Psychotropic Medications: Practice Tips for GALS

Providing Relevant Information to Prescribing Professionals

The prescription of psychotropic medication rests upon proper diagnosis and the thorough collection of information regarding a child’s history, symptoms and ongoing needs. This process is often complicated by multiple moves/caretakers, disparate reports, and incomplete records. GALS can help in this regard by providing the following types of information to the prescribing professional (and/or encouraging others in the case to do the same):

• Therapies/interventions previously tried (both those that were beneficial and those with negative results)
• Current and former medications, as well as any prior side effects to medication
• Child’s ability to function in multiple places (home, placement, school, social circles).
• Child’s medical history
• Child’s trauma history
• Prior psychological evaluations or diagnostic reports
• Family history of mental illness
• Other interventions currently included in the treatment plan, such as other therapies or behavior plans
• Outside factors that may impact a child’s ability to maintain medication plan

Effective medication management will also require accurate reports to the prescribing professional regarding changes in symptoms/behaviors, emerging side effects, modifications to the treatment plan or other significant events that may impact the child’s mental health.

Asking the Right Questions

Questions to ask when there is a request to place a child in care on psychotropic medication:

• Who is requesting that the child be placed on medication?
  o How long has the requesting party known the child?
  o Does the requesting party have any specialized knowledge in child development?
• What is the basis of the request? What is the recommended medication needed for?
  o What symptoms or behaviors has the child been experiencing?
  o Do these symptoms occur in multiple environments (school, home, placement, social circles)?
• Has the prescribing professional been able to obtain an accurate medical, behavioral and psychological history of the child?
  o What was the source of this information?
• What other interventions have been tried?
What are the possible side effects of the medication? Are there any safety warnings that go along with the particular medication? Risks v. benefits?

Questions to ask when child is currently taking prescribed psychotropic medications:

- When did the child start taking the medication?
- What led to the child being placed on medication?
  - Who performed the evaluation?
  - What was the evaluator’s experience?
  - When was the last time the child was evaluated?
- What other therapies/interventions are being used in conjunction with the medication?
- How often does the child take the medication? What dosages are prescribed?
  - Does the timing of the medication seem to be effective?
  - Are there times of day during which it seems that symptoms are heightened?
- What other medications is the child on (psychotropic or for non-mental health related reasons)? What is the impact on the child of taking this combination?
- How is the child’s progress being monitored?
  - How often does the child meet with the prescribing professional?
  - Who provides information regarding progress?
  - Is the child experiencing any side effects? If yes, how are they being handled?
  - Have there been notable changes in the child’s behaviors since the last review? Has there been an increase/decrease in incident reports from placement or school discipline issues?
  - How long does the current treating professional believe that the child will need to stay on this medication?
- Is the child able to comply with the prescribed medication?
  - Who is responsible for disbursing the medication?
  - Is the child able to adhere to the recommended timing for medication?
  - Is the medication easy to use? (example: liquid form v. pills)
- If a medication is not found to be effective, what is the plan to discontinue use?
  - Does the child need to be weaned from the medication? If so, what is the recommended plan?
- If the child is getting ready to age out of the system or the family’s court case is going to be closed, what safeguards have been put in place to ensure the child will still have adequate access to medication and/or treatment?