver Responsibilities:

- maintain medications in locked, supervised storage with access limited to authorized personnel and in accordance with law, regulation, and manufacturer's instruction;
- maintain medications in original packaging and labeling with the name of person served, medication name, dosage, prescribing physician name, and number or code identifying the written order;
- administer the psychotropic medication(s) in accordance with the doctor's orders for the prescription, **only until receiving either the approval or denial for consent of the Executive Director from the LCCS Health Services nurse;**
- **If the psychotropic medication is approved by the Executive Director, continue to administer the psychotropic medication per prescribing physician's instructions.**
- **If the Executive Director denies consent for the medication, stop giving the medication, following any protocols provided by the prescribing physician for the gradual decrease of medication, if necessary, and notify the Health Services nurse when the medication has been stopped completely; and**
- accompany the child to all appointments scheduled prior to custody with the child's prescribing physician and/or mental health therapist;
- schedule an appointment with the prescribing physician and or mental health therapist and accompany the child to this appointment;
- inform the prescribing physician and follow his/her instructions if a child refuses to take prescribed psychotropic medication(s). Notification should occur as soon as possible but no later than 24 hours;
- inform the WOR if a child refuses to take a psychotropic medication(s). Notification should occur as soon as possible. LCCS Intake can be contacted after hours and on weekends;
accompany child to all follow-up appointments;
- **notify WOR and LCCS nurse of any medication or physician changes as soon as possible;**
- **ensure all medications are provided to respite caregivers or family members during visitation or reunification, and ensure the person receiving the medication is an adult and is provided necessary information such as name/type of medication, purpose of medication dosage instructions, side effects, and the number for the prescribing physician should concerns arise; and**
- appropriately dispose of expired or unused medication, syringes, medical waste, or medication no longer needed or prescribed, and are unable to be returned to the pharmacy (according to the Food and Drug Administration's policy).

Psychotropic Review Team Responsibilities:

- bi-annually review those children administered psychotropic medication that meet the

"Criteria Indicating Need for Further Review of a Child's Clinical Status" found on pages 5-6 of the LCCS Psychotropic Medication Parameters; and as noted in the Case Practice Guidelines section of this policy;

- make recommendations based on the specific needs of each individual child.

Periodic Review Requirements:

This policy shall be reviewed with all staff in the Services Division and Health Services every six (6) months on a schedule established by the Manager of Policies/designee.

This policy shall be included as part of the Foster and Kinship Care Manuals.

It is the responsibility of the Manager of Placement Services to ensure that the most up to date policy is included in the Foster Parent Manual.

It is the responsibility of the Manager of DFS to ensure that the most up to date policy is included in the Kinship Care Manual.

CASE PRACTICE GUIDES

Psychotropic medications should be prescribed only by psychiatrists, physicians or Clinical Nurse Specialists (CNS) who are familiar with the use of psychotropic medications within the pediatric population. While exceptions to this do exist, this guideline is meant to limit the prescription of these medications by general family practice doctors or other medical professionals who have limited knowledge of the effects of these medications on the pediatric population. The Health Services Nurse should be able to provide background to the Executive Director, upon his or her request, concerning any medical professional prescribing these medications to children in LCCS Custody.

If parents do not consent to the administration of the medication for any child in Interim or Temporary Custody, or in a Planned Permanent Living Arrangement (PPLA), the Executive Director makes the final decision.

Criteria Indicating Need for Further Review of a Child's Clinical Status

Excerpt from LCCS Psychotropic Medication Parameters:

The following situations indicate a need for further review of a patient's case. These parameters do not necessarily indicate that treatment is inappropriate, but they do indicate a need for further review.

For a child being prescribed a psychotropic medication, any of the following suggests the need for additional review of a patient's clinical status:

1. Absence of a thorough assessment of DSM-V diagnosis in the child's medical record;
2. Four (4) or more psychotropic medications prescribed concomitantly;
prescribing of:
 - two (2) or more concomitant antidepressants
 - two (2) or more concomitant antipsychotic medications
 - two (2) or more concomitant stimulant medications
 - three (3) or more concomitant mood stabilizer medications;
3. The prescribed psychotropic medication is not consistent with appropriate care for the patient's diagnosed mental disorder or with documented target symptoms usually associated with therapeutic response to the medication prescribed;
4. Psychotropic polypharmacy for a given mental disorder is prescribed before utilizing psychotropic monotherapy;
5. The psychotropic medication dose exceeds usually recommended doses;
6. All psychotropic medications prescribed for children age six (6) and under;

7. Prescribing by a primary care provider for a diagnosis other than the following (unless recommended by a psychiatrist consultant):
 - Attention Deficit Hyperactive Disorder (ADHD)
 - Uncomplicated anxiety disorders
 - Uncomplicated depression; and

8. All children who have experienced mental health hospital admissions three or more times during any three month period;

NOTE: For the purpose of this document, polypharmacy is defined as the use of two or more psychotropic medications during the same time period.

RELATED POLICIES and FORMS

LCCS Form #1171 (Psychotropic Medication Authorization)
LCCS Form 8807 (Unusual Incident Report Form)
LCCS Psychotropic Medication Parameters