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| Policy Title: | Psychotropic Medication Policy | | | | |
| Policy Number: | Admin. Policy 009 | Version: | 1 | Effective Date: | 8/2/19 |

Approved By: YFS Operations Team

Date: 08/02/2019

Overview

Description: Policy and procedures for ensuring children’s medical well-being needs are being addressed for all service areas.

Purpose/Rationale: To ensure children’s psychotropic medications are assessed and monitored. To provide information to parents and the court system on the administration of psychotropic medication.

Applicability: Frontline, supervisory, and managerial staff from all child welfare service areas & Nursing; Director & Deputy Director(s)

Definition(s):

- Psychotropic Medication: symptomatic medications that affect attention, emotions, or behaviors.
- ISSI-CW: Integrated Social Services Information - Child Welfare data system utilized by Youth and Family Services. This system is utilized to record referrals, cases, track placements, and document demographic information of families.
- YFS – Youth and Family Services is a child protective services agency under the management of the Mecklenburg County Department of Social Services.

Failure to Comply: Children would not receive appropriate psychotropic medication to address their mental health needs while in foster care. Biological families would lose an opportunity to provide permission and be informed about their child’s utilization of psychotropic medication. The court may cite the agency for negative reasonable efforts which could impact the agency financially.

Policy: The agency must inquire about and document the child’s use of psychotropic medications while the case is open with the agency. Prior to the utilization and administration of the psychotropic medication, the agency must first obtain the parent/legal custodian’s permission. The agency must seek legal assistance if parents cannot be located or if there is a disagreement between the parents to obtain this permission.



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Procedure(s) that apply:

Pre-Custody Services (Investigation, Family Assessment and In-home Services):

- During pre-custody services phase, the YFS Child Welfare Specialist II (CWS) must inquire about the child’s use of psychotropic medications.
 - Investigations/Assessment CWS must document this information in the ISSI-CW data system structured documentation tool.
 - In-home services CWS must inquire about and document this information within their narratives in ISSI-CW.
- During any pre-custody Child and Family Team (CFT) meeting, the facilitator must initiate a discussion of psychotropic medications as part of the CFT meeting process. The CFT meeting facilitator must notate the discussion within the CFT meeting summary document.
- Pursuant to 7B-505.1, the CWS must make reasonable efforts to contact the parent(s) to obtain consent before psychotropic medications are administered; preferably at the pre-custody CFT meeting, or by telephone, email or text. Reasonable efforts must include notifying the parents of relevant medical appointments.
- If a petition is filed on a child during investigations/family assessment or in-home services, the CWS must notify YFS nursing staff of the child’s prescribed psychotropic medication. The agency attorney must notify the court at the 7-day hearing.
- The pre-custody CWS must collaborate with YFS nursing staff to complete the North Carolina Department of Health and Human Services, Division of Social Services, Health History Form 5207. The YFS nurse must scan the form into the agency’s digital record.
- If a child has been prescribed a psychotropic medication and taking the medication, the agency must ensure that the child continues this medication schedule until the next scheduled court hearing.

Direct Custody Cases without Current Agency Involvement:



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- Pursuant to 7B-505.1, the CWS must make reasonable efforts to contact the parent(s) to obtain consent before psychotropic medications are administered; preferably at the direct custody court hearing or the post-custody CFT meeting, or by telephone, email or text. Reasonable efforts must include notifying the parents of relevant medical appointments.
- The CWS making the first contact with the child must inquire about and document about the child’s use of any psychotropic medication.
- The CWS making the first contact must obtain any prescribed medications from the court representative or detention representative.
- The CWS must collaborate with YFS nursing staff to complete the North Carolina Department of Health and Human Services, Division of Social Services, Health History Form 5207. The YFS nurse must scan the form into the agency’s digital record.
- At the first contact with the parents, the legal custodian or CWS will attempt to gain written consent on the [YFS Well-Being Consent Form 2016](#) for the administration of the psychotropic medication.
- If a child has been prescribed a psychotropic medication and is taking the medication, the agency must ensure that the child continues this medication schedule until the next scheduled court hearing.

Post-Custody Services:

- The post-custody CWS must consult with the pre-custody CWS regarding the child’s psychotropic medication needs and must review the agency’s record. The post-custody CWS must document the transfer staffing within the agency’s record.

Consent:

- Pursuant to 7B-505.1, the CWS must make reasonable efforts to contact the parent(s) to obtain consent before psychotropic medications are administered; preferably at the pre-custody CFT meeting, or by telephone, email or text. Reasonable efforts must include notifying the parents of relevant medical appointments. Parents must inform the social worker within 24 hours of notification as to whether they are able to attend the medical



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appointment and whether they consent to the use of the psychotropic medication. The CWS or parent consenting to the use of the medication must participate in each appointment of the child with the provider of the medical care. If the CWS is unable to attend the medical appointment he/she must communicate with the foster parent within 48 hours regarding the recommendations.

- If the parent or legal guardian is unable to attend the medication appointment and changes are recommended to the psychotropic medication, parental consent is needed before changes can be made.
- The post-custody CWS must advise the parent or former custodian of any appointment with the treatment provider and encourage the parent or former custodian to attend the appointment. This notification and efforts to notify must be documented within the agency's digital record.
- Pursuant to 7B-505.l(d) the parent(s) must be notified of the initial prescription for psychotropic medication after the medication has been prescribed, and informed of any additional recommendation for psychosocial therapies, behavior strategies, and other non pharmacological interventions.
- Parents have the right to revoke consent and request a review by the presiding Judge. The revoking parent(s) must communicate with the prescribing professional before the next court hearing and express to the Court why it is not in the juvenile's best interest to be on the prescribed medication. The revoking parent(s) must demonstrate that they have been educated by the medical/treating/evaluating or prescribing professional on the relevant diagnosis, medication, and treatment. The Judge shall consider this evidence in determining whether the current treatment is in the best interest of the juvenile.
- YFS is not required to provide notice to a parent under the following circumstances:
 - The parent has failed to give the department current contact information and cannot be located.



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- The parent has executed an affidavit of relinquishment of parental rights and the revocation period have expired. Their parental rights to the child who is the subject of the YFS matter before the court have been terminated.

Disagreement Between Parents and/or YFS:

- A second opinion may be requested by any party who disagrees with the recommendation of the medical professional, and until such time as the second opinion is rendered no medications shall be initiated or ceased.
- In the event that parent(s) and/or YFS do not agree, the matter must be set for a hearing before the presiding Judge who will make the ultimate determination; only after a second opinion is rendered, unless a delay in obtaining the second opinion will cause *substantial* harm to the child. During the hearing the Judge shall hear arguments from parent(s), Guardian *ad litem* (GAL), YFS, or other witnesses; as well as review any written medical and/or legal information regarding the prescription of psychotropic medications and any non-pharmacological treatments.

Monthly Foster Care Contact Visits:

- During the child’s monthly visit, the post-custody CWS must inquire about the child’s use of the psychotropic medication. The post-custody CWS must inquire about how the medication and other intervention(s) are assisting the child in managing his/her diagnosis. These conversations must be noted within the agency’s digital system and reported to the court through the court summary.
- When the child’s monthly contact with the CWS occurs within the child’s foster home, the post-custody CWS must review the foster home’s medication administration record and **take a picture of the medication administration record with the agency’s phone.** The post-custody CWS must **send the picture of the medication administration record** to the assigned YFS nurse.

Medication Management Appointments:

- During the child’s medication management appointments with the treatment provider, the post-custody CWS must ensure that the YFS Outpatient Psychotropic Medication



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Form is completed by the treatment provider. The best way to accomplish this is for the CWS or YFS nurse to attend the appointment. But, if that cannot happen, the foster parent or caregiver must take the form with them to be filled out.


- During or after the child’s medication management appointment where he parent or former custodian was unable to attend, the post-custody CWS must contact the parent or former custodian via telephone or text to receive verbal consent, as well as provide a copy of the YFS Outpatient Psychotropic Medication Form to the parent or former custodian. The post-custody CWS must request that the parent or former custodian complete and sign the YFS Outpatient Psychotropic Medication form as soon as possible. The post-custody CWS must send the YFS Outpatient Psychotropic Medication form to the assigned YFS nurse.
- If there is a change in the psychotropic medication and the parents or former custodians are not in agreement, then the post-custody CWS must contact the assigned YFS attorney for direction. The post-custody CWS must provide the YFS attorney with information regarding the need for the psychotropic medication and the interventions being utilized to address the child’s diagnosis.

Child and Family Team Meetings:

- During any Child and Family Team Meeting the post-custody CWS, in collaboration with the YFS nursing staff, must provide to the team information regarding the child’s diagnosis and the interventions that are in place to address the child’s diagnosis. This information must be documented in the Child and Family Team meeting notes.
- When the court divests custody from the Department to the parents/caretakers, the post-custody CWS must provide to the parents/caretakers information regarding the psychotropic medication information and note this in the YFS digital record.

Form(s) that apply:

- [YFS Well-Being Consent Form 2016](#)
- [North Carolina Department of Health and Human Services/ Division of Social Services, Health History Form 5207, 2/2016](#)
- [YFS Outpatient Psychotropic Medication Form, 10-2016, Spanish and English](#)
- North Carolina Family Assessment of Strengths and Needs, DSS 5229

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- Laws, www.ncleg.net :
 - Foster Connections and Increasing Adoptions Act of 2008.
 - Child and Family Services Improvement and Innovation Act of 2011.
 - North Carolina General Statute 7B-505, Judicial oversight over the administration of psychotropic medications and treatment and youth in foster care.
 - North Carolina General Statute 7B-505.1, Duties of person taking juvenile into temporary custody;
 - North Carolina General Statute 7B-903.1 Juvenile placed in custody of a department of social services

Reference(s):

- North Carolina DHHS Manual Section 1201, Out of Home Placement Services; V. C. 4. Medical Needs and the Child Health Status Components
- Practice & Policy Brief: Psychotropic Medication and Children in Foster Care: Tips for Advocates and Judges, October 2011 pamphlet, JoAnne Solchany, PhD, ARNP, American Bar Association Center on Children and the Law.
- Mecklenburg County Court: Psychotropic Medications and Youth in Foster Care, Mecklenburg County YFS Policy, 2016.
- Psychotropic Medications and Youth in Foster Care, Mecklenburg County Court Policy, 2016.

Policies: YFS Well-Being; Psychotropic Medication, DRAFT 2017

Contact(s):

Nursing Supervisor
Policy & Practice Model Supervisor

Policy History:

Developed 4/10/19.