

# JUVENILE JUSTICE MEDICATION CONSENT

## OBTAINING VERBAL CONSENT

### **Rationale for allowing verbal consent from the parent/legal guardian when the parent/legal guardian is not physically available to consent:**

1. More efficient use of resources for DMH (JJMHP MDs and JCMHS MDs/pharmacist currently take 60-90 minutes to complete the PMAF to request court consent\*), DCFS, Probation, and the Court
2. Increased collaboration with parents (i.e., MDs more likely to call parents/legal guardians to obtain consent); this increases the chances that parents/youth will be adherent to medication regimens both during their detention and upon release
3. More timely administration or continuation of medications in non-emergent situations (e.g., medication can be started immediately rather than waiting for Court consent); this leads to better quality of care
4. Meets or exceeds community standard of practice
5. All stakeholders have endorsed process (DMH Medical Director, Juvenile Justice Medical Directors, Quality Assurance)
6. JJMHP MDs on a whole are more conservative, parsimonious prescribers than in community and are full-time DMH employees (i.e., increased oversight and direction w/r/t prescribing practices), so lack of Court review less problematic

### **Procedure for obtaining verbal consent:**

1. Ensure there is one other staff person present when the psychiatrist is making the phone call to the parent/legal guardian who can act as a witness. The parent/legal guardian will be informed at the beginning of the call that there is a witness present.
2. Confirm the parent/legal guardian is the parent/legal guardian by asking and confirming at least two (2) elements on file for the parent/legal guardian (e.g. parent's DOB and address) as well as the DOB of the child.
3. Explain the form, being sure to identify the types of medications to be prescribed, the medications, and side effects. Ask the parent/legal guardian to confirm understanding and repeat back to the physician their understanding of the treatment, ensuring that any/all questions of the parent/legal guardian are answered.
4. Inform the parent/legal guardian of their right to make the decision regarding their child taking medications as well as other statements listed on the form.
5. Complete the "parent/legal guardian is not present" section of the form.
6. Obtain the witness signature. Consent form should also include date and exact time of the call.
7. Mail or fax a copy of the form to the parent/legal guardian along with a letter detailing the date the doctor spoke to the parent/legal guardian and that the parent/legal guardian authorized treatment for the minor. The letter should also provide information for the parent/legal guardian stating that if they did not authorize treatment, or if they wish to change their authorization, they can contact Juvenile Justice.
8. Request that the parent/guardian sign the consent and return it to Juvenile Justice.

*Note: In the event that telephone communication cannot be established in a timely manner with the parent/legal guardian under the conditions described, the reasons should be documented in the child's clinical record prior to completing additional steps for requesting court approval.*

### **\* Information regarding the PMAF Protocol:**

- If a child is a ward of the Juvenile Court pursuant to WIC §602, the parent or legal guardian retains the right to authorize the prescription and administration of psychotropic medication unless the Juvenile Court has restricted such right. If a parent's right to authorize the prescription and administration of psychotropic medication has been restricted by the Court, the physician must request authorization from the Court by completing the Form JV-220.
- If a parent or legal guardian who retains the right to consent to the prescription and administration of psychotropic medication refuses to consent, is unavailable to consent, or is incapable of consenting to the

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prescription of psychotropic medication to his or her child, the physician may request authorization from the Court by completing the Form and noting the refusal, unavailability or inability of the parent or legal guardian to consent. Before a Form is submitted, the physician shall attempt to obtain consent from the parent or legal guardian who has retained the right to consent to the psychotropic medication.

- Foster parents, relatives, group home caregivers, deputy probation officers (DPO), and attorneys may not sign consent forms or initiate or modify treatment unless they are the child's legal guardian.
- When a Form is submitted, the Court may approve the medication request. (See WIC §739).