

Introduced by Senators Mitchell and Beall
(Coauthor: Assembly Member Chiu)

February 17, 2015

An act relating to foster care.

LEGISLATIVE COUNSEL'S DIGEST

SB 238, as introduced, Mitchell. Foster care: psychotropic medication.

Existing law authorizes only a juvenile court judicial officer to make orders regarding the administration of psychotropic medications for a dependent child or a ward who has been removed from the physical custody of his or her parent. Existing law requires the court authorization for the administration of psychotropic medication to be based on a request from a physician, indicating the reasons for the request, a description of the child's or ward's diagnosis and behavior, the expected results of the medication, and a description of any side effects of the medication. Existing law requires the officer to approve or deny the request for authorization to administer psychotropic medication, or set the matter for hearing, as specified, within 7 court days.

This bill would state the intent of the Legislature to enact legislation that would improve the ability of the child welfare system to track and oversee the use of psychotropic medications for children in foster care by requiring, among other things, the development of a system that triggers an alert to medical practitioners treating children in foster care when there could be potentially dangerous interactions between psychotropic medications and other prescribed medications, or when psychotropic medications have been prescribed, or prescribed in dosages, that are unusual for a child or a child of that age.

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

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

- 1 SECTION 1. It is the intent of the Legislature to enact
2 legislation that would improve the ability of the child welfare
3 system to track and oversee the use of psychotropic medications
4 for children in foster care. In order to effectuate this intent, the
5 legislation shall require all of the following:
- 6 (a) The State Department of Social Services and the State
7 Department of Health Care Services to develop monthly data
8 reports that match prescription and claims data with child welfare
9 services records and that are shared with counties, the juvenile
10 court, attorneys appointed to represent children in foster care,
11 medical practitioners treating children in foster care, and
12 court-appointed special advocates.
 - 13 (b) The development of a system that triggers an alert to medical
14 practitioners treating children in foster care when there could be
15 potentially dangerous interactions between psychotropic
16 medications and other prescribed medications, or when
17 psychotropic medications have been prescribed, or prescribed in
18 dosages, that are unusual for a child or a child of that age.
 - 19 (c) An update of the JV-220 court form to provide an
20 opportunity for key stakeholders, including, but not limited to, the
21 child for whom psychotropic medication is prescribed, to provide
22 information and feedback and to provide details on the overall
23 mental health treatment plan for the child.
 - 24 (d) Training for medical practitioners, child welfare social
25 workers, foster children, caregivers, attorneys appointed to
26 represent children in foster care, and Court-Appointed Special
27 Advocates regarding psychotropic medications.