

Making Decisions About **Psychotropic Medications**



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This guide will help medical consenters talk to doctors about whether or not to consent to treatment with psychotropic medications.

Most children in the custody of Child Protective Services don't need psychotropic medications. But all abused or neglected children who are removed from their homes suffer emotional stress, and some act out in unhealthy ways. Most children slowly heal and learn to control their behavior with patience, understanding, and clear and consistent rules,

Of course, each child is unique. Some children need medication to help them get better. Some may need it only briefly to relieve stress and deal with trauma. Others may need psychotropic medications long-term to treat mental health disorders.



Psychotropic medications help some children feel better and function at home, in school, and in their daily lives. However, psychotropic medications must always be part of a plan that includes other help such as therapy, consistent house rules, and teaching positive behavior.

There may be other options to consider instead of psychotropic medications.

- ▶ Talk to the child's CPS caseworker and child placing agency's case manager or treatment team about how to manage difficult behavior and help the child deal with emotional stress.
- ▶ Ask the CPS caseworker or agency about classes that can help you deal with a child's behavior (behavior intervention or trauma-informed care).

Find therapy for the child and talk to the therapist about your concerns and how to get help.

- ▶ Work with the child's therapist, school, child-placing agency, caseworker, and others to find interventions that work. Make sure you all use the same interventions.

If the child is still having serious symptoms or isn't getting better, then you should talk to a doctor.





Things you should do before and during the doctor's appointment

Talk to children about why they are seeing a doctor and about medications.

Talking helps children feel more in control, builds trust, and can make treatment more successful. Use words children understand. Children should have more input into decisions about psychotropic medications as they get older but, as medical consentor, you must decide based on what is best for the child. The CPS caseworker will keep the child's birth parents informed about medications their child is taking.

Be ready to tell the doctor about the child's emotions, behavior, and symptoms and let the child share concerns with the doctor.

- ▶ What is the child's story? Can the child tell you what is wrong?

- ▶ Did something new happen to upset the child?
- ▶ How is the child doing in school, with friends, when visiting with family?
- ▶ What behaviors concern you and where do they happen?
- ▶ How often do these behaviors happen and how long do they last? Are these behaviors mild, moderate, severe?
- ▶ What have you tried to deal with these behaviors? What worked or didn't work?
- ▶ How consistent are these interventions?
- ▶ Is the child getting therapy and is it helping?
- ▶ Is the child taking any medications? Have they helped? Were they taken as prescribed? Side effects?



Bring important information to the appointment, like:

- ▶ Evaluations (psychological, educational, developmental, etc.).
- ▶ A list of any medications the child takes or has taken in the past (see the child's Health Passport).
- ▶ The child's abuse and neglect history and placement history.
- ▶ The medical and mental health history of the child and birth family if available.
- ▶ How to contact the child's primary care physician, CPS, therapist or other providers.

Knowing what to expect can help you get ready for the appointment

Always be at appointments about psychotropic medications.

The law requires medical consenters to take part in the child's health care appointments. But, it is especially important for you to participate when psychotropic medications are discussed, prescribed or monitored. The doctor needs to know the child's history and how the child is doing to recommend treatment. You need to talk to the doctor and ask questions to make the best decision before consenting to a psychotropic medication or

other treatment. You have the right to refuse to consent to a psychotropic medication.

Doctors won't prescribe psychotropic medication in every case.

There are many reasons why a doctor may not prescribe a psychotropic medication. A doctor may need more information or want to try other things first—perhaps a special type of therapy.

If the doctor recommends medication, let the child talk about any concerns.

Here are some things you can ask the doctor:

- ▶ Are there other things we should try first?
- ▶ Why do you think this is the best treatment?
- ▶ Has it helped others with similar conditions?
- ▶ What's the medication called and does it have other names?
- ▶ What symptoms does it treat? How long before it works? What are the side effects?
- ▶ Is this medication addictive? Can it be abused?
- ▶ What is the dose and how often should the child take it?
- ▶ Does the child need laboratory tests before or while taking the medication?



- ▶ Does the child need to avoid any foods, medications, or activities?
- ▶ How long will the child need to take this medication and how do we decide when to stop?
- ▶ What do I do if the child becomes ill, misses doses, or has side effects?
- ▶ Do I need to tell my child's school or day care about this medication?

If the child is prescribed a psychotropic medication and is already taking another one, you should ask:

- ▶ Does the child finish the old medication before starting the new one?
- ▶ Does the child keep taking both the old and new medications? For how long?

(Always read and keep the medication information the pharmacy gives you when you fill a prescription.)





A child taking a psychotropic medication must have a check-up every 90 days

You must take any child on a psychotropic medication to the prescribing doctor at least every 90 days. You must talk to the doctor about how the child is doing. You must take the child for any regular lab work the doctor has requested before the follow up visits.

Take with you to the appointment:

- ▶ Any new medical, psychological, developmental or educational evaluations.
- ▶ Any new medical history.

- ▶ A list of all the child's current medications and dosages.

Be sure to give the child a chance to share concerns and ask questions. Talk to the doctor about:

- ▶ How the medication is working.
- ▶ Any changes in behavior, mood, appetite, sleep, or school performance.
- ▶ Anything new in the child's life that could upset them.
- ▶ Changes in how the child gets along with others.
- ▶ Any suspicions about alcohol or drug abuse or any other concerns.
- ▶ Any side effect the child is having, including weight gain or loss.
- ▶ Therapy and other interventions you are trying.
- ▶ How much longer the child will need the medication.

When you have problems or concerns between visits

Talk to the prescribing doctor if:

- ▶ You have any concerns about side effects.





- ▶ The child is not getting better or is getting worse.
- ▶ The child is a danger to himself or others.

After you speak with your doctor, if you still have these concerns call STAR Health Member Services at 1-866-912-6283. Please be aware that STAR Health continually monitors all psychotropic medication prescribing and will conduct a formal review if the prescribing is not within recommended guidelines. A formal review includes examining medical records, a discussion between a STAR Health child psychiatrist and the prescribing doctor and a written report from the STAR Health psychiatrist.





Texas Department of Family & Protective Services

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