



# COUNTY OF LOS ANGELES OFFICE OF CHILD PROTECTION

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February 23, 2017

Ms. Elaine M. Howle, CPA  
State Auditor  
621 Capitol Mall, Suite 1200  
Sacramento, CA 95814

Dear Ms. Howle:

On behalf of Los Angeles County, the Office of Child Protection (OCP) is providing the latest update on Los Angeles County's efforts to implement the recommendations contained in the August 2016 report entitled, "California's Foster Care System: The State and Counties Have Failed to Adequately Oversee the Prescription of Psychotropic Medications to Children in Foster Care."

As noted in our response of October 20, 2016, Los Angeles County agreed with the four main recommendations in the State Auditor's report. Specifically, these recommendations were:

1. Counties should monitor requests for authorizations of psychotropic medications.
2. Counties should ensure court approval or parental consent prior to prescribing psychotropic medications.
3. Counties should ensure physicians' follow-up within 30 days of their prescribing a new psychotropic medication.
4. Counties should ensure that proper mental health services are received along with psychotropic medications.

As noted in our 90-day report, Los Angeles County's efforts in relation to the prescription and administration of psychotropic medications for child welfare and juvenile justice youth are being coordinated by the Psychotropic Medication Workgroup (Workgroup) convened by the OCP last July. The current group has met monthly since then.

The Workgroup's primary focus has been the implementation of the new forms mandated by the California Judicial Council to be used during the process of prescribing and administering psychotropic medication for the above-mentioned children and youth. The Workgroup has redrafted protocols for the approval and monitoring of the use of psychotropic medications. The new forms themselves are currently in use, although the formal implementation of the new protocols is scheduled for April 15 so that all entities can receive appropriate training on the protocol changes.

Elaine M. Howle  
February 23, 2017  
Page 2

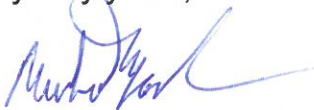
While the new Judicial Council forms provide more information than previous forms—specifically with respect to enhancing input from multiple partners, ensuring that alternatives to medication are considered, and ensuring that other mental health services accompany the use of the medications—the Workgroup has focused on articulating that process. Protocols now mandate agency input and specify how youth, caregivers, parents, tribes, attorneys, and others can provide input during the approval and administration phases. Notable changes include the inclusion of PHNs in working with social workers and caregivers to assist with follow-up appointments, advising caregivers and social workers, monitoring medication effects, and recording activities. Our protocols now require 30-day follow-ups (as noted in the State Auditor’s report) to be documented in progress reports ordered by Juvenile Court judges 45 days after they approve any new medication or an increase in dosage of a previously authorized medication. Our next progress report for the State Auditor will include our efforts at the complete implementation of the new procedures.

Our October response referenced a standing order issued by the Presiding Judge of the Juvenile Court requiring the Department of Mental Health’s credentialing of prescribers of psychotropic medications for children and youth in group homes. That process has been implemented. The report also referenced the development of an electronic system to track the use of psychotropic medications. Los Angeles County has been actively involved with the California Department of Social Services in its efforts to accomplish this through the state’s development of its new CWS/NS, currently being built to replace the CWS/CMS case management option.

At its meeting this month, the Workgroup will focus on ensuring that all children and youth being administered psychotropic medication in both the child welfare and juvenile justice systems are identified, including those in juvenile halls and camps. The Workgroup will also focus on medication issues involving transition-age youth in both systems.

We will continue to update the State Auditor on Los Angeles County’s efforts to protect and serve our children and youth with respect to this very important issue. If you have any questions or concerns, please contact me at (213) 893-1152, or via e-mail at [mnash@ocp.lacounty.gov](mailto:mnash@ocp.lacounty.gov).

Very truly yours,



Judge Michael Nash (Ret.)  
Executive Director  
Office of Child Protection



CHAMBERS OF  
**MICHAEL I. LEVANAS**  
PRESIDING JUDGE

JUVENILE DIVISION  
**The Superior Court**  
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## **Psychotropic Medication Authorization Process**

### **Dependency Court**

#### **1. Physician Duties**

- a. Physician completes JV-220A--Prescribing Physician's Statement
- b. Physician faxes JV-220A to DCFS Psychotropic Medication Application (PMA) unit
- c. If the request is from the same physician to continue a medication at the same dosage previously authorized, the physician may use the JV-220B--Physician's Request to Continue Medication form in lieu of the JV-220A

#### **2. DCFS PMA Unit**

- a. Receives forms and issues log number
  - i) Returns incomplete or illegible forms to physician
  - ii) Beginning April 15, 2017, rejects earlier version of JV-220A
- b. JV-220A or JV220B and JV-220 are sent to CSW and PHN. The CSW and PHN will collaborate to collect information to respond to questions 7 and 9 and the CSW completes the JV-220 and returns it to DCFS PMA unit within two business days of receipt
- c. Upon receipt of JV-220 from CSW, PMA unit sends to parent/guardians, tribe (if applicable), and the child's caregiver a letter stating that a physician is asking to treat the child's emotional or behavioral problems by beginning or continuing the administration of a psychotropic medication, and the name of the psychotropic medication. The letter must include a statement that the application is pending before the court. The letter must also state that it is accompanied by a copy of the JV-217--Info form, the JV-219--Statement About Medicine Prescribed form, and the JV-222--Input on Application for Psychotropic Medication form.

The letter will further state that parent/guardians, tribe (if applicable), and caregivers should complete and return the JV-219 and/or the JV-222 form to the court within four days of receipt of the letter, if they wish to provide input. The PMA unit will provide a self-addressed, stamped envelope for that purpose.

- d. In the letter and packet to the child's parent/guardians, tribe (if applicable), and caregiver, the PMA unit will include the JV-218—Child's Opinion form with instructions that the child—if he or she wishes to provide input—may complete and submit the form to the court in a second self-addressed stamped envelope, also provided by the PMA unit<sup>1</sup>
- e. PMA unit completes page 1 of JV-221—Proof of Notice Application Regarding Psychotropic Medication
- f. JV-220, JV-220A, page 1 of JV-221, and copies of letter sent to parents/guardians, tribe (if applicable), and caregiver are faxed to Dependency Court Psychotropic Desk

### **3. Psychotropic Desk Duties—Days 1 and 2**

- a. Receives forms
- b. Enters information into psychotropic medication tracking log
- c. Validates case information in JADE
- d. JV-217, JV-218, JV-219, JV-220, JV-220A or JV-220B and JV-222 are given to child's attorney
- e. JV-217, JV-219, and JV-222 are given to CASA if case is on weekly case list submitted by CASA
- f. JV-217, JV-219, JV-222, and a copy of the parents' notification letter are given to the parents' attorneys<sup>2</sup>
- g. Page 2 of JV-221 is completed
- h. JV-220 and JV-220A or JV-220B are given to Juvenile Court Mental Health Services unit (JCMHS)

### **4. JCMHS Duties—Days 2 through 4**

- a. JCMHS reviews JV-220 and JV-220A or JV-220B and returns them to Psychotropic Desk with recommendations/comments

### **5. Psychotropic Desk Duties—Days 2 through 4**

- a. Upon receipt of forms from JCMHS, clerk enters date into log
- b. Clerk pulls file for case

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<sup>1</sup> The child's attorney can work with the child to complete the JV-218 before the Court makes its decision, or the attorney can work with the child to complete the form for submission at the time of the 40-day progress report. If an urgency exists after the Court has made its decision, the child's attorney can also walk the matter on to Court.

<sup>2</sup> Parents' attorneys should contact the parents to inquire/remind/assist them in providing input to the Court.

- c. Clerk gives copy of JCMHS recommendation to child's attorney
- d. Clerk provides to court JV-220, JV-220A or JV-220B, JV-221 (pages 1 and 2), JCMHS recommendation/comment form, any JV-218, -219, -222 forms received, and JV-223—Order Regarding Application for Psychotropic Medication

**6. Judicial Officer Duties—Day 7**

- a. Court receives form and completes JV-223 (grant, deny, set hearing)
  - i) As needed, judicial officer must complete form in absence of regular judicial officer
  - ii) If Court is not staffed, case must be delivered to buddy court or Presiding Judge if buddy-court judicial officer is absent
- b. If matter is set for hearing, court must complete new JV-223 form following that hearing
- c. For new medications or increased dosages approved by the Court, Court must order 40-day progress report
- d. Court must wait until Day 7 to rule on request in order to allow sufficient time for any JV-218, -219, -222 forms to be submitted.

**7. Court Assistant/Judicial Assistant Duties—Day 7**

- a. After Court completes JV-223, Court Assistant makes one copy of signed JV-223 and delivers to Psychotropic Desk
- b. Court Assistant places JV-218, JV-219, JV-220, JV-220A, JV-221, JV-222, and JV-223—plus JCMHS recommendation/comment forms—in child's confidential legal envelope in the court file
- c. Court Assistant returns file to courtroom or the shelf
- d. If Court sets matter for hearing, Judicial Assistant notices all parties, JCMHS, and CASA (if applicable) with JV-223

**8. Psychotropic Desk Duties—Days 7 and 8**

- a. Clerk tracks the date JV-223 is received from courtroom
- b. Clerk provides copies of JV-223 to child's attorney, parents' attorneys, and CASA (if applicable)
- c. Clerk provides copies of JV-223 to JCMHS, DCFS PMA unit, and prescribing physician

**9. DCFS PMA Unit–Days 7 and 8**

- e. Upon receipt of completed JV-223, PMA unit enters it into CWS/CMS
- f. Copy of JV-223 provided to CSW and public health nurse
- g. Copy of JV-223, JV-220, last two pages of JV-220A or JV-220B, and all medication information sheets provided to child's caregiver within two business days



CHAMBERS OF  
**MICHAEL I. LEVANAS**  
PRESIDING JUDGE

JUVENILE DIVISION  
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(323) 307-8030

February 22, 2017

**TO:** All Dependency Court Judicial Officers and All Interested Parties

**FROM:** Michael I. Levanas, Presiding Judge  
Los Angeles County Juvenile Courts

**SUBJECT: PSYCHOTROPIC MEDICATION MONITORING PROTOCOL**

Attached is the new Dependency Court Psychotropic Medication Monitoring Protocol. It takes effect on April 15, 2017. Please read it carefully and note the following:

1. It applies to all *new* requests to administer psychotropic medication to dependent children or requests to increase the dosage of a previously approved medication.
2. Judicial officers will schedule a progress report by completing line 7 of the JV-223—Order Regarding Application for Psychotropic Medication (see attached) with a 45-day date.
3. All judicial assistants must check each JV-223 to schedule the matter on calendar.
4. Children's attorneys, parents' attorneys, County Counsel, DCFS, PHNs and CASA volunteers on such cases must note the progress report date after they receive the JV-223 form. It is the only notice they receive.
5. Following the 45-day Progress Report, future progress reports shall be within the discretion of each judicial officer.
6. All progress reports shall utilize the JV-224 form.

MIL:ns  
Attachments



CHAMBERS OF  
**MICHAEL I. LEVANAS**  
PRESIDING JUDGE

JUVENILE DIVISION  
**The Superior Court**  
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## Dependency Court Psychotropic Medication Monitoring Protocol

### Introduction

Many children under the jurisdiction of the Dependency Court in Los Angeles are being administered psychotropic medication(s) approved by the Court pursuant to Welfare and Institutions Code section 369.5; California Rules of Court, Rule 5.640; and Los Angeles Superior Court Local Rules, Rule 7.7. To consistently monitor the well-being of these children receiving these medications, the following protocol has been developed by our Psychotropic Medication Committee.

### Protocol

1. Whenever the Court approves a request to administer to a dependent child a new psychotropic medication, or an increased dosage of an already approved medication, the Court shall write in line 7 of JV-223—Order Regarding Application for Psychotropic Medication a date 45 days after the approval date. The judicial assistant shall proceed to calendar the matter.
2. Following the Court's approval of a request to administer psychotropic medication to a dependent child, the Court's Psychotropic Desk Clerk provides a copy of JV-223 to the DCFS PMA Unit, JCMHS, the prescribing physician, the child's attorney, parents' attorneys, CASA (if applicable), and County Counsel.
3. Upon receipt of the JV-223, the DCFS PMA Unit shall notify the CSW, SCSW, and PHN that a new PMA has been approved and that a progress report regarding the medication has been scheduled for a 45-day date. The PHN shall contact the child's caregiver to make sure the caregiver is aware of the purpose of the medication, potential side effects, and what action to take in the event of a negative reaction to the medication.<sup>1</sup> The PHN will also inform the caregiver that the child must be seen by the prescribing physician within 30 days of starting the medication. If necessary, the PHN will work with the caregiver to ensure that such a visit has been scheduled. The PHN shall record this activity in the CWS/CMS contact notebook.

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<sup>1</sup> While this information should have been provided by the prescribing physician, this action offers an additional safeguard for the child.



4. Two weeks after the initial contact, the PHN shall contact the caregiver and the child and inquire about the effects, if any, of the medication. The PHN shall work with the caregiver and the child's CSW to ensure that any necessary action occurs. The PHN will also verify the date for the child's follow-up visit with the prescribing physician and document this activity in the CWS/CMS contact notebook.
5. On the date established by the Court for the progress report, DCFS shall report, using the JV-224 form, whether the child is taking the medication<sup>2</sup>; any perceived effects of the medication, positive or negative; any necessary steps that have been taken in light of the perceived effects; and the date of the follow-up visit with the prescribing physician. At a minimum, the CSW and PHN shall have communicated with the caregiver and the child and shall indicate the dates of those communications in the JV-224 submitted to the court by DCFS.
6. Future progress reports shall be within the discretion of the Court and shall be submitted on the JV-224 form.
7. After each monthly visit with the child, the CSW shall document within CWS/CMS the results of its inquiry with the child, caregiver, and other relevant persons such as family members, teachers, etc., regarding any perceived effects of the psychotropic medication. The CSW shall consult with the PHN if they receive reports of any negative perceived effects of the medication and the PHN shall review, interpret and document to ensure that any adverse effects are promptly brought to the attention of the prescribing physician.
8. It is important to note that every court report, at every stage of the proceedings, must address the well-being of every child. Required information includes reporting on every medication the child is taking; how the child is doing on the medication(s); how the child feels on the medication(s); and whether or not the medication is successfully treating the targeted symptoms. Court reports should also address how the doctor thinks the child is responding to the medication. This information should be attached to the court report by using the JV-224 form.

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<sup>2</sup> If a child is refusing to take the medication, this refusal is a therapeutic issue that should be addressed, among others, by the caregiver, the physician, and the child. In addition, upon referral, the Juvenile Court Mental Health Services Unit may provide assistance.



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## **Psychotropic Medication Authorization Process**

### **Delinquency Court**

#### **1. Physician Duties<sup>1</sup>**

- a. Physician completes JV-220A–Prescribing Physician’s Statement
- b. Physician faxes JV-220A to Probation Placement unit
- c. If the request is from the same physician to continue a medication at the same dosage previously authorized, the physician may use the JV-220B–Physician’s Request to Continue Medication form in lieu of the JV-220A.

#### **2. Probation Placement Unit**

- a. Receives forms and issues log number; ensures that case number appears on all pages
  - i) Returns incomplete or illegible forms to physician
  - ii) Beginning April 15, 2017, rejects earlier version of JV-220A
- b. JV-220A or JV-220B and JV-220 are sent to youth’s probation officer, who completes JV-220 and returns it to Probation Placement unit within two business days of receipt
- c. Upon receipt of JV-220 from youth’s probation officer, Probation Placement unit sends to parent/guardians, tribe (if applicable), and the youth’s caregiver a letter stating that a physician is asking to treat the youth’s emotional or behavioral problems by beginning or continuing the administration of a psychotropic medication, and the name of the psychotropic medication. The letter must also include a statement that the application is pending before the court. In addition, the letter must state that it is accompanied by a copy of the JV-217–Info form, the JV-219–Statement About Medicine Prescribed form, and the JV-222–Input on Application for Psychotropic Medication form.

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<sup>1</sup> The PMA process is required for all youth who have been removed from the physical custody of the parent under WIC 726 and placed into foster care. It should also be used for any youth in juvenile hall or probation camp when the parents are “whereabouts unknown” or when the agency seeks to override a refusal of parents to authorize the administration of a psychotropic medication.

The letter shall instruct the parent/guardians, tribe (if applicable), and caregivers to complete and return the JV-219 and/or the JV-222 form to the court within four days of receipt of the letter, if they wish to provide input. The Probation Placement unit will provide a self-addressed, stamped envelope for that purpose.

- d. The Probation Placement unit completes page 1 of JV-221–Proof of Notice: Application Regarding Psychotropic Medication
- e. JV-220, JV-220A or JV-220B, page 1 of JV-221, and copies of the letter sent to parents/guardians, tribe (if applicable), and caregivers are faxed to the Delinquency Court Psychotropic Desk at the appropriate Delinquency Court location listed below:

LOCATION	FAX NUMBER
Compton	310 898-2796
Eastlake	562 637-0754
Inglewood	562 637-0725
Lancaster	562 753-0461
Long Beach	562 753-0920
Las Padriños	562 753-0437
Pomona	562 753-0654
Sylmar	562 753-0532

**3. Court Psychotropic Desk Duties—Days 1 and 2**

- a. Receives forms
- b. Enters information into psychotropic medication tracking log
- c. Validates case information in JAI
- d. JV-217, JV-218, JV-219, JV-220, JV-220A or JV-220B, and JV-222 are given to youth’s attorney in a manner appropriate for each Delinquency Court location<sup>2</sup>
  - i) If the youth is a crossover youth (WIC 300/602) in a probation placement with Probation as lead agency, youth’s delinquency attorney should inform youth’s dependency attorney.
- e. Pages 2 and 3 of JV-221 are completed

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<sup>2</sup> The youth’s delinquency attorney shall work with the youth to complete the JV-218–Child’s Opinion form prior to the court’s decision on Day 7 or by the 45-day progress report, unless circumstances merit walking the matter on to court at an earlier time.

- f. JV-220 and JV-220A or JV-220B are given to the Juvenile Court Mental Health Services unit (JCMHS)

**4. JCMHS Duties—Days 2 through 4**

- a. JCMHS reviews JV-220 and JV-220A or JV-220B and returns them to the Court Psychotropic Desk at the appropriate Delinquency Court location with recommendations/comments

**5. Court Psychotropic Desk Duties—Days 2 through 4**

- a. Upon receipt of forms from JCMHS, clerk enters date into tracking database
- b. Desk clerk retrieves court file or prints JAI printout if file cannot be found
- c. Desk clerk provides copy of JCMHS recommendation to youth's attorney
- d. Clerk provides to court JV-220, JV-220A or JV-220B, JV-221 (pages 1 and 2), JCMHS recommendation/comment form, any JV-218, -219, -222 forms received, and JV-223—Order Regarding Application for Psychotropic Medication

**6. Judicial Officer Duties—Day 7**

- a. Court receives form and completes JV-223 (grant, deny, set hearing)
  - i) As needed, judicial officer must complete form in absence of regular judicial officer
  - ii) If Court is not staffed, case must be delivered to Delinquency Court location supervising site judge or other open court at the location if the supervising site judge is absent
- b. Court must wait until Day 7 to rule on request, to allow sufficient time for any JV-218, -219, -222 forms to be submitted.
- c. If matter is set for hearing, court must complete new JV-223 form following that hearing
- d. For new medications or increased dosages approved by the Court, Court must order 45-day progress report

**7. Court Assistant/Judicial Assistant Duties—Day 7**

- a. After Court completes JV-223, Judicial Assistant makes one copy of signed JV-223 and delivers to Court Psychotropic Desk
- b. Judicial Assistant places JV-218, JV-219, JV-220, JV-220A or JV-220B, JV-221, JV-222, and JV-223 form—plus JCMHS recommendation/comments—in youth's confidential legal envelope in the court file
- c. Judicial Assistant returns file to Court Psychotropic Desk

- d. If Court sets matter for hearing, Judicial Assistant notifies all parties and JCMHS with JV-223

**8. Psychotropic Desk Duties—Days 7 and 8**

- a. Clerk tracks date JV-223 is received from courtroom
- b. Clerk provides copies of JV-223 to youth's attorney, JCMHS, Probation Placement unit, and prescribing physician
  - i) If the youth is a crossover youth (WIC 300/602) in a probation placement with Probation as lead agency, youth's delinquency attorney should inform youth's dependency attorney.
- c. Clerk returns file to courtroom or the shelf

**9. Probation Placement Unit Duties—Days 7 and 8**

- a. Copy of JV-223 provided to youth's probation officer and public health nurse
- b. Copy of JV-223, JV-220, the last two pages of JV-220A or JV-220B, and all medication information sheets provided to youth's caregiver within two business days



CHAMBERS OF  
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February 22, 2017

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**TO:** All Delinquency Court Judicial Officers and All Interested Parties

**FROM:** Michael I. Levanas, Presiding Judge  
Los Angeles County Juvenile Courts

**SUBJECT: PSYCHOTROPIC MEDICATION MONITORING PROTOCOL FOR  
DELINQUENT YOUTH IN SUITABLE PLACEMENT**

Attached is the new Psychotropic Medication Monitoring Protocol for Delinquent Youth in Suitable Placement. It takes effect on April 15, 2017. Please read it carefully and note the following:

1. It applies to all *new* requests to administer psychotropic medication to delinquent youth or requests to increase the dosage of a previously approved medication.
2. It applies *only* to youth in suitable placements; that is, foster homes, group homes (including Dorothy Kirby Center), or relative placements with a suitable placement order.
3. Judicial officers will schedule a progress report by completing line 7 of the JV-223—Order Regarding Application for Psychotropic Medication (see attached) with a 45-day date.
4. All judicial assistants must check each JV-223 to schedule the matter on calendar.
5. Youth's attorneys and Probation must note the progress report date after they receive the JV-223. It is the only notice they receive.
6. Following the 45-day Progress Report, future progress reports shall be within the discretion of each judicial officer.
7. All progress reports shall utilize the JV-224 form.

MIL:ns  
Attachment



CHAMBERS OF  
**MICHAEL I. LEVANAS**  
PRESIDING JUDGE

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## **Psychotropic Medication Monitoring Protocol for Delinquent Youth in Suitable Placement**

### **Introduction**

Many youth under the jurisdiction of the Delinquency Court in Los Angeles are being administered psychotropic medication(s) approved by the Court pursuant to Welfare and Institutions Code section 739.5; California Rules of Court, Rule 5.640; and Los Angeles Superior Court Local Rules, Rule 7.7. To monitor the well-being of these wards of the Delinquency Court who are in suitable placement and receiving these medications, the following protocol will be consistently used.<sup>1</sup>

### **Protocol**

1. Whenever the Court approves a request to administer to a suitably placed ward of the Delinquency Court a new psychotropic medication, or an increased dosage of an already approved medication, the Court shall write in line 7 of JV-223–Order Regarding Application for Psychotropic Medication a date 45 days after the approval date. The judicial assistant shall proceed to calendar the matter.
2. Following the Court's approval of a request to administer psychotropic medication to a ward of the Court, the Court's Psychotropic Desk Clerk provides a copy of JV-223 to the youth's attorney, JCMHS, the Probation Placement Unit, and the prescribing physician.
3. Upon receipt of the JV-223, the Probation Placement Unit provides a copy of JV-223 to the youth's probation officer and caregiver. In addition, the Probation Placement Unit or the youth's probation officer shall contact the caregiver to make sure the caregiver is aware of the purpose of the approved medication, potential negative side effects, what action to take in the event of a negative reaction to the medication, and whether the caregiver knows how to obtain the medication. If the youth is in a

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<sup>1</sup> Pursuant to Welfare and Institutions Code sections 5328.04 and Civil Code section 56.103(d), mental health information submitted to the Court in accordance with court orders for progress reports related to the administration of psychotropic medication is intended to aid Probation and the Court in ensuring appropriate treatment for the youth. This information is inadmissible against the youth in any criminal or delinquency proceeding, and shall not be further disseminated.

4. group home, Probation shall ascertain the name, title, and contact information of the individual(s) responsible for administering the medication and monitoring its effects. Probation will also inform the caregiver that the youth must be seen by the prescribing physician within 30 days of starting the medication. If necessary, Probation will work with the caregiver to ensure that such a visit has been scheduled.
5. Two weeks after the initial contact, Probation shall contact the caregiver and the youth and inquire whether the youth is taking the medication and about the effects, if any, of the medication. Probation shall work with the caregiver and the youth to ensure that any necessary action occurs. Probation will also verify the date for the youth's follow-up visit with the prescribing physician.
6. On the date established by the Court for a progress report, Probation shall report, using the JV-224 form, when the caregiver was contacted by Probation about the medication; whether the youth is taking the medication<sup>2</sup>; the name, title, and contact information of group home personnel administering the medication and monitoring its effects; any perceived effects of the medication, whether positive or negative; any necessary steps that have been taken in light of the perceived effects; and the date of the follow-up visit with the prescribing physician. At a minimum, Probation shall have communicated with the youth and the caregiver and shall indicate the dates of those communications.
7. Future progress reports shall be within the discretion of the Court and shall be submitted on the JV-224 form.
8. Every status review report for suitably placed wards shall contain information on the effects of the psychotropic medication(s). Required information includes reporting on every medication the youth is taking; how the youth is doing on the medication(s); how the youth feels on the medication(s); whether or not the medication is successfully treating the targeted symptoms; and how the prescribing/treating physician thinks the youth is responding to the medication. The report should also indicate who Probation has contacted, including but not limited to the youth, caregiver, teacher, and family members, and the dates of those communications. This information should be attached to the court report by using the JV-224 form.

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<sup>2</sup> If a child is refusing to take the medication, this refusal is a therapeutic issue that should be address, among others, by the caregiver, the physician, and the child. In addition, upon referral, the Juvenile Court Mental Health Services Unit may provide assistance.