# **BHS Policies and Procedures**



City and County of San Francisco
Department of Public Health
San Francisco Health Network
BEHAVIORAL HEALTH SERVICES

1380 Howard Street, 5th Floor San Francisco, CA 94103 415.255-3400 FAX 415.255-3567

POLICY/PROCEDURE REGARDING: JV-220-223

Issued By: Kavoos Ghane Bassiri 长 🏖 Bassiri Director, Behavioral Health Services

1 Health Services References: California

Date: March 14, 2017

W & I Code Section 727.4

Manual Number: 3.01-7

(Technical Revision. Replaces 3.01-7 of March 3<sup>rd</sup>, 2017)

### I. PURPOSE

This policy provides guidelines for Behavioral Health Services (BHS) staff to ensure that forms JV-220, JV-220(A) or JV-220(B), JV-221, JV-222 (if applicable) and the JV-223 are completed and in the beneficiary's medical record when psychotropic medication(s) are prescribed to court dependent youth pursuant to Rule 5.640 of the California Rules of Court.

### II. SCOPE

This policy applies to staff who prescribe psychotropic medication(s) to court dependent youth under the jurisdiction of San Francisco County Mental Health Plan.

### III. DEFINITIONS

- A. Court dependent youth: children who have been removed from the custody of the parent(s) or guardian(s), which may include children who are placed in out-of-home placements, or who are dependents of the juvenile court, as defined in Welfare and Institutions Code section 727.4.
- B. Prescriber: anyone intending to prescribe psychotropic medication(s) to court dependent youth and may include child psychiatrist, general psychiatrist, pediatrician, primary care physician, clinical pharmacist, or nurse practitioner.
- C. Psychotropic medication: medications prescribed to affect the central nervous system to treat psychiatric disorders or illnesses. They may include, but are not limited to, anxiolytic agents, antidepressants, mood stabilizers, antipsychotic medications, anti-Parkinson agents, hypnotics, medications for dementia, and psychostimulants, as defined by Rule 5.640 of the California Rules of Court.
- D. JV-220 reviewing committee: San Francisco County Mental Health Plan has a clinical review committee which consists of a clinical pharmacist and child psychiatrists. Administrative staff assist with collecting applications, compiling documents, tracking applications and communicating with the committee.

## IV. DESCRIPTION OF FORMS

- A. JV-220: Application for Psychotropic Medication
  - 1. This form gives the court basic information about the child and their living situation. It also provides contact information for the child's social worker or probation officer.
  - 2. This form shall be filled out by the beneficiary's social worker, probation officer, prescribing physician, prescribing physician's staff or the child's caretaker.

- 3. Whoever completes the form must identify one's self by name and by signing the form. If the prescribing physician completes this form, they must also complete and sign form JV-220(A) or form JV-220(B). (See Below)
- B. JV-220(A): Physician's Statement- Attachment
  - 1. This form is used to ask the court for a new order. The prescribing physician fills out this form then gives it to the person who files form JV-220.
  - 2. This form provides a record of the child's medical history, diagnosis, previous treatments, as well as information about the child's previous experience with psychotropic medications. The physician shall list the reasons for recommending the psychotropic medication(s).
  - 3. Emergencies: A child may not receive psychotropic medication without a court order except in an emergency. A physician may administer the medication on an emergency basis. To qualify as an emergency, the physician must find:
    - a. The child's mental condition requires immediate medication to protect the child or others from serious harm or significant suffering **AND**
    - b. Waiting for the court's authorization would put the child or others at risk.
  - 4. After a physician administers emergency medication, they have 2 days at most to ask for the court's authorization.
- C. JV-220(B): Physician's Request to Continue Medication- Attachment
  - 1. This is a shorter version of form JV-220(A). It may only be used by the same physician who filled out the most recent JV-220(A) form if they are prescribing the same medication with the same maximum dosage.
  - 2. The prescribing physician fills out this form then gives it to the person who files form JV-220.
- D. JV-221: Proof of Notice of Application
  - 1. This form shows the court that all parties with a right to receive notice were served a copy of the JV-220 and attachments, according to rule 5.640 of California Rules of Court.
  - 2. The person(s) in charge of notice must fill out and sign this form.
- E. JV-222: Input on Application for Psychotropic Medication
  - 1. This is an optional form.
  - 2. This form may be used when the parent or guardian, the attorney of record for parent(s) or guardian(s), the beneficiary's CAPTA guardian ad litem, or the Indian beneficiary's tribe does not agree that the beneficiary should take the recommended medication. This form may also be used to provide input to the court.
  - 3. If one of the above parties disagrees with the JV-220 and attachments, they shall complete, sign, and file form JV-222 within four days of service of notice of the pending JV-220. This shall be filed with the clerk of the juvenile court.
  - 4. The court is not required to set a hearing if a JV-222 is filed. If the court does set the matter for a hearing, the juvenile court clerk must provide notice of the date, time, and location of the hearing to the parent(s) or legal guardian(s), their attorneys, the child if 12 years of age or older, the child's attorney, the child's current caregiver, the child's social worker, the social worker's attorney, the child's CAPTA guardian ad litem, the child's CASA, if any, and the Indian child's tribe at least two court days before the hearing date.
- F. JV-223: Order on Application for Psychotropic Medication
  - 1. This form lists the court's findings and orders about the child's psychotropic medications. The agency who filed the JV-220 must provide a copy of the JV-223 to the child's caregiver(s).

- 2. The copy of the JV-223 must be provided (in person or mailed) within two days of when the order is made.
- 3. If the court approves the JV-220, the copy of the JV-223 must include the last two pages of form JV-220(A) and all of the medication information sheets that were attached to the JV-220(A).
- 4. If the child's placement is changed, the social worker or probation officer must provide the new caregiver with a copy of the JV-223, the last two pages of the JV-220(A), and all of the medication information sheets that were attached to the JV-220(A).
- G. Forms are available online at the following web address: http://www.courts.ca.gov/formnumber.htm

### V. POLICY STATEMENTS

A. BHS complies with all State laws, regulations and rules governing the prescribing of psychotropic medications to court dependent youth. All the following forms will be completed and in the beneficiary's medical record when received from the court: JV-220, JV-220(A) or JV-220(B), JV-221, JV-222 (if applicable) and JV-223.

### VI. PROCEDURE

- A. Prescribers shall choose between the JV-220(A) and the JV-220(B) forms based on the description of forms above.
- B. All fields on either the JV-220(A) or JV-220(B) shall be filled out, which can include marking "N/A" on specific fields if appropriate. Applications may be returned by the court if they are not complete.
- C. Prescriber shall file either completed JV-220(A) or JV-220(B) in beneficiary's medical chart.
- D. JV-220(A) or JV-220(B) applications will be clinically reviewed by JV-220 reviewing committee prior to being forwarded to the court.
  - Applications shall be received by JV-220 Review Committee administrative staff who shall convert the application to an electronic format in a HIPAA-protected shared folder.
  - 2. Administrative staff shall contact JV-220 reviewing committee to initiate review process.
  - 3. Clinical pharmacist shall screen the application to determine initial recommendation or need for further review. Clinical pharmacist shall alert child psychiatrist on duty for review. If clinical pharmacist is unavailable, child psychiatrist shall perform complete review.
  - 4. In the event that more information is needed, the treating prescriber shall be contacted by the JV-220 reviewing committee. Attempts to contact or discussions with prescriber shall be documented on the Reviewer Statement (see Attachment 1).
  - 5. Reviewer Statement shall be completed and electronically signed by clinical pharmacist and child psychiatrist on duty for review. If clinical pharmacist is unavailable, child psychiatrist shall be sole signer of Reviewer Statement.
  - 6. Administrative staff shall be alerted that application has been reviewed, and shall compile packet consisting of reviewed application, Reviewer Statement, and Lexi-Comp medication sheets which contain mandatory information including significant side effects, warnings/contraindications, drug interactions, and withdrawal symptoms for each recommended medication.
  - 7. Administrative staff shall forward packet to appropriate recipient via secure email.
- E. Court shall make final determination regarding whether or not psychotropic medication will be authorized and will complete form JV-223 reflecting court's decision.

- F. When the JV-221, JV-222 (if applicable) and JV-223 forms are received by prescriber, prescriber shall file these forms in beneficiary's medical chart, along with forms JV-220, JV-220(A) or JV-220(B).
- G. Court authorization will last for 180 days. After 180 days, a new application shall be submitted for continued use of the medication.
- H. In cases of need for emergency treatment, a psychotropic medication can be started prior to obtaining court approval if certain criteria are met.
  - 1. Emergency criteria are defined as:
    - a. A physician finds a youth requires psychotropic medication to treat a psychiatric disorder or illness,
    - b. AND the purpose of the medication is to (select one of the following):
      - 1. Protect the life of the youth or others OR
      - 2. Prevent serious harm to the youth or others OR
      - 3. Treat current or imminent substantial suffering
    - c. AND it is impractical to obtain court authorization prior to administering the medication to the youth
  - 2. Court authorization must be sought as soon as is practical, but no more than two court days after the emergency administration of medication.

### **Contact Person: BHS Chief Medical Officer**

#### Distribution:

BHS Policies and Procedures are distributed by Behavioral Health Services Compliance Office

Administrative Manual Holders
Behavioral Health Services (BHS) Programs
System of Care (SOC) Managers
Business Office of Contract Compliance (BOCC) Program Managers
Contract Development and Technical Assistance (CDTA) Program Managers
Medical Directors