

AMENDED IN ASSEMBLY MAY 1, 2007

AMENDED IN ASSEMBLY APRIL 17, 2007

CALIFORNIA LEGISLATURE—2007—08 REGULAR SESSION

ASSEMBLY BILL

No. 1330

Introduced by Assembly Member Evans
(Coauthors: Assembly Members Bass, Berg, and Salas)

February 23, 2007

An act to add Section 16519 to the Welfare and Institutions Code, relating to child welfare.

LEGISLATIVE COUNSEL'S DIGEST

AB 1330, as amended, Evans. Foster children: psychotropic drugs: data.

Existing law provides for oversight by various state and local entities of certain populations of children, including those who are dependent children or wards of the juvenile court, and those who are in foster care, or are otherwise under the supervision of county welfare departments.

Existing law provides for a system of child welfare services administered by each county, with oversight by the State Department of Social Services.

This bill would require the State Department of Social Services to collect and maintain specified information regarding foster youth who are prescribed psychotropic medication, as defined.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 16519 is added to the Welfare and
2 Institutions Code, to read:
3 16519. The State Department of Social Services shall collect
4 and maintain *all of the following* the following information
5 regarding each foster youth who is prescribed a psychotropic
6 medication, as defined in subdivision (d) of Section 369.5:
7 (a) The youth’s sex, age, and ethnicity or race.
8 (b) The number of years the youth has been in the foster care
9 system.
10 (c) The type of placement within the system, such as foster
11 family, group home, or juvenile justice system.
12 (d) The type of drug prescribed.
13 (e) *The youth’s diagnosis.*
14 (f) *A comprehensive health assessment for the youth, and the*
15 *name of the person who conducted the health assessment.*
16 (g) *A comprehensive treatment plan, if any.*
17 (h) *Court review of medication errors, if any, including whether*
18 *a child and adolescent psychiatrist was available to the court as*
19 *a consultant to review applications for psychiatric administration,*
20 *and to give an expert opinion to and advise the juvenile court on*
21 *the appropriateness of medication orders.*