

 <p style="text-align: center;">County of Sacramento Department of Health Services Division of Behavioral Health Services Policy and Procedure</p>	Policy Issuer (Unit/Program)	BHS-CMH-YDF
	Policy Number	07-01
	Effective Date	10/2009
	Revision Date	07/2017
Title: Psychotropic Medication Guidelines		Functional Area: Psychotropic Medication
Approved By:		
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Background/Context:

Title 15, Section 1439 requires the Youth Detention Facility (YDF) health administrator/responsible physician, in cooperation with the behavioral/mental health director and the facility administrator, to develop and implement written policies and procedures governing the use of voluntary and involuntary psychotropic medications. Section 1439 allows for a youth who is found by a health care provider to be an imminent danger to themselves or others by reason of a mental disorder may be involuntarily given psychotropic medication immediately for the preservation of life or the prevention of serious bodily harm and when there is insufficient time to obtain consent from the parent, guardian or court before the threatened harm would occur. It is not necessary for harm to take place or become unavoidable prior to initiating treatment.

Definitions:

Psychotropic medication: those drugs that are used to treat psychiatric symptoms. Drugs used to reduce the toxic side-effects of psychotropic medications are not included.

Purpose:

The objective of this policy and procedure is to establish the protocol by which Juvenile Justice Institutions Mental Health Team (JJIMHT) physician(s) utilize to govern the use of psychotropic medications within YDF.

Details:

1. General Provisions
 - A. Psychotropic medication(s) is/are prescribed as part of a treatment plan for residents who have identified psychiatric disorders or specific emotional, cognitive and/or behavioral symptoms.
 - B. Physicians contracted with Sacramento County Division of Behavioral Health Services (DBHS) or employed by Juvenile Correctional Health Services may issue orders for youth detained in the YDF.
 - C. Psychotropic medication(s) will be prescribed and dispensed in compliance with all appropriate guidelines, procedures, regulations and laws governing their use.

- D. Administration of psychotropic medication is not allowed for coercion, discipline, convenience or retaliation.
 - E. Psychotropic medication shall not be administered to a youth, absent an emergency, unless informed consent has been given by the legally authorized person or entity.
 - I. Youth who are on psychotropic medication(s) prescribed in the community may be continued on their medication(s) when ordered by the physician pending re-evaluation and further determination by the JJIMHT program psychiatrist or Juvenile Correctional Health Services physician.
 - II. Juvenile Correctional Health Services nursing staff will initiate verification of psychotropic medication(s), will notify the physician upon receipt of verification and refer the youth for psychiatric follow-up.
 - III. The JJIMHT program psychiatrist or Juvenile Correctional Health Services physician will obtain informed consent from the legally authorized person or entity within 72 hours of the initial intake to the YDF.
 - F. If, upon intake, a youth is under the influence of or has reported a history of recent illicit substance use and relates he/she is taking regularly prescribed psychotropic medication(s), or the youth has not taken prescribed medication(s) over the past several days, the physician may exercise his/her clinical judgment as to whether or not to continue the medication(s) pending further psychiatric evaluation.
 - G. Youth will have a current psychiatric evaluation, have a current physical examination, laboratory evaluation (if applicable) and female youth will be tested for pregnancy prior to receiving psychotropic medication(s). No new psychotropic medication(s) shall be ordered without an on-site psychiatric evaluation.
2. Consent for Psychotropic Medication(s)
- A. Informed consent forms shall be signed by the legally authorized person or youth over the age of 18 years and the treating physician.
 - I. Telephone consent is permissible; however, the consent should be signed as soon as possible by the legally authorized person.
 - II. The treating physician will document consent was obtained over the phone and have the verbal consent witnessed by a Juvenile Correctional Health Services staff member. This staff member will also sign the informed consent form.
 - III. The legally authorized person will be informed the form will be available for signature upon their next visit to the YDF. The names of persons needing to sign medical forms will be provided to the Visiting Center staff to prompt the authorized person to request the form for signature.
 - IV. Signed informed consent forms will be routed to the JJIMHT Senior Office Assistant (SrOA) for scanning into the youth's electronic mental health record (EHR). The form will then be routed to the Medical Clinic and scanned into the youth's electronic medical record.
 - V. Informed consent forms that for which verbal consent was given and remain unsigned by the legally authorized person will be routed in the same manner as in IV above upon release of the youth from the YDF.

- B. For youth who are dependents of the Juvenile Dependency Court or for whom the person legally authorized to consent for psychotropic medication(s) cannot be contacted, the treating physician will request informed consent from the relevant court.
 - I. The physician will complete the JV220(A) form of the Judicial Council of California Application for Psychotropic Medication. The completed form will be routed to the JJIMHT SrOA for submission to the appropriate court. The SrOA will serve as the liaison with the court during the application process.
 - II. The JV220(A) will be scanned into the youth's mental health ERH and medical records.
 - III. Upon receipt of a granted JV220, the SrOA will scan the form into the youth's mental health EHR and forward the form to the physician for review and to be scanned into the youth's medical EHR.
 - IV. The SrOA will monitor granted JV220s and inform the physician of any JV220 that will expire within 30 days to ensure there will not be an interruption of treatment.
- 3. Monitoring of Youth on Psychotropic Medication(s)
 - A. Youth taking psychotropic medication(s) will be monitored by the JJIMHT program psychiatrist every 4-6 weeks or earlier if needed.
 - B. The JJIMHT program psychiatrist will conduct all required laboratory evaluations as indicated and/or request current laboratory evaluations from community providers for youth entering the facility on medication(s) requiring laboratory results.
 - C. The JJIMHT program psychiatrist and/or Juvenile Correctional Health Services physician may discontinue psychotropic medication(s) if the youth consistently refuses to take the medication(s) as prescribed or otherwise misuses prescribed medication(s).
 - D. JJIMHT clinicians will monitor the clinical effects of psychotropic medication(s) during the course of their customary duties.
 - E. The Juvenile Correctional Health Services pharmacist will monitor utilization patterns for psychotropic medications and provide the results to the Sacramento County Medication Review Committee twice per calendar year. The results will also be available to JJIMHT Program Coordinator, program psychiatrist and Juvenile Correctional Health Services supervisory staff.

Related Policies:

BHS-CMH-YDF-02-02-Informed Consent

BHS-CMH-YDF-07-03-Emergency Administration of Psychotropic Medication

BHS-CMH-YDF-07-04-Physician's Orders

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