

Oversight of Psychotropic Medication for Children in Foster Care; Title IV-B Health Care Oversight & Coordination Plan

1

ACYF-CB-IM-12-03

Background

2

- Fostering Connections to Success and Increasing Adoptions Act of 2008 amended Title IV-B, subpart 1 of the Social Security Act to require State and Tribal IV-B agencies to develop a plan for ongoing oversight and coordination with health care services for children in foster care, in coordination with the State Medicaid agency, pediatricians and other experts in health care as well as recipients of child welfare services.

3

- The plan must describe how it will ensure a coordinated strategy to identify and respond to the health care needs of children in foster care placements, including mental health and dental health needs and provide for continuity of health care services. The purpose of these requirements is to ensure that children in foster care receive high quality, coordinated health care services, **including appropriate oversight of any needed prescription medicine**

Child and Family Services Improvement and Innovation Act (P.L. 112-34)

4

- The Child and Family Services Improvement and Innovation Act amended the law by adding to the requirements for the health care oversight and coordination plan. The new provision builds on the requirements by specifying that the plan must include an outline of “protocols for the appropriate use and monitoring of psychotropic medications.”

June 30, 2012

5

- States and Tribes will need to address how they are responding to these new requirements in their Annual Progress and Services Reports (APSRs) which are due on June 30, 2012.

Prevalence of psychotropic medication use among children in foster care

6

- There has been a steady rise in the use of medication to address children's emotional and behavioral problems over the last decade, even among preschoolers.
- At this time, there is no comprehensive source of data regarding psychotropic medication usage rates for children and adolescents in child welfare, including data on those in foster care.

7

- Despite deficiencies (in data), published studies consistently reveal even higher rates of use for children involved in child welfare than in the general population, with usage rates between 13 and 52 percent.

Social-emotional, behavioral, and mental health needs of children with child welfare involvement

8

- Children who come to the attention of the child welfare system have disproportionately high rates of social-emotional, behavioral, and mental health challenges.
- Data identified in the ACYF-CB-IM-12-03 clearly show that the broader group of children who experience maltreatment and come to the attention of a child welfare agency have emotional and behavioral problems that derail normal development, hinder healthy functioning, and impede the achievement of permanency.

- The graphics identified in ACYF-CB-IM-12-03 demonstrate that many children in foster care have mental health challenges requiring intervention, which may include the appropriate use of psychopharmacological treatments as part of a comprehensive treatment approach.
- Unfortunately, research on the safe and appropriate pediatric use of psychotropic medications lags behind prescribing trends.
- There is even less evidence of the effectiveness of pharmacologic interventions for the treatment of trauma-related symptoms in children.

Practice Guidelines related to the development of protocols for the appropriate use & monitoring of psychotropic medication

- In the past decade, a variety of practice guidelines have been developed related to the use of psychotropic medication for foster children, including those developed to guide and inform physician prescription practices.
- Two published guidelines specifically describe components of comprehensive oversight and management plans for children in child welfare: American Academy of Child and Adolescent Psychiatry position statement and guidelines developed by an expert panel convened by the Research Institute.

- A helpful aspect of the AACAP guidelines is the categorization of standards in these areas as Minimal, Recommended, and Ideal, features that Title IV-B agencies may find helpful as they seek to make decisions about improving their current oversight procedures.
- Each Title IV-B agency and its service delivery array is unique, making it impractical and inappropriate for every oversight and monitoring plan to be the same.

- The development of a comprehensive approach to psychotropic medication oversight requires high levels of collaboration among child welfare agencies, professionals, organizations providing foster care and mental health services, children who are recipients of child welfare services and their families.

Federal Initiatives to Encourage the Appropriate Use of Psychotropic Medication

13

- The Department of Health and Human Services is working to facilitate cross-system collaboration for the purposes of promoting improved behavioral health diagnosis, treatment, service delivery and service tracking for children in foster care

14

- HHS has identified concrete actions in two areas: (1) increasing oversight and monitoring of psychotropic medications and (2) expanding the use of evidence-based screening, diagnosis, and treatment of social-emotional, behavioral, and mental health issues among children who have experienced abuse or neglect.

ACYF technical assistance efforts:

15

- A three-part topical webinar series providing additional in-depth information on this topic was produced by Georgetown University and the American Institutes for Research through an inter-agency agreement with the Substance Abuse and Mental Health Services Administration (SAMHSA)

16

- Additional information, resources and tools pertaining to the use and oversight of psychotropic medications have been added to the Child Welfare Information Gateway (www.childwelfare.gov)
- Three peer to peer learning exchanges to allow information and resource sharing opportunities to highlight exemplary practices from around the country.

- **The Children’s Bureau has issues related Program Instructions ACYF-CB-PI-12-05 and ACYF-CB-PI-12-06 that provides further guidance on required APSR content for States and Tribes respectively.**
- **Among other information, a forthcoming IM on Promoting Social and Emotional Well-Being for Children and Youth Receiving Child Welfare Services will provide States, Territories and Tribes with more information on the effects of childhood trauma and ways to promote social and emotional well-being.**