



## JUDICIAL COUNCIL OF CALIFORNIA

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# REPORT TO THE JUDICIAL COUNCIL

For business meeting on: September 14–15, 2017

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Title	Agenda Item Type
Juvenile Law: Psychotropic Medication	Action Required
Rules, Forms, Standards, or Statutes Affected	Effective Date
Amend Cal. Rules of Court, rule 5.640; approve form JV-216; revise forms JV-217- INFO, JV-219, JV-220, JV-220(A), JV- 220(B), JV-221, JV-222, JV-223, and JV-224	January 1, 2018
	Date of Report
	July 5, 2017
Recommended by	Contact
Family and Juvenile Law Advisory Committee	Kerry Doyle, Attorney, 415-865-8791 <a href="mailto:kerry.doyle@jud.ca.gov">kerry.doyle@jud.ca.gov</a>
Hon. Jerilyn L. Borack, Cochair	
Hon. Mark A. Juhas, Cochair	

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### Executive Summary

The Family and Juvenile Law Advisory Committee recommends that the Judicial Council amend California Rules of Court, rule 5.640, relating to the administration of psychotropic medications to children who are dependents or wards of the court; adopt one form; and revise nine forms to address suggestions received from stakeholders who assisted with the implementation of recent statutory changes to the requirements for court authorization of psychotropic medication for foster children and others affected by this rule and these forms.

### Recommendation

The Family and Juvenile Law Advisory Committee recommends that the Judicial Council, effective January 1, 2018:

1. Amend rule 5.640(b) of the California Rules of Court to clarify when a juvenile court judicial officer is authorized to make orders regarding the administration of psychotropic medication;
2. Amend rule 5.640(c)(1) to clarify when proof of notice must be filed;
3. Amend rule 5.640(c)(6) to clarify the items that must be completed on *Application for Psychotropic Medication* (form JV-220);
4. Amend rule 5.640(c)(7) to clarify what forms may be used when a physician is requesting to continue psychotropic medication;
5. Amend rule 5.640(c)(9) to clarify that the court's order must be on *Order on Application for Psychotropic Medication* (form JV-223);
6. Amend rules 5.640(c)(10) and 5.640(h)(4) to include different potential placement types;
7. Further amend rule 5.640(c)(10) to clarify how notice should be provided;
8. Amend rule 5.640(e) to clarify the process for parental authorization of psychotropic medication;
9. Amend rule 5.640(h) to include the correct Judicial Council forms that must be provided to caregivers;
10. Approve *Order Delegating Judicial Authority Over Psychotropic Medication* (form JV-216) as an optional form to document the court's findings and order when the court orders that a parent is authorized to approve or deny the administration of psychotropic medication;
11. Revise *Guide to Psychotropic Medication Forms* (form JV-217-INFO) to make the instructions consistent with the changes in this report;
12. Revise *Application for Psychotropic Medication* (form JV-220) to use the correct terminology for a child's placement type;
13. Further revise form JV-220 to clarify which items a physician, social worker, or probation officer must complete;
14. Revise *Physician's Statement—Attachment* (form JV-220(A)) and *Physician's Request to Continue Medication—Attachment* (form JV-220(B)) to shorten the form and remove duplicative questions;
15. Revise *Proof of Notice of Application* (form JV-221) to indicate when information on how to obtain copies of a form can be provided;

16. Revise *Input on Application for Psychotropic Medication* (form JV-222) to clarify it is an optional form;
17. Further revise form JV-222 so the identifying information about the person filling out the form mirrors the other forms in this proposal.
18. Revise *Order on Application for Psychotropic Medication* (form JV-223) to increase the number of potential forms the court relied on as evidence; and
19. Revise *County Report on Psychotropic Medication* (form JV-224) to remove references to public health nurses.

### **Previous Council Action**

As mandated by Senate Bill 543 (Bowen; Stats. 1999, ch. 552), effective January 1, 2001, the Judicial Council adopted a California Rule of Court and two Judicial Council forms regarding administration of psychotropic medications to children under the jurisdiction of the juvenile court. This initial proposal included rule 1432.5, *Application for Order for Psychotropic Medication—Juvenile* (form JV-220), and *Opposition to Application for Order for Psychotropic Medication—Juvenile* (form JV-220A). Clarifying changes were made to the rule and forms effective January 1, 2003, January 1, 2005, and July 1, 2005.

Effective January 1, 2007, rule 1432.5 was renumbered as rule 5.640, as part a comprehensive reorganization and renumbering to improve the format and usability of the California Rules of Court. Effective January 1, 2008, the Judicial Council amended rule 5.640, revised form JV-220, revoked form JV-220A, and adopted forms JV-219-INFO, JV-220(A), JV-221, JV-222, and JV-223 to improve the statewide procedure used to seek authorization for administering psychotropic medication to children in out-of-home placements.

Effective January 1, 2014, the council amended rule 5.640 and revised three related forms JV-219-INFO, *Information About Psychotropic Medication Forms*; JV-221, *Proof of Notice: Application for Psychotropic Medication*; and JV-222, *Opposition to Application Regarding Psychotropic Medication* to (1) clarify the time frame for filing an opposition to an application for the juvenile court to authorize the administration of psychotropic medication for a child, (2) clarify appropriate methods of service and notice protocols, and (3) add notice requirements for an Indian child's tribe if psychotropic medication is being sought for an Indian child.

Most recently, effective July 1, 2016, the council amended rule 5.640; approved two related forms, *Child's Opinion About the Medicine* (form JV-218) and *Statement About Medicine Prescribed* (form JV-219); adopted two related forms, *Physician's Request to Continue Medication—Attachment* (form JV-220(B)) and *County Report on Psychotropic Medication* (form JV-224); revised five related forms, *Application for Psychotropic Medication* (form JV-220), *Physician's Statement—Attachment* (form JV-220(A)), *Proof of Notice of Application*

(form JV-221), *Input on Application for Psychotropic Medication* (form JV-222), and *Order on Application for Psychotropic Medication* (form JV-223); and revised and renumbered one related form, *Guide to Psychotropic Medications Forms* (form JV-217-INFO) to implement the mandates of Senate Bill 238 (Mitchell; Stats. 2015, ch. 534) which required the Judicial Council to develop rules and forms to (1) ensure that the child and his or her caregiver and Court Appointed Special Advocate volunteer (CASA), if any, have an opportunity to provide input on the medications being prescribed; (2) ensure that information regarding an assessment of the child's overall mental health and treatment plan, as well as information regarding the rationale for the proposed medication are provided to the court; (3) address how to proceed if information, otherwise required to be included in a request for authorization is not included in the request; (4) include a process for periodic oversight by the court of orders regarding the administration of psychotropic medication; and (5) mandate that the child welfare agency, probation department, or other person or entity who submitted the request for authorization of psychotropic medication provide a copy of the court order approving or denying the request to the child's caregiver.

### **Rationale for Recommendation**

As indicated in the legislative history for SB 238, in 1999, the Legislature passed SB 543 (Bowen; Stats. 1999, ch. 552), which provided that only a juvenile court judicial officer has the authority to make orders regarding the administration of psychotropic medications for foster youth.<sup>1</sup> SB 543 also provided that the juvenile court may issue a specific order delegating this authority to a parent if the parent poses no danger to the child and has the capacity to authorize psychotropic medications. This legislation was passed in response to concerns that foster children were being subjected to excessive use of psychotropic medication, and that judicial oversight was needed to reduce the risk of unnecessary medication. The Judicial Council was required to adopt rules of court to implement the new requirement. Accordingly, rule 5.640 specifies the process for juvenile courts to follow in authorizing the administration of psychotropic medications and permits courts to adopt local rules for the courts to use to further refine the approval process.

In 2004, the provisions of SB 543 were amended by Assembly Bill 2502 (Keene; Stats. 2004, ch. 329), which required a judicial officer to approve or deny, in writing, a request for authorization to administer psychotropic medication, or set the matter for hearing, within seven days. This amendment was intended to ensure timely consideration of requests for authorization to administer psychotropic medication to dependent children.

SB 238 was enacted in 2015 to comprehensively address the issues related to the administration of psychotropic drugs in the foster care system by requiring additional training, oversight, and data collection by caregivers, courts, counties, and social workers. The bill also required the Judicial Council, in consultation with other identified groups, to implement specified provisions of the bill. To implement SB 238, effective July 1, 2016, the Judicial Council amended rule

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<sup>1</sup> Sen. Com. on Judiciary, Analysis of Sen. Bill No. 238 (2014–2015 Reg. Sess.) Apr. 7, 2015, pp. 1–2.

5.640, approved two optional forms, adopted two mandatory forms, revised four forms, and revised and renumbered one form to implement the mandates of SB 238.

The committee has received information on an ongoing basis about how these forms are functioning. Additionally, as mentioned above, SB 238 required the Judicial Council to implement specified provisions of the bill in consultation with other stakeholder groups. Before the 2016 changes to rule 5.640 and the forms were recommended for adoption, members of the committee met with the stakeholders and made many changes to the rule and forms based on their input. For this proposal, the committee sought input from the same group of stakeholders, specifically asking if they had identified problems in using the forms or rule.

Based on the suggestions received from stakeholders and others, the committee is recommending several clarifying changes to the rule and forms in this “clean-up” proposal.

**References to *Physician’s Request to Continue Medication—Attachment* (form JV-220(B))**

This form was created to address concerns from physicians and physician groups that *Physician’s Statement—Attachment* (form JV-220(A)) was too long and would take too long to complete when the physician is requesting to continue use of a medication. In response to these comments, a shortened form for a request to continue the same medication by the same physician who completed the most recent form JV-220(A) was developed and adopted. Rule 5.640 and *Order on Application for Psychotropic Medication* (form JV-223) lack necessary references to this form (form JV-220(B)) that are needed for completing the approval process.

The committee recommends that the council amend rule 5.640, and revise form JV-223 to add references to form JV-220(B).

**Length of *Physician’s Statement—Attachment* (form JV-220(A)) and *Physician’s Request to Continue Medication—Attachment* (form JV-220(B))**

The committee received input from physicians that forms JV-220(A) and JV-220(B) are time-consuming to complete, in part because of duplicative questions. The committee carefully reviewed these suggestions and recommends streamlining the forms as follows:

- Removing a duplicative question regarding the symptoms that are expected to improve with the medications prescribed;
- Removing references to alphanumeric codes on form JV-220(A);
- Combining questions regarding the child’s response to any current psychotropic medication and the symptoms not alleviated by other current or past treatment efforts so the prescribing physician does not need to provide the same information twice;
- Removing a question regarding the possible adverse reactions, and replacing it with a check box indicating whether the caregiver was given a copy of the informational packets regarding the medication; and

- Removing the requirement that the physician indicate the medication is a continuing medication on form JV-220(B).

The committee also recommends revising the instructions in *Application for Psychotropic Medication* (form JV-220) to clarify that the prescribing physician does not need to complete the questions beyond the first page of the form. The committee also proposes corresponding amendments to rule 5.640. These changes should help decrease the amount of time physicians spend filling out form JV-220 in jurisdictions where the belief is that if the physician is the applicant, he or she must fill out all pages of form JV-220.

### **Parental authorization**

Under Welfare and Institutions Code sections 369.5 and 739.5 and rule 5.640(e), the court may order that the parent be authorized to approve or deny the administration of psychotropic medication in limited circumstances. Although parental authorization was not addressed in the winter 2016 proposal, the committee has become aware that the parental authorization process is unclear. The committee received a question from one county regarding whether form JV-220 is required when all parties agree that the parents can consent to psychotropic medication. Sections 369.5 and 739.5 are silent as to the process for the juvenile court to issue an order delegating the authority to a parent.<sup>2</sup> Rule 5.640(e), however, requires that the court first consider a physician's application and attachments and review the case file.<sup>3</sup>

To clarify the process, the committee recommends revising rule 5.640(e) to mirror statute and to remove the requirement that the court must first consider an application and attachments and review the case file before it can issue an order delegating authority to a parent. The committee further proposes that the rule cross-reference the statute with the required findings to support such an order. The committee also recommends adopting *Order Delegating Judicial Authority Over Psychotropic Medication* (form JV-216) as an optional form to document the court's findings and order.

### **Other form changes**

*Guide to Psychotropic Medication Forms* (form JV-217-INFO) omits parents and legal guardians in the description of people who can submit optional forms. The committee recommends revising this form to include parents and legal guardians, and to include references to form JV-220(B) where necessary.

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<sup>2</sup> Sections 369.5 and 739.5 require that this delegation be requisite on making findings on the record that the parent poses no danger to the child and has the capacity to authorize psychotropic medications.

<sup>3</sup> The findings required by rule 5.640 are broader than those required by section 369.5. The rule requires the court to find that (1) the parent poses no danger to the child, and (2) the parent has the capacity to understand the request and the information provided and to authorize the administration of psychotropic medication to the child, consistent with the best interest of the child.

The signature line on *Statement About Medicine Prescribed* (form JV-219) reads “Caregiver signs here.” The form, however, can also be filled out by parents and legal guardians, CASA volunteers, and Indian tribes. The committee therefore recommends changing the signature line to read “Sign your name.”

*Proof of Notice of Application* (form JV-221) is a mandatory form that currently omits several of the documents that must be provided to the various parties when making an application for psychotropic medication. It also allows the applicant to explain how the caregiver was given information on how to obtain copies of the required forms, but rule 5.640 requires that the caregiver be given copies; it does not authorize the alternative approach of giving the caregiver information about how to obtain copies of the forms.

One court pointed out that submitting more than one *Input on Application for Psychotropic Medication* (form JV-222) is possible, but *Order on Application for Psychotropic Medication* (form JV-223) has space to enter only one form JV-222 as evidence on which the court relied. The committee proposes revising form JV-223 to allow for multiple submissions of form JV-222 and *Statement About the Medicine Prescribed* (form JV-219), and to reference form JV-220(B), as discussed above.

The committee recommends revising form JV-222 so the identifying information about the person filling out the form mirrors the other forms in this proposal. In addition to providing uniformity, this would provide the court with information about how long the person filling out the form has known the child and—if the child is living with the person—for how long the child has lived in the person’s home or facility.

### **Other changes to rule 5.640**

One large county asked who is required to give notice to the parties of the application. Rule 5.640(c)(8), which governs notice, does not specify. Rule 5.640(c)(5), however, provides that “local county practice and local rules of court determine the procedures for completing and filing the forms and for the provision of notice.” The committee proposes amending the rule and moving the text regarding local practice to the paragraph of the rule governing notice.

Rule 5.640(c)(8) does not specify deadlines for serving *Proof of Notice of Application* (form JV-221) on the other parties. The committee recommends revising the rule to clarify that form JV-221 must be filed at the same time as the application.

## **Comments, Alternatives Considered, and Policy Implications**

### **Comments**

This proposal circulated for comment as part of the spring 2017 invitation to comment cycle, from February 27, 2017, to Friday, April 28, 2017, to the standard mailing list for family and juvenile law proposals. Included on the list were appellate presiding justices, appellate court administrators, trial court presiding judges, trial court executive officers, judges, court

administrators and clerks, attorneys, family law facilitators and self-help center staff, social workers, probation officers, CASA programs, and other juvenile and family law professionals.

The proposal was also sent to organizations that the Judicial Council was mandated to consult with in developing the rules and forms implementing the legislation: the State Department of Social Services, the State Department of Health Care Services, and stakeholders, including, but not limited to, the County Welfare Directors Association of California, the County Behavioral Health Directors Association of California, the Chief Probation Officers of California, associations representing current and former foster children, caregivers, and children's attorneys.

Thirty-one individuals or organizations provided comments: 3 agreed with the proposal, 10 agreed if modified, 6 opposed the proposal, and 12 did not indicate a position. A chart with the full text of the comments received and the committee's responses is attached at pages 48–83.

As the comment chart demonstrates, this proposal generated significant comments. The issues that received the most comment or which raised critical issues are noted below. The comment chart contains responses to all the input received and what action the committee proposes for council action.

### ***Parental authorization***

Under Welfare and Institutions Code sections 369.5 and 739.5 and rule 5.640(e), the court may order that the parent be authorized to approve or deny the administration of psychotropic medication in limited circumstances. The Invitation to Comment requested specific comment on whether a proposed form should be used; the form would document the court's findings and order when the court orders that a parent is authorized to approve or deny the administration of psychotropic medication. The committee also sought comment on whether that form should be mandatory or optional. Commentators overwhelmingly replied in the affirmative and most requested the form be mandatory.

The committee concluded that the form should be optional, so that courts that currently have a process in place to delegate authority to the parents could continue to use that process rather than mandating use of a Judicial Council form.

One commentator recommended that the form, and the applicable subdivision of the rule, be amended in two ways. The first is to give the court the option of identifying the facts in support of the required findings.<sup>4</sup> The committee concluded that requiring the court to identify the facts in support of the required findings was too time-consuming and not necessary to include on the form since that information would be included in the record of the hearing.

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<sup>4</sup> To delegate judicial authority to a parent, the court must find that (1) the parent poses no danger to the child, and (2) the parent has the capacity to authorize psychotropic medication.



The second recommendation was that the form indicate a time period in which the delegation is effective. This recommendation raised the most committee discussion. The committee discussed and voted on whether the newly proposed optional *Order Delegating Judicial Authority Over Psychotropic Medication* (form JV-216) should contain an expiration date. Some members asserted that the delegation of authority to approve or deny the administration of psychotropic medication to the parents should exist until further order of the court, and an expiration date was not necessary. Other members asserted that if the court did, at a later date, terminate the order delegating authority, the physical copy of the order delegating authority would still be in existence with no indication on it that it had been superseded. To ensure that someone reading the form would know whether it was indeed still valid, these members believed an expiration date was necessary on the form itself. Ultimately, the committee concluded, and now recommends, that an expiration date should not be included on the form, but that the form should read: “The parent or legal guardian in (1) is authorized to approve or deny the administration of psychotropic medication for the child, unless such authority is modified by a subsequently issued order.”

### ***Informed Consent***

One large county commented that: “There have been questions as to whether or not the JV-220 with the JV-223 that has been signed off by the Court could serve as informed consent, or not. The Department of Health Care Services (DHCS) noted in an audit that the JV-220 forms are missing specific elements and thus, to date, the JV-220 forms do NOT suffice as informed consent. This leads to challenges for our providers as they are unsure who should sign the informed Consent documents used for non-dependent youth. The missing elements identified by DHCS include 1) route of administration (by mouth, injection, etc.) and 2) a list of potential side effects of prescribed medications. If it is the Judicial Council’s intent that this process serve as informed consent for dependent youth, please consider adding the elements identified by DHCS.”

The committee concluded that the committee did not intend for this to be an informed consent document and does not recommend amending the forms to attempt to do so.

### ***Physician’s Statement—Attachment (form JV-220(A)) and Physician’s Request to Continue Medication—Attachment (form JV-220(B))***

In the Winter 2016 cycle, to address the concerns from physicians and physician groups that form JV-220(A) was too long and time consuming, the committee split it into two forms, one for initial requests and one for a continuing request by the same physician, to decrease the length of the form for renewal requests. The committee removed several items and created a new form *Physician’s Request to Continue Medication—Attachment (form JV-220(B))* to decrease the amount of information and time needed to complete the form when the same physician is requesting a renewal of a medication previously authorized by the court. This decreased the form from six to four pages.

A commentator from one large county stated, “In our county, the JV-220A is accepted for first time requests and for renewals. Thanks to the ability to copy a file in the computer and then update it, this is far easier and faster for us to do compared to filling out a new JV-220B, which would have to be done from scratch.” Two additional commentators made a similar request.

Several physicians, both as part of reaching out to stakeholders before circulating the proposal for public comment and during the comment period, requested several ways to streamline the forms they must fill out. The committee concluded that the physician should be allowed to choose the form that he or she thinks is easiest and quickest to fill out and recommends amending rule 5.640 and revising *Guide to Psychotropic Medication Forms* (form JV-217-INFO) to allow a physician to fill out either form JV-220(A) or form JV-220(B) when requesting a renewal of a medication previously authorized by the court. The committee also recommends labeling the footer of form JV-220(B) as an “Alternative Mandatory Form instead of JV-220(A) for renewal under rule 5.640(c)(7)” to indicate that this form can only be used for renewal, and not initial, requests.

### ***Legal guardians***

The Invitation to Comment also sought specific comment on whether rule 5.640(e) should include legal guardians, in addition to parents, as those the court can order authorized to approve or deny the administration of psychotropic medication. Most commentators who commented on this question agreed that legal guardians should be included in that portion of the rule. Several commentators also suggested different portions of the forms should also contain references to legal guardians.

The committee recommends that the rule and forms be revised to include legal guardians every place a parent is mentioned.

### ***County Report on Psychotropic Medication (form JV-224) and Public Health Nurses***

Rule 5.640 requires, and form JV-217-INFO instructs, that form JV-224 must be filled out by a social worker or probation officer. The Invitation to Comment was also clear that this form must be filled out by the child’s social worker or probation officer. The current form, however, includes a signature line for a public health nurse (PHN). While this form did not circulate for comment during this spring cycle, it generated many comments. Twelve PHNs or PHN organizations commented on this proposal, requesting that the signature line for PHNs be removed from this form because the PHN is a consultant, not a case manager, and therefore should not be filling out this form. Given that this proposal is a “cleanup” proposal and removing the PHN signature line will make the form legally accurate, the committee concluded that it should recommend removing the signature line without the form being circulated for public comment.

### ***Alternatives***

The committee considered consolidating or eliminating several questions on the *Physician’s Statement—Attachment* (form JV-220(A)) and *Physician’s Request to Continue Medication—*

*Attachment* (form JV-220(B)). The committee proposes some streamlining of these forms to address this concern. However, the committee concluded that most of the questions are critical to the court's oversight role of psychotropic medication and should remain on the form. For example, the committee concluded that specific questions on an assessment of the child's overall mental health and nonpharmacological treatments that the child is participating in were necessary to perform judicial oversight of the orders for psychotropic medication. Judges are also accepting forms that reference another item number if the information is contained in an item already filled out by the physician.

The committee considered that children's Health and Education Passports (HEPs), which are meant to relay pertinent medical information that would support the completion of form JV-220(A) and form JV-220(B), are not delivered in a timely fashion, if at all. Regarding a request that the committee recognize these delays and develop workarounds, the committee concluded that county agencies must resolve this issue, which is not under the council's rule-making authority.

At the request of public health nurses, the committee considered whether essential laboratory tests should be mandated to be attached to the application for psychotropic medication. The committee concluded that tests need not be attached, given confidentiality concerns and an existing cross-reference in the rule to the Civil Code section that governs how public health nurses can get the necessary information to perform their oversight role.

The committee considered specifying on *County Report on Psychotropic Medication* (form JV-224) which social worker or probation officer should complete the form if the child is placed outside his or her county of original jurisdiction, and the responsibility for providing or arranging for specialty mental health services is transferred to his or her county of residence. The committee concluded, however, that the social worker or probation officer with the most information regarding the child's mental health treatment should fill out this mandatory form and that person could differ on a case-by-case basis. The committee therefore does not propose directing or limiting who should fill out the form.

## **Implementation Requirements, Costs, and Operational Impacts**

In implementing the revised forms, courts will incur standard reproduction costs.

## **Attachments and Links**

1. Cal. Rules of Court, rule 5.640, attached at pages 12–15
2. Forms JV-216, JV-217-INFO, JV-219, JV-220, JV-220(A), JV-220(B), JV-221, JV-222, JV-223, and JV-224, at pages 16–47
3. Chart of comments, at pages 48–83
4. Senate Bill 238:  
[http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill\\_id=201520160SB238](http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201520160SB238)

Rule 5.640 of the California Rules of Court is amended, effective January 1, 2018, to read:

**Rule 5.640. Psychotropic medications**

**(a) \* \* \***

**(b) Authorization to administer (§§ 369.5, 739.5)**

- (1) Once a child is declared a dependent child of the court and is removed from the custody of the parents or guardian, only a juvenile court judicial officer is authorized to make orders regarding the administration of psychotropic medication to the child, unless, under (e), the court orders that the parent or legal guardian is authorized to approve or deny the medication.
- (2) Once a child is declared a ward of the court, removed from the custody of the parents or guardian, and placed into foster care, as defined in Welfare and Institutions Code section 727.4, only a juvenile court judicial officer is authorized to make orders regarding the administration of psychotropic medication to the child, unless, under (e), the court orders that the parent or legal guardian is authorized to approve or deny the medication.
- ~~(3) The court must grant or deny the application using *Order on Application for Psychotropic Medication* (form JV-223).~~

**(c) Procedure to obtain authorization**

- (1) To obtain authorization to administer psychotropic medication to a dependent child of the court who is removed from the custody of the parents or legal guardian, or to a ward of the court who is removed from the custody of the parents or legal guardian and placed into foster care, the following forms must be completed and filed with the court:
  - (A) *Application for Psychotropic Medication* (form JV-220); ~~and~~
  - (B) *Physician's Statement—Attachment* (form JV-220(A)), unless the request is to continue the same medication and maximum dosage by the same physician who ~~that~~ completed the most recent JV-220(A); then the physician may complete *Physician's Request to Continue Medication—Attachment* (form JV-220(B)); and
  - (C) *Proof of Notice of Application* (form JV-221).
- (2) The child, caregiver, parents or legal guardians, child's Indian tribe, and Court Appointed Special Advocate, if any, may provide input on the mediations being prescribed.

(A)–(C) \* \* \*

(3)–(4) \* \* \*

(5) Local county practice and local rules of court determine the procedures for completing and filing the forms ~~and for the provision of notice~~, except as otherwise provided in this rule. ~~The person or persons responsible for providing notice as required by local court rules or local practice protocols are encouraged to use the most expeditious manner of service possible to ensure timely notice.~~

(6) *Application for Psychotropic Medication* (form JV-220) may be completed by the prescribing physician, medical office staff, child welfare services staff, probation officer, or the child's caregiver. If the applicant is the social worker or probation officer, he or she must complete all items on form JV-220. If the applicant is the prescribing physician, medical office staff, or child's caregiver, he or she must complete and sign only page one of form JV-220.

(7) The physician prescribing the administration of psychotropic medication for the child must complete and sign *Physician's Statement—Attachment* (form JV-220(A)) or, if it is a request to continue the same medication by the same physician who ~~that~~ completed the most recent JV-220(A), then the physician ~~may~~ must complete and sign *Physician's Statement—Attachment* (form JV-220(A)) or *Physician's Request to Continue Medication—Attachment* (form JV-220(B)).

~~(7)~~(8) The court must approve, deny, or set the matter for a hearing within seven court days of the receipt of the completed form JV-220 and form JV-220(A) or form JV-220(B).

(9) The court must grant or deny the application using *Order on Application for Psychotropic Medication* (form JV-223).

~~(8)~~(10) Notice of the application must be provided to the parents or legal guardians, their attorneys of record, the child's attorney of record, the child's Child Abuse Prevention and Treatment Act guardian ad litem, the child's current caregiver, the child's Court Appointed Special Advocate, if any, and where a child has been determined to be an Indian child, the Indian child's tribe (see also 25 U.S.C. § 1903(4)–(5); Welf. and Inst. Code, §§ 224.1(a) and (e) and 224.3).

(A) If the child is living in a group home or short-term residential therapeutic center, notice to the caregiver must be by notice to the group home administrator, or to the administrator's designee, as defined in California Code of Regulations, title 22, regulation section 84064.

(B) Local county practice and local rules of court determine the procedures for the provision of notice, except as otherwise provided in this rule. The person or persons responsible for providing notice as required by local court rules or local practice protocols are encouraged to use the most expeditious manner of service possible to ensure timely notice.

(C) Notice must be provided as follows:

~~(A)(i)~~ \* \* \*

~~(i)-(v)a-e~~ \* \* \*

~~(B)(ii)~~ \* \* \*

~~(i)-(v)a-e~~ \* \* \*

~~(C)(iii)~~ \* \* \*

~~(i)-(v)a-e~~ \* \* \*

~~(D)(iv)~~ \* \* \*

~~(i)-(vi)a-f~~ \* \* \*

~~(E)(v)~~ \* \* \*

~~(9)(11)~~ \* \* \*

~~(10)(12)~~ \* \* \*

(d) \* \* \*

(e) **Delegation of authority (§§ 369.5; 739.5)**

~~After consideration of an application and attachments and a review of the case file,~~  
If a child is removed from the custody of his or her parent or legal guardian, the court may order that the parent ~~be~~ is authorized to approve or deny the administration of psychotropic medication. The order must be based on the ~~following~~ findings in section 369.5 or section 739.5, which must be included in the order: (1) ~~the parent poses no danger to the child, and (2) the parent has the capacity to understand the request and the information provided and to authorize~~

1 ~~the administration of psychotropic medication to the child, consistent with the best~~  
2 ~~interest of the child.~~ The court may use *Order Delegating Judicial Authority Over*  
3 *Psychotropic Medication* (form JV-216) to document the findings and order.  
4

5 (f) \* \* \*

6  
7 (g) **Progress review**

8  
9 (1)–(5) \* \* \*

10  
11 (6) The child, caregiver, parents or legal guardians, and Court Appointed Special  
12 Advocate, if any, may provide input at the progress review as stated in (c)(2).  
13

14 (7) \* \* \*

15  
16 (h) **Copy of order to caregiver**

17  
18 (1)–(2) \* \* \*

19  
20 (3) If the court approves the request, the copy of the order must include the last  
21 two pages of form JV-220(A) or the last two pages of form JV-220(B) and all  
22 medication information sheets (medication monographs) that were attached  
23 to form JV-220(A) or form JV-220(B).  
24

25 (4) If the child resides in a group home or short-term residential therapeutic  
26 program, a copy of the order, the last two pages of form JV-220(A) or the last  
27 two pages of form JV-220(B), and all medication information sheets  
28 (medication monographs) that were attached to ~~the form~~ form JV-220(A) or form  
29 JV-220(B) must be provided to the group home administrator, or to the  
30 administrator's designee, as defined in California Code of Regulations, title  
31 22, regulation section 84064.  
32

33 (5) If the child changes placement, the social worker or probation officer must  
34 provide the new caregiver with a copy of the order, the last two pages of form  
35 JV-220(A) or the last two pages of form JV-220(B), and the medication  
36 information sheets (medication monographs) that were attached to form JV-  
37 220(A) or form JV-220(B).  
38

39 (i)–(k) \* \* \*

**Order Delegating Judicial Authority  
Over Psychotropic Medication***Clerk stamps date here when form is filed.*

**DRAFT**  
**Not approved by**  
**the Judicial Council**

*Fill in court name and street address:***Superior Court of California, County of***Fill in child's name and date of birth:***Child's Name:****Date of Birth:***Court fills in case number when form is filed.***Case Number:**

- ① Parent or legal guardian (*name*): \_\_\_\_\_
- ② The court finds as follows:
- a. The parent or legal guardian poses no danger to the child.
  - b. The parent or legal guardian has the capacity to authorize psychotropic medications.
- ③ The parent or legal guardian in ① is authorized to approve or deny the administration of psychotropic medication for the child, unless such authority is modified by a subsequently issued order.

Date:

\_\_\_\_\_  
*Type or print name of person completing this form.*\_\_\_\_\_  
*Signature*



## JV-217-INFO Guide to Psychotropic Medication Forms

Use these Judicial Council forms to ask for an order to give (or to continue giving) psychotropic medication to a child who is a ward or a dependent of the juvenile court and living in an out-of-home placement or in foster care, as defined in Welfare and Institutions Code section 727.4. Local forms may be used to provide additional information to the court.

*Exception:* These forms are **not** required in these situations:

- If the child lives in an out-of-home facility **not** considered foster care, as defined by section 727.4, unless a local court rule requires it; or
- If there is a previous court order that gives the child's parent(s) or guardian(s) the authority to approve or refuse the medication.

Required Forms	Optional Forms
JV-220 <i>Application for Psychotropic Medication</i>	The parent, guardian, child, caregiver, CASA, or Indian tribe wanting to give input to the court may use one of these forms:
JV-220(A) <i>Physician's Statement—Attachment</i>	JV-218 <i>Child's Opinion About the Medicine</i>
JV-220(B) <i>Physician's Request to Continue Medication—Attachment</i>	JV-219 <i>Statement About Medicine Prescribed</i>
JV-221 <i>Proof of Notice of Application</i>	A person who opposes the proposed medication or who wants to give the court more information may fill out this form:
JV-223 <i>Order on Application for Psychotropic Medication</i>	JV-222 <i>Input on Application for Psychotropic Medication</i>
JV-224 <i>County Report on Psychotropic Medication</i>	

### Required Forms

#### ① Form JV-220, *Application for Psychotropic Medication*

This *Application* gives the court basic information about the child and his/her living situation. It also provides contact information for the child's social worker or probation officer.

This form is usually completed by the social worker or probation officer, but is sometimes completed by the prescribing physician or his/her staff, or the child's caregiver.

Whoever completes the form must identify him/herself by name and by signing the form. If the prescribing physician completes this form, s/he must also complete and sign form JV-220(A) or form JV-220(B). (See below.)

#### ② Form JV-220(A), *Physician's Statement—Attachment*

This form must be used to ask the court for a new order. It can also be used to request to continue medication. The prescribing doctor fills out this form then gives it to the person who files the *Application* (form JV-220).

This form provides a record of the child's medical history, diagnosis, previous treatments, and information about the child's previous experience with psychotropic medications. The doctor will list his/her reasons for recommending the psychotropic medications.

**Emergencies:** A child may **not** receive psychotropic medication without a court order except in an emergency. A doctor may administer the medication on an emergency basis. For a case to qualify as an emergency, the doctor

must find that the child's mental condition requires immediate medication to protect him/her or others from serious harm or significant suffering, and that waiting for the court's authorization would put the child or others at risk. After a doctor administers emergency medication, s/he has two days at most to ask for the court's authorization.

#### ③ Form JV-220(B), *Physician's Request to Continue Medication—Attachment*

This is a shorter version of form JV-220(A). It may be used only by the same doctor who filled out the most recent form JV-220(A) if s/he is prescribing the same medication with the same maximum dosage. The prescribing doctor fills out this form then gives it to the person who is filing the *Application* (form JV-220).

#### ④ Form JV-221, *Proof of Notice of Application*

This form shows the court that all parties with a right to receive notice were served a copy of the *Application* and attachments, according to rule 5.640 of California Rules of Court.

The person(s) in charge of notice must fill out and sign this form. A separate signature line is provided on each page of the form to accommodate those courts in which the provision of notice is shared between agencies. This occurs when local practices or local court rules require the child welfare services agency to provide notice to the parent or legal guardian and the caregiver, and the juvenile court clerk's office to provide notice to the attorneys and CASA



volunteer. If one agency does all the required noticing, only one signature is required on page 3 of the form. The person(s) in charge of service should use the fastest method of service available so that people can be served on time. E-notice can be used only if the person or people to be e-served agree to it. (Code Civ. Proc., § 1010.6)

**⑤ Form JV-223, Order on Application for Psychotropic Medication**

This form lists the court's findings and orders about the child's psychotropic medications. The agency or person who filed the *Application* must provide the child's caregiver a copy of the court order approving or denying the *Application*.

The copy of the order must be provided (in person or by mail) within two days of when the order is made.

If the court approves the *Application*, the copy of the order must include the last two pages of form JV-220(A) or JV-220(B), and all of the medication information sheets (medication monographs) that were attached to form JV-220(A) or JV-220(B).

If the child's placement is changed, the social worker or probation officer must provide the new caregiver with a copy of the order, the last two pages of form JV-220(A) or JV-220(B), and all of the medication information sheets (medication monographs) that were attached to form JV-220(A) or JV-220(B).

**⑥ Form JV-224, County Report on Psychotropic Medication**

The social worker or probation officer must complete and file this form before each progress review. It has information that the court must review, including the caregiver's and child's observations about the medicine's effectiveness and side effects, information on medication management appointments and other follow-up appointments with medical practitioners, and information on the delivery of other mental health treatments.

This form must be filed at least 10 calendar days before the progress review hearing. If the progress review is scheduled for the same time as a status review hearing, the form must be attached to and filed with the court report.

## Optional Forms

**⑦ Form JV-218, Child's Opinion About the Medicine**

The child may use this form to tell the judge about him/herself and his/her opinion about the medicine.

The child may ask someone s/he trusts for help with the form.

The child may also tell the judge how s/he feels in person at the hearing, by letter, or through his social worker, probation officer, lawyer, or CASA.

**⑧ Form JV-219, Statement About Medicine Prescribed**

The parent, guardian, caregiver, CASA, or Indian tribe may use this form to tell the court how they feel about the *Application*, and the effectiveness and side effects of the medicine.

This form must be filed within four court days of receipt of the notice of an *Application*, or before any status review hearing or medication progress review hearing.

This form is not the only way for the parent, guardian, caregiver, CASA, or tribe to provide information to the court. They can also provide input on the medication by letter; by talking to the judge at the court hearing; or through the social worker, probation officer, attorney of record, or CASA. A CASA can also file a report under local rule.

**⑨ Form JV-222, Input on Application for Psychotropic Medication**

This form may be used when the parent or guardian, attorney of record for a parent or guardian, child, child's attorney, child's CAPTA guardian ad litem, or Indian child's tribe does not agree that the child should take the recommended psychotropic medication. This form may also be used to provide input to the court.

Within four court days of service of notice of the pending application regarding psychotropic medication, the parent or guardian, his or her attorney, the child, the child's attorney, the child's CAPTA guardian ad litem, or the Indian child's tribe that disagrees must complete, sign, and file form JV-222 with the clerk of the juvenile court.

The court will make a decision about the child's psychotropic medication after reading the *Application*, its attachments, and all statements filed on time. The court is not required to set a hearing if a statement opposed to medication 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 parents or legal guardians, 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. In delinquency matters, the clerk also must provide notice to the child regardless of his or her age, the child's probation officer, and the district attorney.

# Statement About Medicine Prescribed

Clerk stamps date here when form is filed.

You may use this form to give the court input on the request for an order for medication for the youth.

You do not *have to* use this form if you do not want to. There are other ways to give input to the court. You may:

- Send a letter to the judge,
- Speak to the judge at the hearing, or
- Ask your lawyer or the child's social worker, probation officer, or CASA to tell the judge how you feel.

You may add pages to this form if you need more space for your answers. Please put the child's name and the number of the question you are answering on each extra page.

**Child's name:**

\_\_\_\_\_  
(first) (middle) (last)

① Your name: \_\_\_\_\_  
(first) (middle) (last)

② Your relationship to the child: ☐ Caregiver ☐ CASA ☐ Parent  
☐ Legal Guardian ☐ Indian Tribe  
☐ Other (explain): \_\_\_\_\_

③ How long have you known the child? \_\_\_\_\_  
(years) (months) (days)

④ How long has the child lived in your home or facility? \_\_\_\_\_  
(years) (months) (days)

☐ The child does not live with me.

## Child's Behavior

⑤ How does the child act at home? ☐ Don't know

Describe here: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

⑥ How does the child act at school? ☐ Don't know

Describe here: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DRAFT**  
**Not approved by**  
**the Judicial Council**

Fill in court name and street address:

Superior Court of California, County of \_\_\_\_\_

Fill in child's name and date of birth:

**Child's Name:**

**Date of Birth:**

Court fills in case number when form is filed.

**Case Number:**



Child's name: \_\_\_\_\_

- 7 How does the child interact with friends and peers? ☐ Don't know

Describe here: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- 8 How does the child interact with adults? ☐ Don't know

Describe here: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- 9 How does the child sleep? ☐ Don't know

Describe how well the child sleeps and about how many hours each day: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### Describe the Child's Treatment Now

- 10 List any other treatment the child is doing now:

- ☐ None ☐ Individual talk therapy ☐ Family therapy  
☐ Group talk therapy ☐ Counseling at school ☐ Art or play therapy  
☐ Cognitive Behavioral Therapy (CBT or practicing behaviors)  
☐ Other (list any other treatment here): \_\_\_\_\_  
 \_\_\_\_\_

- 11 List all the medicines the child takes regularly now: ☐ Don't know

Name of medicine: \_\_\_\_\_ Dose (if you know): \_\_\_\_\_  
 Name of medicine: \_\_\_\_\_ Dose (if you know): \_\_\_\_\_  
 Name of medicine: \_\_\_\_\_ Dose (if you know): \_\_\_\_\_  
☐ Other medicines (list here): \_\_\_\_\_  
 \_\_\_\_\_

- 12 Did you meet with the doctor who prescribed the psychotropic medicine? ☐ Yes ☐ No

If Yes:

- a. Did the doctor explain the medicine's expected benefits, and possible side effects, and provide other information about the medicine? ☐ Yes ☐ No  
 b. Did you give the doctor information about the child? ☐ Yes ☐ No  
 c. Do you agree with use of the medication? ☐ Yes ☐ No ☐ Not sure



Child's name: \_\_\_\_\_

Case Number: _____
--------------------

**13 Follow-up and Maintenance**

- a. Do you know about the child's follow-up plan with this doctor? ☐ Yes ☐ No
- b. Do you know how to schedule follow-up appointments with this doctor? ☐ Yes ☐ No
- c. Do you know how and where to get the medicine the doctor prescribed? ☐ Yes ☐ No
- d. Do you know how to make sure the child gets to the follow-up appointments? ☐ Yes ☐ No
- e. Do you know how the child is supposed to take this medicine? ☐ Yes ☐ No
- f. Do you know who is in charge of making sure s/he takes the medicine correctly? ☐ Yes ☐ No  
*If Yes, describe here:* \_\_\_\_\_
- g. Do you know what to do if the child has a bad reaction to the medicine? ☐ Yes ☐ No

**14** List below anything else you want the judge to know.

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**Fill out questions 15–23 ONLY if the child is taking psychotropic medicine now**

*If the child is not taking this/any psychotropic medicine now, skip to question 24.*

- 15** Does the medicine affect the child's school or ability to learn? ☐ Yes ☐ No ☐ Don't know  
*If Yes, describe here:* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 16** Does the medicine affect the child's ability to concentrate? ☐ Yes ☐ No ☐ Don't know  
*If Yes, describe here:* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 17** Does the child have reasonable energy levels throughout the day? ☐ Yes ☐ No ☐ Don't know  
*If No, describe here:* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 18** Does the medicine affect the child's participation in hobbies or after-school activities?  
☐ Yes ☐ No ☐ Don't know  
*If Yes, describe here:* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Child's name: \_\_\_\_\_

Case Number: \_\_\_\_\_

- 19** Is it easy to get the child to take the medicine? ☐ Yes ☐ No ☐ Don't know

If No, describe what it's like: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 20** Does anyone talk to the child about how he or she feels when he or she is on this medicine?

☐ Yes ☐ No ☐ Don't know

If Yes, explain who and how often: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 21** Has the child's weight changed with this medicine? ☐ Yes ☐ No ☐ Don't know

If Yes, check one: ☐ Lost weight ☐ Gained weight How many pounds? \_\_\_\_\_

- 22** List any other side effects from the medicine:

☐ Headache ☐ Constipation ☐ Confusion ☐ Feel dizzy  
☐ Problems sleeping ☐ Feeling very sleepy ☐ Nausea  
☐ Other (list any other side effects here): \_\_\_\_\_  
\_\_\_\_\_

- 23** List any benefits you have noticed from the child's taking this medicine:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 24** ☐ Check here if you are going to add extra pages to this form. And say how many pages: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Type or print your name

\_\_\_\_\_  
Sign your name

**JV-220****Application for  
Psychotropic Medication**

A completed and signed *Physician's Statement—Attachment (form JV-220(A))*, or *Physician's Request to Continue Medication—Attachment (form JV-220(B))* with all its attachments must be attached to this form before it is filed with the court. Read form JV-217-INFO, *Guide to Psychotropic Medication Forms*, for more information about the required forms and the application process.

Clerk stamps date here when form is filed.

Fill in court name and street address:

**Superior Court of California, County of**

Fill in child's name and date of birth:

**Child's Name:****Date of Birth:**

Court fills in case number when form is filed.

**Case Number:****1** Information about where the child lives:

- a. The child lives ☐ with a relative ☐ in a foster home  
☐ with a nonrelative extended family member  
☐ in a group home, level \_\_\_\_\_ ☐ at a juvenile custodial facility  
☐ in a short-term residential therapeutic program  
☐ other (specify): \_\_\_\_\_

b. If applicable, the name of the facility where the child lives:  
 \_\_\_\_\_

c. Contact information for a responsible adult where the child lives:

(1) Name:

(2) Phone:

d. The child has lived at the placement in (a) since (insert date):  
 \_\_\_\_\_

**2** Information about the child's current location:

- a. ☐ The child remains at the location identified in **1**.  
 b. ☐ The child is currently staying in:  
 (1) ☐ a psychiatric hospital (name):  
 (2) ☐ a juvenile hall (name):  
 (3) ☐ other (specify):

**3** Child's ☐ social worker ☐ probation officer

a. Name:

b. Address:

c. Phone:

E-mail:

Fax:

**4** Number of pages attached:

Date:  
 \_\_\_\_\_

\_\_\_\_\_  
 Type or print name of person completing this form

Signature

- ☐ Child welfare services staff (sign above, complete items **1**–**13**, and sign on page 4)  
☐ Probation department staff (sign above, complete items **1**–**13**, and sign on page 4)  
☐ Medical office staff (sign above)  
☐ Caregiver (sign above)  
☐ Prescribing physician (sign on page 6 of JV-220(A) or page 4 of JV-220(B))



Child's name: \_\_\_\_\_

Case Number: \_\_\_\_\_

If you are the child's social worker or probation officer, you must fill out items 5–13 of this form. If you do not know the answer to a question, write "I do not know." If you are **not** the child's social worker or probation officer, you do not need to fill out items 5–13 of this form.

- 5 Describe if the child has shared feelings about starting to take medication. If this is a request to renew or modify medication, include what the child reports regarding the benefits and side effects of having taken the medication.

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- 6 The child will provide input on the medication being prescribed (*check all that apply*):

- a. ☐ Through the social worker/probation officer.      b. ☐ Through **his or her** attorney.  
c. ☐ Through **his or her** CASA.      d. ☐ By filling out form JV-218.  
e. ☐ By writing a letter to the judge.      f. ☐ By talking to the judge at a hearing.  
g. ☐ Other (*specify*): \_\_\_\_\_

- 7 Describe what the caregiver reports regarding the child being placed on the medication. If this is a request to renew or modify medication, include what the caregiver reports regarding the benefits and side effects of having the child take medication.

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- 8 The caregiver will provide input on the medication being prescribed (*check all that apply*):

- a. ☐ Through the social worker/probation officer.  
b. ☐ By filling out **form** JV-219.  
c. ☐ By writing a letter to the judge.  
d. ☐ By talking to the judge at a hearing.  
e. ☐ Other (*specify*): \_\_\_\_\_

- 9 a. Is the information provided by the physician on form JV-220(A) at questions 10 and 11 or on form JV-220(B) at question 8 accurate, to the best of your knowledge?  
☐ Yes      ☐ No      ☐ I do not know
- b. Do you have additional information about mental health treatment alternatives to the proposed medications that have been used in the last six months?      ☐ Yes      ☐ No      If yes, explain:

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Child's name: \_\_\_\_\_

Case Number:
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- 9 c. Do you have additional information to add about other psychotropic medications that have been tried in the last six months? ☐ Yes ☐ No If yes, explain:
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

d. List the psychotropic medications that you know were taken by the child in the past and the reason or reasons these were stopped, if the reasons are known to you.

Medication name (generic or brand)	Reason for stopping

- 10 Therapeutic services, other than medication, which the child is enrolled in or is recommended to participate in during the next six months (check all that apply; include frequency for therapy on blank line):
- a. ☐ Group therapy: \_\_\_\_\_ b. ☐ Individual therapy: \_\_\_\_\_
- c. ☐ Milieu therapy (explain): \_\_\_\_\_
- d. ☐ Therapeutic Behavioral Services (TBS): \_\_\_\_\_
- e. ☐ Therapy for children on the autism spectrum: \_\_\_\_\_
- f. ☐ Art therapy: \_\_\_\_\_
- g. ☐ Cognitive behavioral therapy (CBT): \_\_\_\_\_
- h. ☐ Wraparound services: \_\_\_\_\_
- i. ☐ American Indian/Alaska Native healing and cultural traditions: \_\_\_\_\_
- j. ☐ Speech therapy: \_\_\_\_\_
- k. ☐ In Home Behavioral Services (IHBS): \_\_\_\_\_
- l. ☐ Other modality (explain): \_\_\_\_\_

- 11 What other services could benefit or enhance the child's well-being (for example, sports, art, extracurricular activities)?
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**Case Number:**

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This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Signature

- ☐ Child welfare services staff (*sign above*)
- ☐ Probation department staff (*sign above*)

**JV-220(A)****Physician's Statement—  
Attachment**Case Number: 

This form must be completed and signed by the prescribing physician. Read form JV-217-INFO, *Guide to Psychotropic Medication Forms*, for more information about the required forms and the application process.

**1** Information about the child (*name*): \_\_\_\_\_

Date of birth: \_\_\_\_\_ Current height: \_\_\_\_\_ Current weight: \_\_\_\_\_

Gender: \_\_\_\_\_ Ethnicity: \_\_\_\_\_

**2** Type of request:

- a. ☐ An initial request to administer psychotropic medication to this child
- b. ☐ A request to start a new medication or to increase the maximum dose of a previously approved medication
- c. ☐ A request to continue psychotropic medication the child is currently taking

**3** ☐ This application is made during an emergency situation as defined in California Rules of Court, rule 5.640(i). The emergency circumstances requiring the temporary administration of psychotropic medication pending the court's decision on this application are:

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**4** Prescribing physician:

a. Name: \_\_\_\_\_ License number: \_\_\_\_\_

b. Address: \_\_\_\_\_

c. Phone numbers: \_\_\_\_\_

d. Medical specialty of prescribing physician:

- ☐ Child/adolescent psychiatry    ☐ General psychiatry    ☐ Family practice/GP    ☐ Pediatrics  
☐ Other (*specify*): \_\_\_\_\_

e. How long have you been treating the child? \_\_\_\_\_ years \_\_\_\_\_ months \_\_\_\_\_ days

f. In what capacity have you been treating the child (e.g., treating psychiatrist, treating pediatrician)?

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**5** This request is based on a face-to-face clinical evaluation of the child by:

a. ☐ The prescribing physician on (*date*): \_\_\_\_\_

b. ☐ Other (*provide name, professional status, and date of evaluation*): \_\_\_\_\_

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**6** Information about the child was provided to the prescribing physician by (*check all that apply*):

☐ Child    ☐ Caregiver    ☐ Teacher    ☐ Social worker    ☐ Probation officer    ☐ Parent

☐ Public health nurse    ☐ Tribe

☐ Records (*specify*): \_\_\_\_\_

☐ Other (*specify*): \_\_\_\_\_



Child's name: \_\_\_\_\_

Case Number:
--------------

7 Provide to the court your assessment of the child's overall mental health. ☐ I don't know.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8 Describe the child's symptoms, including duration, and the child's treatment plan. ☐ I don't know.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9 a. Describe the child's response to any current psychotropic medication. ☐ I don't know.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

b. Describe the symptoms not alleviated or ameliorated by other current or past treatment efforts. ☐ I don't know.

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



Child's name: \_\_\_\_\_

Case Number:
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- 10 a. Have nonpharmacological treatment alternatives to the proposed medications been tried in the last six months?  
☐ Yes      ☐ No      ☐ I don't know.
- b. If yes, describe the treatment and the child's response. If no, explain why not.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

- 11 a. Have other pharmacological treatment alternatives to the proposed medications been tried in the last six months?  
☐ Yes      ☐ No      ☐ I don't know.
- b. If yes, describe the treatment and the child's response. If no, explain why not.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

c. List the psychotropic medications that you know were taken by the child in the past and the reason or reasons these were stopped if the reasons are known to you.

<i>Medication name (generic or brand)</i>	<i>Reason for stopping</i>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

- 12 Diagnoses from *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5)*:
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Child's name: \_\_\_\_\_

- 13** Relevant medical history (*describe, specifying significant medical conditions, all current nonpsychotropic medications, date of last physical examination, and any recent abnormal laboratory results*):

☐ I don't know.

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- 14** a. ☐ All essential laboratory tests were performed.  
 b. ☐ All essential laboratory tests were not performed (*explain what laboratory tests were not done and why*).

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- 15** a. ☐ The child was told in an age-appropriate manner about the recommended medications, the anticipated benefits, the possible side effects, and that a request to the court for permission to begin and/or continue the medication will be made and that he or she may oppose the request. The child's response was

☐ agreeable      ☐ not agreeable

Briefly describe child's response: \_\_\_\_\_

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- b. ☐ The child has not been informed of this request, the recommended medications, their anticipated benefits, and their possible adverse reactions because:

(1) ☐ The child lacks the capacity to provide a response (*explain*): \_\_\_\_\_

(2) ☐ other (*explain*): \_\_\_\_\_

- 16** Therapeutic services, other than medication, in which the child is enrolled in or is recommended to participate during the next six months (*check all that apply; include frequency for therapy on blank line*):

a. ☐ Group therapy: \_\_\_\_\_ b. ☐ Individual therapy: \_\_\_\_\_

c. ☐ Milieu therapy (*explain*): \_\_\_\_\_

d. ☐ Therapeutic Behavioral Services (TBS): \_\_\_\_\_

e. ☐ Therapy for children on the autism spectrum: \_\_\_\_\_

f. ☐ Art therapy: \_\_\_\_\_

g. ☐ Cognitive behavioral therapy (CBT): \_\_\_\_\_

h. ☐ Wraparound services: \_\_\_\_\_

i. ☐ American Indian/Alaska Native healing and cultural traditions: \_\_\_\_\_

j. ☐ Speech therapy: \_\_\_\_\_

k. ☐ In Home Behavioral Services (IHBS): \_\_\_\_\_

l. ☐ Other modality (*explain*): \_\_\_\_\_

Child's name: \_\_\_\_\_

- 17 a. Mandatory Information Attached:** Significant side effects, warnings/contraindications, drug interactions (including those with continuing psychotropic medication and all nonpsychotropic medication currently taken by the child), and withdrawal symptoms for each recommended medication are included in the attached material.

b. ☐ The caregiver was informed of the mandatory information, which is attached.

c. ☐ The caregiver's response was ☐ agreeable ☐ other (explain):

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- 18** Additional information regarding medication treatment plan and follow-up: \_\_\_\_\_

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- 19** List all psychotropic medications currently administered that you propose to continue and all psychotropic medications you propose to begin administering. Mark each psychotropic medication as New (N) or Continuing (C).

Medication name (generic/brand) and class, and symptoms targeted by each medication's anticipated benefit to child	C or N	Maximum total mg/day	Treatment duration* 6-month maximum	Administration schedule
				<ul style="list-style-type: none"> <li>Initial and target schedule for new medication</li> <li>Current schedule for continuing medication</li> <li>Provide mg/dose and # of doses/day</li> <li>If PRN, provide conditions and parameters for use</li> </ul>
Med: Class: Targets:				
Med: Class: Targets:				
Med: Class: Targets:				
Med: Class: Targets:				

\*Authorization to administer the medication is limited to this time frame or six months from the date the order is issued, whichever occurs first.



Child's name: \_\_\_\_\_

Case Number:
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**20** Other information about the prescribed medication that you want the court to know (e.g., reasons for prescribing more than one medication in a class, prescribing outside the approved range, or prescribing medication not approved for a child of this age):


**21** List all psychotropic medications currently administered that will be stopped if this application is granted.

<i>Medication name (generic or brand)</i>	<i>Reason for stopping</i>	<i>Stop immediately or over period of time? (specify, including time)</i>

Date:

\_\_\_\_\_  
*Type or print name of prescribing physician*

\_\_\_\_\_  
*Signature of prescribing physician*



**JV-220(B)****Physician's Request to Continue  
Medication—Attachment**Case Number: 

This form must be completed and signed by the prescribing physician. Read form JV-217-INFO, *Guide to Psychotropic Medication Forms*, for more information about the required forms and the application process.

- 1 Information about the child (*name*): \_\_\_\_\_  
 Date of birth: \_\_\_\_\_ Current height: \_\_\_\_\_ Current weight: \_\_\_\_\_  
 Gender: \_\_\_\_\_ Ethnicity: \_\_\_\_\_
- 2 Fill out this form **only** if both boxes below are checked. If you cannot check both boxes, fill out form JV-220(A).
  - a. ☐ This is a request to continue the same psychotropic medication and maximum dosage that the child is currently taking.
  - b. ☐ This is the same prescribing physician who **completed** the most recent form JV-220(A).
- 3 Prescribing physician:
  - a. Name: \_\_\_\_\_ License number: \_\_\_\_\_
  - b. Address: \_\_\_\_\_
  - c. Phone numbers: \_\_\_\_\_
  - d. Medical specialty of prescribing physician:
 

☐ Child/adolescent psychiatry
☐ General psychiatry
☐ Family practice/GP
☐ Pediatrics

☐ Other (*specify*): \_\_\_\_\_
- 4 This request is based on a face-to-face clinical evaluation of the child by:
  - a. ☐ The prescribing physician on (*date*): \_\_\_\_\_
  - b. ☐ Other (*provide name, professional status, and date of evaluation*): \_\_\_\_\_
- 5 Information about the child was provided to the prescribing physician by (*check all that apply*):
 

☐ Child    ☐ Caregiver    ☐ Teacher    ☐ Social worker    ☐ Probation officer    ☐ Parent  
☐ Public health nurse    ☐ Tribe  
☐ Records (*specify*): \_\_\_\_\_  
☐ Other (*specify*): \_\_\_\_\_
- 6 Provide to the court your assessment of the child's overall mental health.  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



Child's name: \_\_\_\_\_

Case Number:
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7 a. Describe the child's response to any current psychotropic medication.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

b. Describe the symptoms not alleviated or ameliorated by other current or past treatment efforts.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8 a. Have nonpharmacological treatment alternatives to the proposed medications been tried in the last six months?

☐ Yes      ☐ No      ☐ I don't know.

b. If yes, describe the treatment and the child's response. If no, explain why not.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9 Diagnoses from *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5)*:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

10 Relevant medical history (*describe, specifying significant medical conditions, all current nonpsychotropic medications, date of last physical examination, and any recent abnormal laboratory results*):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



Child's name: \_\_\_\_\_

Case Number:
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- 11 a. ☐ All essential laboratory tests were performed.
- b. ☐ All essential laboratory tests were not performed (*explain what laboratory tests were not done and why*).  
\_\_\_\_\_  
\_\_\_\_\_

- 12 a. ☐ The child was told in an age-appropriate manner about the recommended medications, the anticipated benefits, the possible side effects, and that a request to the court for permission to begin and/or continue the medication will be made and that he or she may oppose the request. The child's response was:  
☐ Agreeable      ☐ Not agreeable  
Briefly describe child's response: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- b. ☐ The child has not been informed of this request, the recommended medications, their anticipated benefits, and their possible adverse reactions because:  
(1) ☐ The child lacks the capacity to provide a response (*explain*): \_\_\_\_\_  
\_\_\_\_\_  
(2) ☐ Other (*explain*): \_\_\_\_\_  
\_\_\_\_\_

- 13 a. **Mandatory Information Attached:** Significant side effects, warnings/contraindications, drug interactions (including those with continuing psychotropic medication and all nonpsychotropic medication currently taken by the child), and withdrawal symptoms for each recommended medication are included in the attached material.
- b. ☐ The caregiver was informed of the mandatory information, which is attached.
- c. ☐ The caregiver's response was      ☐ agreeable      ☐ other (*explain*):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 14 Additional information regarding medication treatment plan and follow-up: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Child's name: \_\_\_\_\_

- 15** Therapeutic services, other than medication, in which the child is enrolled in or is recommended to participate during the next six months (*check all that apply; include frequency for therapy on blank line*):

- a. ☐ Group therapy: \_\_\_\_\_ b. ☐ Individual therapy: \_\_\_\_\_  
 c. ☐ Milieu therapy (*explain*): \_\_\_\_\_  
 d. ☐ Therapeutic Behavioral Services (TBS): \_\_\_\_\_  
 e. ☐ Therapy for children on the autism spectrum: \_\_\_\_\_  
 f. ☐ Art therapy: \_\_\_\_\_ g. ☐ Cognitive behavioral therapy (CBT): \_\_\_\_\_  
 h. ☐ Wraparound services: \_\_\_\_\_  
 i. ☐ American Indian/Alaska Native healing and cultural traditions: \_\_\_\_\_  
 j. ☐ Speech therapy: \_\_\_\_\_  
 k. ☐ In Home Behavioral Services (IHBS): \_\_\_\_\_  
 l. ☐ Other modality (*explain*): \_\_\_\_\_

- 16** List all psychotropic medications currently administered that you propose to continue.

<i>Medication name (generic/brand) and symptoms targeted by each medication's anticipated benefit to child</i>	<i>Maximum total mg/day</i>	<i>Treatment duration* 6-month maximum</i>	<i>Administration schedule</i> • Initial and target schedule for new medication • Current schedule for continuing medication • Provide mg/dose and # of doses/day • If PRN, provide conditions and parameters for use
Med: Class: Targets:			
Med: Class: Targets:			
Med: Class: Targets:			
Med: Class: Targets:			

\*Authorization to administer the medication is limited to this time frame or six months from the date the order is issued, whichever occurs first.

- 17** Other information about the prescribed medication that you want the court to know (e.g., reasons for prescribing more than one medication in a class, prescribing outside the approved range, or prescribing medication not approved for a child of this age):

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Date:

Type or print name of prescribing physician



Signature of prescribing physician

Read form JV-217-INFO, *Guide to Psychotropic Medication Forms*, for more information about the required forms and the application process.

Clerk stamps date here when form is filed.

**DRAFT**  
**Not approved by**  
**the Judicial Council**

Fill in court name and street address:

**Superior Court of California, County of**

Fill in child's name and date of birth:

**Child's Name:**

**Date of Birth:**

Court fills in case number when form is filed.

**Case Number:**

- ① ☐ The following parents/legal guardians of the child were notified of the physician's request to begin and/or to continue administering psychotropic medication, of the name of each medication, and that an application is pending before the court. They were also provided with form JV-217-INFO, a blank copy of form JV-219, *Statement About Medicine Prescribed*, and a blank copy of form JV-222, *Input on Application for Psychotropic Medication*.

a. Name: \_\_\_\_\_ Date notified: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Manner: ☐ In person ☐ By phone at (specify): \_\_\_\_\_

☐ By electronic service at (e-mail address): \_\_\_\_\_  
(time sent): \_\_\_\_\_

☐ By depositing the required information in a sealed envelope in the U.S. mail, with first-class postage prepaid, to the last known address (specify): \_\_\_\_\_

b. Name: \_\_\_\_\_ Date notified: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Manner: ☐ In person ☐ By phone at (specify): \_\_\_\_\_

☐ By electronic service at (e-mail address): \_\_\_\_\_  
(time sent): \_\_\_\_\_

☐ By depositing the required information in a sealed envelope in the U.S. mail, with first-class postage prepaid, to the last known address (specify): \_\_\_\_\_

c. Name: \_\_\_\_\_ Date notified: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Manner: ☐ In person ☐ By phone at (specify): \_\_\_\_\_

☐ By electronic service at (e-mail address): \_\_\_\_\_ (time sent): \_\_\_\_\_

☐ By depositing the required information in a sealed envelope in the U.S. mail, with first-class postage prepaid, to the last known address (specify): \_\_\_\_\_

- ② ☐ Parental rights were terminated, and the child has no legal parents who must be informed.

- ③ ☐ Parent/legal guardian (name): \_\_\_\_\_  
was not informed because (state reason): \_\_\_\_\_

- ④ ☐ Parent/legal guardian (name): \_\_\_\_\_  
was not informed because (state reason): \_\_\_\_\_

- ⑤ The child's current caregiver was notified that a physician is asking to treat the child with psychotropic medication and that an application is pending before the court. The caregiver was provided with form JV-217-INFO, *Guide to Psychotropic Medication Forms*, a blank copy of form JV-218, *Child's Opinion About the Medicine*, and a blank copy of form JV-219, *Statement About Medicine Prescribed* as follows:



Child's name: \_\_\_\_\_

- 5 Caregiver's name: \_\_\_\_\_ Date notified: \_\_\_\_\_  
 Manner: ☐ In person ☐ By phone at (specify): \_\_\_\_\_ ☐ By electronic service at (e-mail address): \_\_\_\_\_  
 (time sent): \_\_\_\_\_ ☐ By depositing the required information  
 in a sealed envelope in the U.S. mail, with first-class postage prepaid, to the following address (specify): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_

Type or print name \_\_\_\_\_

Sign your name \_\_\_\_\_

☐ Signature follows on page 3.

- 6 ☐ The child's attorney and the child's CAPTA guardian ad litem, if that person is someone other than the child's attorney, were provided with completed form JV-220, *Application for Psychotropic Medication*; completed form JV-220(A), *Physician's Statement—Attachment* or completed form JV-220(B), *Physician's Request to Continue Medication—Attachment*; a copy of form JV-217-INFO, *Guide to Psychotropic Medication Forms* or information on how to obtain a copy of the form; a blank copy of form JV-218, *Child's Opinion About the Medicine* or information on how to obtain a copy of the form; and a blank copy of form JV-222, *Input on Application for Psychotropic Medication* or information on how to obtain a copy of the form, as follows:

- a. Attorney's name: \_\_\_\_\_ Date notified: \_\_\_\_\_  
 Manner: ☐ In person ☐ By fax at (specify): \_\_\_\_\_  
☐ By electronic service at (e-mail address): \_\_\_\_\_ (time sent): \_\_\_\_\_  
☐ By depositing copies in a sealed envelope in the U.S. mail, with first-class postage prepaid, to the last known address (specify): \_\_\_\_\_
- b. CAPTA guardian ad litem's name: \_\_\_\_\_ Date notified: \_\_\_\_\_  
 Manner: ☐ In person ☐ By fax at (specify): \_\_\_\_\_  
☐ By electronic service at (e-mail address): \_\_\_\_\_ (time sent): \_\_\_\_\_  
☐ By depositing copies in a sealed envelope in the U.S. mail, with first-class postage prepaid, to the last known address (specify): \_\_\_\_\_

- 7 ☐ The following attorneys were notified of the physician's request to begin and/or continue administering psychotropic medication, of the name of each medication, and that an application is pending before the court. They were also provided with form JV-217-INFO, *Guide to Psychotropic Medication Forms*; a blank copy of form JV-219, *Statement About Medicine Prescribed*; and a blank copy of form JV-222, *Input on Application for Psychotropic Medication*, as follows:

- a. Attorney's name: \_\_\_\_\_ Date notified: \_\_\_\_\_  
 Attorney for (name): \_\_\_\_\_  
 Manner: ☐ In person ☐ By phone at (specify): \_\_\_\_\_ ☐ By fax at (specify): \_\_\_\_\_  
☐ By electronic service at (e-mail address): \_\_\_\_\_ (time sent): \_\_\_\_\_  
☐ By depositing the required information and copies of forms JV-217-INFO and JV-222 in a sealed envelope in the U.S. mail, with first-class postage prepaid, to the last known address (specify): \_\_\_\_\_
- b. Attorney's name: \_\_\_\_\_ Date notified: \_\_\_\_\_  
 Attorney for (name): \_\_\_\_\_  
 Manner: ☐ In person ☐ By phone at (specify): \_\_\_\_\_ ☐ By fax at (specify): \_\_\_\_\_  
☐ By electronic service at (e-mail address): \_\_\_\_\_ (time sent): \_\_\_\_\_



Child's name: \_\_\_\_\_

- 7 b. ☐ By depositing the required information in a sealed envelope in the U.S. mail, with first-class postage prepaid, to the last known address (*specify*): \_\_\_\_\_
- c. Attorney's name: \_\_\_\_\_ Date notified: \_\_\_\_\_  
 Attorney for (*name*): \_\_\_\_\_  
 Manner: ☐ In person ☐ By phone at (*specify*): \_\_\_\_\_ ☐ By fax at (*specify*): \_\_\_\_\_  
☐ By electronic service at (*e-mail address*): \_\_\_\_\_ (*time sent*): \_\_\_\_\_  
☐ By depositing the required information in a sealed envelope in the U.S. mail, with first-class postage prepaid, to the last known address (*specify*): \_\_\_\_\_

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_

Type or print name \_\_\_\_\_

Sign your name \_\_\_\_\_

☐ Signature appears below

- 8 ☐ The child's CASA volunteer was notified of the physician's request to begin and/or continue administering psychotropic medication, of the name of each medication, and that an application is pending before the court. The CASA volunteer was provided with form JV-217-INFO, *Guide to Psychotropic Medication Forms*; a blank copy of form JV-218, *Child's Opinion About the Medicine*; and a blank copy of form JV-219, *Statement About Medicine Prescribed*, as follows:

CASA volunteer (*name*): \_\_\_\_\_ Date notified: \_\_\_\_\_  
 Manner: ☐ In person ☐ By phone at (*specify*): \_\_\_\_\_  
☐ By electronic service at (*e-mail address*): \_\_\_\_\_ (*time sent*): \_\_\_\_\_  
☐ By depositing the required information in a sealed envelope in the U.S. mail, with first-class postage prepaid, to the last known address (*specify*): \_\_\_\_\_

- 9 ☐ The Indian child's tribe was notified of the physician's request to begin and/or continue administering psychotropic medication, of the name of each medication, and that an application is pending before the court. It was also provided with form JV-217-INFO, *Guide to Psychotropic Medication Forms*; a blank copy of form JV-218, *Child's Opinion About the Medicine*; a blank copy of form JV-219, *Statement About Medicine Prescribed*; and a blank copy of JV-222, *Input on Application for Psychotropic Medication* or information on how to obtain a copy of the forms, as follows:

Indian Tribe (*name*): \_\_\_\_\_ Date notified: \_\_\_\_\_  
 Manner: ☐ In person ☐ By phone at (*specify*): \_\_\_\_\_ ☐ By fax at (*specify*): \_\_\_\_\_  
☐ By electronic service at (*e-mail address*): \_\_\_\_\_ (*time sent*): \_\_\_\_\_  
☐ By depositing the required information in a sealed envelope in the U.S. mail, with first-class postage prepaid, to the last known address (*specify*): \_\_\_\_\_

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_

Type or print name \_\_\_\_\_

Sign your name \_\_\_\_\_





Child's name: \_\_\_\_\_

Case Number:
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6 The application is not opposed, but I want to tell the court the following:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7 ☐ I am the attorney for the child.

a. ☐ I need more time to investigate the application.

b. ☐ I need the following information to determine whether to agree with or oppose the application:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

c. ☐ There is other information the judge should know:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_


\_\_\_\_\_

8 ☐ Additional information about the child for the court to consider is included on an attached sheet or sheets of paper. (Write "Attachment 5" on top.)

Date:

\_\_\_\_\_

Type or print name

 \_\_\_\_\_

Sign your name

Clerk stamps date here when form is filed.

## The Court read and considered:

- a. Form JV-220, *Application for Psychotropic Medication*, and form JV-220 (A), *Physician's Statement—Attachment*, or JV-220(B), *Physician's Request to Continue Medication—Attachment* filed on (date): \_\_\_\_\_
- b. ☐ Form JV-218, *Child's Opinion About the Medicine*, filed on (date): \_\_\_\_\_
- c. ☐ Form JV-219, *Statement About Medicine Prescribed*, filed on (date): \_\_\_\_\_
- d. ☐ Form JV-219, *Statement About Medicine Prescribed*, filed on (date): \_\_\_\_\_
- e. ☐ Form JV-222, *Input on Application for Psychotropic Medication*, filed on (date): \_\_\_\_\_
- f. ☐ Form JV-222, *Input on Application for Psychotropic Medication*, filed on (date): \_\_\_\_\_
- g. ☐ CASA report
- h. ☐ Other (specify): \_\_\_\_\_

**DRAFT**  
**Not approved by**  
**the Judicial Council**

Fill in court name and street address:

Superior Court of California, County of \_\_\_\_\_

Fill in child's name and date of birth:

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Court fills in case number when form is filed.

Case Number: \_\_\_\_\_

## The Court finds and orders:

- ① a. ☐ Notice requirements were met.  
b. ☐ Notice requirements were *not* met. Proper notice was not given to: \_\_\_\_\_

- ② ☐ The matter is set for hearing on (date): \_\_\_\_\_ at (time): \_\_\_\_\_  
in (dept.): \_\_\_\_\_

- ③ ☐ Application was made for authorization to begin or to continue giving the child the psychotropic medication listed in (19) on page 5 of form JV-220(A) or (16) on page 4 of form JV-220(B).

Copies of pages 5 and 6 of form JV-220(A) or pages 3 and 4 of form JV-220(B) are attached to this order.

The application is (check one):

- a. ☐ Granted as requested.
- b. ☐ Granted with the following modifications or conditions to the request as made in (19) on page 5 of form JV-220(A) or (16) on page 4 of form JV-220(B) (specify all modifications and conditions): \_\_\_\_\_

- c. ☐ Denied (specify reason for denial): \_\_\_\_\_

If the application was for medication the child is currently taking, the social worker or probation officer must consult with the prescribing physician to determine whether the physician is ordering that the medication should be stopped immediately or gradually reduced over time.



Child's name: \_\_\_\_\_

Case Number: \_\_\_\_\_

- ④ ☐ The applicant must resubmit the application **no later than (date):** \_\_\_\_\_  
with the missing information, which is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The matter is set for hearing on (date): \_\_\_\_\_ at (time): \_\_\_\_\_  
in (dept.): \_\_\_\_\_

- ⑤ The
- a. ☐ social worker
  - b. ☐ probation officer
  - c. ☐ person who submitted application
- is ordered to give a copy of this order, including pages 5 and 6 of form JV-220(A) **or pages 3 and 4 of form JV-220(B)** and the medication monograph attached to the form JV-220(A) to the child's caregiver either in person or by mail within two court days.

- ⑥ ☐ Other (specify): \_\_\_\_\_  
\_\_\_\_\_

- ⑦ The order is set for a progress review on (date): \_\_\_\_\_ at (time): \_\_\_\_\_  
in (dept.): \_\_\_\_\_

This order is effective until terminated or modified by court order or until 180 days from the date of this order, whichever is earlier. If the prescribing physician is no longer treating the child, this order extends to subsequent treating physicians. A change in the child's placement does not require a new order regarding psychotropic medication. Except in an emergency situation, a new application must be submitted and consent granted by the court before giving the child medication not authorized in this order or increasing medication dosage beyond the maximum daily dosage authorized in this order.

Date: \_\_\_\_\_



\_\_\_\_\_  
Signature of judge or judicial officer

# County Report on Psychotropic Medication

The social worker or probation officer must file this form for any hearing for which the court is providing oversight of psychotropic medications. This includes all scheduled progress reviews on orders authorizing psychotropic medication and every status review hearing. If you are filing this form for a status review hearing, file it with the status review hearing report. If you need more space for any of the items, write the item number and additional information on page 4 of this form. If you need more space than page 4, attach a sheet or sheets of paper. If you do not know the answer to a question, write "I do not know."

Clerk stamps date here when form is filed.

**DRAFT**  
**Not approved by**  
**the Judicial Council**

Fill in court name and street address:

Superior Court of California, County of

Fill in child's name and date of birth:

Child's Name:

Date of Birth:

Court fills in case number when form is filed.

Case Number:

① Your name: \_\_\_\_\_

② Your relationship to the child:

☐ Social worker ☐ Probation officer

☐ Other county staff (specify): \_\_\_\_\_

③ a. Caregiver's relationship to child: \_\_\_\_\_

b. Date of last communication with caregiver: \_\_\_\_\_

④ Child Information

a. Child's height: \_\_\_\_\_ b. Child's weight: \_\_\_\_\_

c. Prescribing physician's name: \_\_\_\_\_

d. Date last seen by prescribing physician: \_\_\_\_\_

e. Next appointment date: \_\_\_\_\_

f. Therapist's name: \_\_\_\_\_

g. Date last seen by therapist: \_\_\_\_\_

⑤ List current court-approved psychotropic medications. (Verify that this is what child is taking.)

Name of Medication	Dosage

Name of Medication	Dosage

⑥ ☐ The child is taking the medication in ⑤. This was verified by ☐ child ☐ caregiver ☐ other (specify): \_\_\_\_\_

⑦ ☐ The child is not taking the following medication in ⑤ (specify): \_\_\_\_\_  
This was verified by ☐ child ☐ caregiver ☐ other (specify): \_\_\_\_\_



Child's name: \_\_\_\_\_

Case Number:

- 8 Describe the caregiver's observations regarding how the child's behaviors and/or symptoms have changed since the medication was begun.

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- 9 Describe the caregiver's observations regarding the side effects of the medication.

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- 10 Describe any concerns the caregiver has regarding the medication.

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- 11 Describe what the child says about whether his or her behaviors and/or symptoms have changed since the medication was begun.

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- 12 Describe what the child says about the side effects of the medication.

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Child's name: \_\_\_\_\_

Case Number:
--------------

13 Describe any concerns or complaints the child has regarding the medication.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

14 List the dates of all medication management appointments since the last court hearing.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

15 List the dates and reasons of other follow-up medical appointments since the last court hearing.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

16 Describe other mental health treatments that are part of the child's overall treatment plan (for example, frequency and type of counseling, wraparound, etc.) or attach mental health treatment plan from treating clinician.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

17 Provide any other information you think the judge should know.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Case Number:**

Child's name: \_\_\_\_\_

**18** ☐ Check here if you need more space for any of the items. Write the item number and additional information here.  
If you need more space, attach a sheet or sheets of paper.

This image shows a full page of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Date: \_\_\_\_\_

---

Type or print name of person completing this form

---

*Signature*

- ☐ Child welfare services staff (*sign above*)
- ☐ Probation department staff (*sign above*)
- ☐ Other (*specify*): \_\_\_\_\_ (*sign above*)

## SPR17-15

**Juvenile Law: Psychotropic Medication** (Amend Cal. Rules of Court, rule 5.640; adopt form JV-216; revise forms JV-217-INFO, JV-219, JV-220, JV-220(A), JV-220(B), JV-221, JV-222, and JV-223)

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	Commentator	Position	Comment	Committee Response
1.	Sherry Armstrong, BSN, RN, PHN II Nevada County Department of Public Health Child Protective Services		Please remove the check box and signature line for PHN on form JV 224. The instructions on JV 217 indicate the form to be filled by a probation or social worker. The PHN signature line has created confusion with social workers continuing to ask PHNs to fill out the form and sign. The PHN role is to collaborate and support as a medical professional providing monitoring and oversight and not to be assigned duties that can be performed by a staff member that is not a medical professional.	The committee has revised the form to remove the signature line for public health nurses. While this form did not circulate for comment during this spring cycle, it generated many comments. Rule 5.640 requires, and form JV-217-INFO instructs that this form must be filled out by a social worker or probation officer.
2.	Uplift Family Services By: Mark Edelstein MD Medical Director	N	Thank you for eliminating certain redundancies in the JV-220A, but in my view it is only a beginning. This form and the entire JV-220 process negatively impact foster youth, a population that is already underserved. I work in a Level-14 group home with 34 foster children from multiple counties. While Court consent is supposed to take a week, in fact it often takes a month or more, prolonging children's suffering, increasing risk of injury (e.g., through staff restraints) and delaying discharge from the group home. Meanwhile, the administrative demand on child psychiatrists – the experts in our health care system on psychotropic medications in youth and a subspecialty that is already in short supply – means we are even less available to meet with foster youth and their families. I hope that someday the Judicial Council or the legislature will further review and revise this system that so blatantly discriminates against individual foster youth and the entire foster youth population.	The committee is aware that this process is often taking too long. Some courts are working with providers to track the length of time to complete each step to identify where delays are occurring.



## SPR17-15

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	Commentator	Position	Comment	Committee Response
3.	Richard Mancina, M.D. Sacramento, CA	AM	<p>The proposed changes seem reasonable and consistent with the goal of reducing redundancy. The one redundancy that is not addressed, however, is that there are two forms being used when one would suffice.</p> <p>flex</p> <p>I recommend that the JV-220A be the only form used.</p>	<p>The committee has amended rule 5.640 and revised the instructions on JV-217-INFO to allow a physician to fill out either form JV-220(A) or JV-220(B).</p> <p>In the Winter 2016 cycle, to address the concerns from physicians and physician groups that form JV-220(A) was too long, the committee split it into two forms, one for initial requests and one for a continuing request by the same physician, to decrease the length of the form for renewal requests. The committee removed several items and created a new form <i>Prescribing Physician's Statement, Request to Continue—Attachment</i> (form JV-220(B)) to decrease the amount of information and time needed to complete the form when the same physician is requesting a renewal of a medication previously authorized by the court. This decreased the form from 6 to 4 pages.</p>
4.	FCPCFC By: Sung Kim, PHN Santa Clarita CA, 91355	AM	JV 224 is for the social worker or Probation Officer to file for court hearing. Since Public Health Nurse is not involved with any type of hearing, Public Health Nurse should be removed from JV224 page 1 #2 and Page 4 Signature part.	The committee has revised the form to remove the signature line for public health nurses. While this form did not circulate for comment during this spring cycle, it generated many comments. Rule 5.640 requires, and form JV-217-INFO instructs that this form must be filled out by a social worker or probation officer.
5.	Sara Los Angeles, CA	A	Application for Psychotropic Medication JV 220-223 packet needs to have the contact phone and fax numbers on the first page for the prescribing psychiatrist to fax the PMA packet for court approval. No where on this packet has this information. Often time the provider does	These are statewide forms for use in all 58 counties. It is not feasible to list 58 facsimile numbers on the form, nor would it be feasible to amend the forms each time a fax number changed.

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	Commentator	Position	Comment	Committee Response
			<p>not know where to fax the packet to.</p> <p>Also, provider should require to type not hand written information on these forms. Very hard to read their handwriting at times.</p> <p>Often time lab results are not attached to the JV packet from the psychiatrist to court.</p>	<p>The committee concluded that the issue of clarity of writing is best addressed in training. Physicians, social workers, and probation officers can all be trained that these forms are fillable and can be typed on a computer.</p> <p>In the Winter 2016 proposal, the committee revised the physician's statement form with a question regarding whether all relevant laboratory tests have been conducted and a request for a brief explanation if not. There is no requirement that the laboratory test results be attached the physician's form.</p>
6.	Teresa Los Angeles, CA	N	<p>Court approved JV PMA packet should go to DMH unit for review, data entry into CWS/CMS, and any necessary follow-up care with the caretaker, not to the CSW or public health nurse with this responsibility. We are not the experts on mental health issues and on Mental health medications. There is a co-located DMH unit housed at every DCFS office. They should be the one managing the PMA approved by court. However, each PMA packets that have been approved by court come to the CSW and public health nurses for review. CSWs are not trained in mental health stuffs. Also, currently each public health nurses are assigned 400-600 plus cases in each DCFS office to manage on medical and dental issues for the foster children. They also enter all the children well child exam report into the DCFS system and do follow-up care.</p>	<p>This is a county-specific issue and outside the rule making purview of the Judicial Council.</p>

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	Commentator	Position	Comment	Committee Response
7.	dave neilsen, msw Senior Mental Health Policy Advocate California Alliance of Child and Family Services		<p>The California Alliance of Child and Family Services, a membership association of over 130 community non-profit providers of services and supports to California's children, youth and families appreciated the opportunity to review and comment upon the proposed revisions to the JV-220 forms and Rules of the Court as related to the authorization of psychotropic medications. Our member agencies and the children served are dependent upon well-coordinated processes between the courts, placing agencies and parents of the children.</p> <p>As explained in the detailed Invitation to Comment overview, the Alliance is very supportive of these efforts to further clarify and streamline the processes. All attempts to reduce paperwork while preserving the necessary oversight of these medication requests will allow for more children and youth to access care in a timely manner. Eliminating confusion is always a welcome step when providers are serving children and youth from different counties, and the county processes have some minor differences. Thank You!</p> <p>The specific comments requested on Page 6 of the Invitation yielded these responses from our member agencies.</p> <ul style="list-style-type: none"><li>• <b>Does the proposal appropriately address the stated purpose?</b> Yes the proposal is clear and specific.</li></ul>	<p>No response required.</p> <p>No response required.</p> <p>No response required.</p>

## SPR17-15

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Commentator	Position	Comment	Committee Response
		<ul style="list-style-type: none"><li>• <b>Should a form be created to document the court's findings and order when the court orders that a parent is authorized to approve or deny the administration of psychotropic medication? If so, should that form be mandatory or optional?</b> Yes, the court should adopt an order form and make it mandatory. The reasons being that many child cases have had multiple interventions within the child welfare and/or probation system. It is very difficult to ascertain if a parent still holds rights to authorize the use of psychotropic medications. If there were to be a mandatory standard order form, it would be clear and succinct as to the process the physician must follow in order to obtain court authorization for psychotropic medication(s).</li><li>• <b>Should rule 5.640(e) include legal guardians, in addition to parents as those the court can order authorized to approve or deny the administration of psychotropic medication?</b> Yes, currently legal guardians have been asked to take responsibility for the client and can sign for other aspects of medical care. There are times when a parent is not able to be involved or reached in the care of the child and therefore the court has ordered a legal guardian to assume these roles. As the legal guardian is able to authorize other aspects of care (general medical care, emergency care, and provide consent to</li></ul>	<p>The committee is recommending that the Judicial Council adopt <i>Order Delegating Judicial Authority Over Psychotropic Medication</i> (form JV-216) as a mandatory form.</p> <p>The committee has amended the rule and relevant portions of the forms to include legal guardians.</p>

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Commentator	Position	Comment	Committee Response
		<p>providers on behalf of the parent) it follows that the legal guardian can be given the responsibility of authorizing the use of psychotropic medication. However, there must be built in a notification process to the parent by the courts. This process would be in alignment with general treatment plan protocol and process.</p> <p>Additional Comments and Questions from Alliance members:</p> <ul style="list-style-type: none"><li>• If an order is in place allowing for parental or legal guardian approval of psychotropic medication and the parent or legal guardian denies the authorization, what process does the prescriber take to obtain authorization/ notify the court if he/she has determined that the medication is necessary for the health of the youth? This process should be documented on the court order to the parent/legal guardian so that they know that if they have court authorization to approve or deny and they deny the request, the prescriber may move ahead accordingly with a court process.</li><li>• If a parent/legal guardian authorizes the use of psychotropic medication does the prescriber still fax in the JV220 (and other such required forms) for the court to review and have on file?</li><li>• On the court docket Rule 5.640. Psychotropic medications- Page 7 line 14 (2)- If there is an order for the parent or legal guardian to authorize psychotropic</li></ul>	<p>This is a comment that is likely to have varying opinions and would need to circulate for public comment. The committee will discuss this comment when the rule is again circulated for public comment.</p> <p>No. The JV-220 process is only required if the child is removed from the custody of his or her parent and that parent is not authorized by the court to approve or deny the administration of psychotropic medication.</p> <p>This is a comment that is likely to have varying opinions and would need to circulate for public comment. The committee will discuss this comment when the rule is again circulated for</p>

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	Commentator	Position	Comment	Committee Response
			<p>medication it should be stated here who copies of that order will be given to (e.g., parent/legal guardian, SW, Probation Officer, group home(STRTP) etc).</p> <p>Again, on behalf of the California Alliance member agencies, we appreciate the continued focus upon improving these authorization protocols. If there are any further questions you may have of us, please do not hesitate to contact me directly at dneilsen@cacfs.org or 916.449.2273, extension 204.</p>	<p>public comment.</p> <p>No response required.</p>
8.	Smit Chauhan MD MPH Child and Adolescent Psychiatrist Imperial County Behavioral Health Services		<p>I agree to the suggested changes to Prescribers concerns, here are some additions:</p> <ol style="list-style-type: none"><li>1) For patients being seen in county clinics, there may be more than 1 MDs working and JV 220 is a time sensitive issue. So in absence of a MD, if the other MD is covering, or when a patient is transferred to different clinics based on their foster home placement, they are seen by more than 1 MDs. So I suggest the checkbox in form JV 220b, question 2b, needs to be taken out. Some of the MDs feel compelled to fill out JV 220a which is very extensive.</li><li>2) I work in a county clinic and we have extensive caseloads. The behavior health clinics do not take the responsibility to ensure that the patients on JV 220 are identified in a timely manner and are provided appointments. The onus should be on the county clinics to ensure that they</li></ol>	<ol style="list-style-type: none"><li>1) The committee concluded that the shortened physician's form should only be used if the request is to continue the same medication and maximum dosage and if it is the same prescribing physician. If it is a new physician the information in the longer physician's form is necessary for the court to provide its oversight function.</li><li>2) The committee agrees that there should be better tracking and oversight of children who are subject to the JV-220 process. Mandating that it is county behavioral health's responsibility to do so is beyond the rule making purview of the Judicial Council.</li></ol>

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	Commentator	Position	Comment	Committee Response
			<p>have a system in place to track the timeliness on JV 220s. We, the child psychiatrists are often in a useless battle over this for the last few years and if there is a directive from the state of California that it is county behavioral health's responsibility, the overall health outcomes of these foster kids would improve tremendously.</p> <p>3) Other neighboring counties have mental health courts and have a Child Psychiatrist work with the judicial officers and Department of Social Services to review the JV 220s, answer some medical question to the judicial system which actually expedites the JV 220 process and prevent unnecessary delays. In our county, there are a lot of unnecessary delays in JV 220s which hamper out ability to prescribe medications to foster kids and some of them loses placements or their morbidity is worsened. Now there is definitely a conflict between Child Psychiatrists and Management here, but the patients are being affected. So, my suggestion is if there is a directive from state of California about requiring every county behavioral health agencies to have a Psychiatrist, preferably Child Psychiatrist work with the courts to review the JV 220s and expedite the process.</p>	<p>3) The committee concluded that while implementing a process where every county behavioral health agencies must have a Psychiatrist, preferably a Child Psychiatrist, work with the courts to review the JV 220s is a good suggestion, it is not mandated by statute and is beyond the purview of the Council's rule making authority. SB 238 was a comprehensive bill and added to the already mandated judicial training, training that addresses the authorization, uses, risks, benefits, assistance with self-administration, oversight and monitoring of psychotropic medications, trauma, and substance use disorder and mental health treatments, including how to access those treatments. Welf. &amp; Inst. Code §§304.7(a)(3), 16501.4(d).</p>
9.	Hillsides By; Amy Cousineau Division Chief, Campus Based Services	AM	We would like to see a return to just one form instead of the JV220 A and B- It is very simple to use the same form and indicate ( as we did in the past) whether med was a continued med (C)	The committee has amended rule 5.640 and revised the instructions on JV-217-INFO to allow a physician to fill out either form JV-220(A) or JV-220(B).

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	Commentator	Position	Comment	Committee Response
			<p>or a new med (N). It was clear and concise, and much easier for the prescribing physician, reducing duplicate typing and filling in forms.</p>	<p>In the Winter 2016 cycle, to address the concerns from physicians and physician groups that form JV-220(A) was too long, the committee split it into two forms, one for initial requests and one for a continuing request by the same physician, to decrease the length of the form for renewal requests. The committee removed several items and created a new form <i>Prescribing Physician's Statement, Request to Continue—Attachment</i> (form JV-220(B)) to decrease the amount of information and time needed to complete the form when the same physician is requesting a renewal of a medication previously authorized by the court. This decreased the form from 6 to 4 pages.</p>
			<p>Otherwise, we want to highlight our agreement with the following:</p> <p>DR very happy with the idea that some sections will have check boxes instead of expecting a narrative from dr...so that's great!</p> <p>Its great to see that they are responding to the physicians who voiced their opinions that current system is way too long (cumbersome) with duplicate info required...</p> <p>Removing the duplicate sections and allowing DR to indicate that info is already in another section ("see #2" as example) is great!</p> <p>We are glad to see the committee did not feel it necessary to attach lab results as requested by PHN. We have all the labs results available and</p>	<p>No response required.</p>



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	Commentator	Position	Comment	Committee Response
			having to attach them to faxes just makes it more cumbersome.  Pg 10, section 5 – good to see in writing that the expectation is that SW, PO must provide us with current JV220 when they admit new client.	
10.	LA CO Dept. of Public Health By: Armida Enriquez, PHN	AM	This Public Health Nurse is recommending removal of the PHN Check Box on the JV224. The form instructs the social worker or probation officer to file form for any court hearings for psychotropic medications. The PHN does not prepare such reports.  So, to request signature of PHN on this form is unnecessary and just adds confusion.  Thank you for this consideration.	The committee has revised the form to remove the signature line for public health nurses. While this form did not circulate for comment during this spring cycle, it generated many comments. Rule 5.640 requires, and form JV-217-INFO instructs, that this form must be filled out by a social worker or probation officer.
11.	Jessica Los Angeles, CA	AM	There is a DMH D-rate unit which the D-rate evaluator's responsibility is to call the caretaker on a monthly basis to monitor the child's medication status. Also, this D-rate evaluator ensures the child is taking the medication in order to continue paying the caretaker the D-rate specialized rate. Any psychotropic medication monitoring should be done by DMH staff with mental health training such as their psychologist, PCSW, and mental health nurses.	This is a county-specific issue and outside the rule making purview of the Judicial Council.
12.	Sutter County Social Services By: David Patrick Social Services Supervisor	AM	This is in regards to the JV-223.  The top of the JV-223 reads “The Court read and considered” and lists the JV-220 and applicable documents which includes the JV-	As circulated for public comment, form JV-223 contains references to both JV-220(A) and JV-220(B) in item 3.

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	Commentator	Position	Comment	Committee Response
			<p>220(A) and JV-220(B).</p> <p>The form next states “The Court finds and orders:” and under section 3 references the JV-220(A). There are then check boxes following that allow the court to grant, grant with modifications, or deny the request. This order to grant, modify, or deny under section 3 is specific as to a JV-220(A).</p> <p>I do not see any language that references the JV-220(B) under section 3 or any other section for the court to grant, modify, or deny the request.</p> <p>My understanding is that a JV-220(B) would require the same orders by the Court as a JV-220(A) yet there is no where for the Court to designate its decision.</p>	
13.	Evelyn P. Oronico, RN Public Health Nurse Health Care Program For Children In Foster Care Santa Fe Springs, CA		<p>I am requesting to please remove / not include Public Health Nurse in the form JV 224. [page 1 #2 and in page 4].</p> <p>For minors prescribed with psychotropic medications due to their emotional and behavioral problems, the best person to complete the form JV 224 are either the CSW or the Probation Officers because they know the child and the caregiver of that child more than anybody in the Child Welfare System.</p> <p>Other reasons are as follows: 1. Public Health Nurse’s (PHN) role is Consultant to the Child Social Worker or Probation Officer. CSW and Probation</p>	<p>The committee has revised the form to remove the signature line for public health nurses. While this form did not circulate for comment during this spring cycle, it generated many comments. Rule 5.640 requires, and form JV-217-INFO instructs that this form must be filled out by a social worker or probation officer.</p> <p>1. See response above.</p>

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	Commentator	Position	Comment	Committee Response
			<p>Officers are the case managers.</p> <p>2. The form JV 224 should be the responsibility of the Social Worker or Probation Officer since they are the primary case manager of the child/minor and will eliminate confusion if CSW or Probation officer is only in the form.</p> <p>3. The CSW visits and sees the child regularly every month. PHN do joint home visits with Case carrying Social Worker as requested and if deemed necessary due to medical problems as according to PHN policies and guidelines.</p> <p>4. Foster Care PHNs here in LA County, have an average of 300 children assigned v/s CSW's average of 25 cases.</p> <p>5. PHNs attend Team Meetings to ensure the child's safety and optimum health. PHNs also attend training so that we can deliver the best care to the children assigned to us.</p>	<p>2. See response above.</p> <p>3. See response above.</p> <p>4. See response above.</p> <p>5. See response above.</p>
14.	Isidora Sison Public Health Nurse Healthcare Program for Children in Fostercare Pomona, CA		<p>This is in regards to JV 224 County Report on the Psychotropic Medication form. May I request your office to please not include the "Public Health Nurse" in this form for the following reasons:</p> <p>1) The Child Social Worker (CSW) and Probation Officer are the Case Manager to the child, whereas the Foster Care Public Health Nurse's (PHN) role is Consultant to the Child Social Worker or Probation Officer.</p> <p>2) The CSW visits and sees the child regularly every month, whereas the PHN visits &amp; sees the child when requested by the CSW for joint visit.</p>	<p>The committee has revised the form to remove the signature line for public health nurses. While this form did not circulate for comment during this spring cycle, it generated many comments. Rule 5.640 requires, and form JV-217-INFO instructs that this form must be filled out by a social worker or probation officer.</p>

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	Commentator	Position	Comment	Committee Response
			<p>Or at times, when the PHN deemed necessary for her/him to see the child due to medical condition, PHN would request the CSW to do joint visits, not on a regular basis.</p> <p>3) Foster Care PHNs here in LA County, have an average of 300 children assigned to us to assess their medical and dental needs, coordinate and collaborate with CSW, Primary Provider, Specialty Clinics, Community Agencies, etc. We document all assessments and interventions we do for the child. We attend Team Meetings to ensure the child's safety and optimum health. PHNs also attend training so that we can deliver the best care to the children assigned to us.</p> <p>4) CSW have an average of 27 caseload they supervised.</p> <p>5) The form JV 224 states that the form should be completed by the Social Worker or Probation Officer and not the PHN.</p> <p>For the benefit of the child I believe that the best person to complete the form JV 224 are either the CSW or the Probation Officers because they know the child and the caregiver of that child more than anybody in the Child Welfare System. In order not to create confusion, the Social Worker and Probation Officer Title should only be in that form.</p> <p>Can you please remove the "Public Health Nurse" in JV 224?</p>	
15.	Kathryn Kestler R.N., P.H.N. Nevada County Public Health		Please remove the check box and signature line for PHN on form JV 224. The instructions on	The committee has revised the form to remove the signature line for public health nurses. While this

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	<b>Commentator</b>	<b>Position</b>	<b>Comment</b>	<b>Committee Response</b>
	Department Child Protective Services, and Probation Nurse		JV 217 indicate the form to be filled by a probation or social worker. The PHN signature line has created confusion with social workers continuing to ask PHNs to fill out the form and sign. The PHN role is to collaborate and support as a medical professional providing monitoring and oversight and not to be assigned duties that can be performed by a staff member that is not a medical professional.	form did not circulate for comment during this spring cycle, it generated many comments. Rule 5.640 requires, and form JV-217-INFO instructs that this form must be filled out by a social worker or probation officer.
16.	Chidinma Ruth Eke, MSN/Ed, PHN, RN. Public Health Nurse Health Care Program for Children in Foster Care Van Nuys, CA		I am writing to request the removal of Public Health Nurses out of form JV/224. This is because, the social workers and probation officers are the primary case managers. They visit and assess these children on routine bases and have full knowledge and accurate information at all times. Public health nurses are consultants and do assessments and follow up as we are consulted or notified of issues. To be on the safe side social worker/probation officers are at closer contact and will be better complete this form. Please remove Public Health Nurses on the list in this form JV/224.	The committee has revised the form to remove the signature line for public health nurses. While this form did not circulate for comment during this spring cycle, it generated many comments. Rule 5.640 requires, and form JV-217-INFO instructs that this form must be filled out by a social worker or probation officer.
17.	Virginia R. Luna, PHN Child Welfare Public Health Program Pomona, CA		This is in regards to JV 224 County Report on the Psychotropic Medication form. May I request your office to please not include the “Public Health Nurse” in this form in ITEM #2 for the following reasons:  1) The Child Social Worker (CSW) and Probation Officer are the Case Manager to the child, whereas the Foster Care Public Health Nurse’s (PHN) role is Consultant to the Child Social Worker or Probation Officer.	The committee has revised the form to remove the signature line for public health nurses. While this form did not circulate for comment during this spring cycle, it generated many comments. Rule 5.640 requires, and form JV-217-INFO instructs that this form must be filled out by a social worker or probation officer.

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			<p>2) The CSW visits and sees the child regularly every month, whereas the PHN visits &amp; sees the child when requested by the CSW for joint visit. Or at times, when the PHN deemed necessary for her/him to see the child due to medical condition, PHN would request the CSW to do joint visits, not on a regular basis.</p> <p>3) Foster Care PHNs here in LA County, have an average of 300 children assigned to us to assess their medical and dental needs, coordinate and collaborate with CSW, Primary Provider, Specialty Clinics, Community Agencies, etc. We document all assessments and interventions we do for the child. We attend Team Meetings to ensure the child's safety and optimum health. PHNs also attend training so that we can deliver the best care to the children assigned to us.</p> <p>4) CSW have an average of 27 caseload they supervised.</p> <p>5) The form JV 224 states that the form should be completed by the Social Worker or Probation Officer and not the PHN.</p> <p>For the benefit of the child I believe that the best person to complete the form JV 224 are either the CSW or the Probation Officers because they know the child, and the caregiver of that child more than anybody in the Child Welfare System. In order not to create confusion, the Social Worker and Probation Officer Title should only be in that form.</p> <p>Can you please remove the "Public Health Nurse" in JV 224?</p>	

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18.	Superior Court of California, County of San Diego By: Mike Roddy Executive Officer	AM	<ul style="list-style-type: none"><li>JV-219, item 24 has a typo (any say)</li><li>JV-220(A), item 16; JV-220(B), item 15: “in which the child is enrolled in or is recommended to participate”: remove the second “in”</li><li>JV-220(A) and JV-220(B): Our medical partners asked for a place to record the method of administration (oral, IV, etc.) and expected side effects. They said that they were dinged in an audit for not documenting that information on the form.</li><li>JV-221: Be consistent throughout - semicolons or commas; provided with or just provided; blank form or blank copy of form; by depositing . . . , etc. Why are attorneys being served at the “last known” address?</li></ul>	The committee has revised the form to correct typographical and grammatical errors.
19.	Superior Court of California, County of Riverside By: Susan D. Ryan Chief Deputy of Legal Services	A	<p>Address stated purpose? -Yes.</p> <p>Should a form be created to document the court’s findings and orders when the court order that a parent is authorized to approve or deny the administration of psychotropic medication? If so, should that form be mandatory or optional? -Yes and it should be mandatory.</p> <p>Should rule 5.640(e) include legal guardians, in addition to parents, as those the court can order authorized to approve or deny the administration of psychotropic medication? -Yes.</p>	<p>No response required.</p> <p>The committee is recommending that the Judicial Council adopt <i>Order Delegating Judicial Authority Over Psychotropic Medication</i> (form JV-216) as a mandatory form.</p> <p>The committee has amended the rule to include legal guardians.</p>

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			<p>Would the proposal provide cost savings?  <i>-Possibly, if the need for additional hearings was eliminated.</i></p> <p>What would the implementation requirements be for courts?  <i>-Training of staff, informing bench officers, update desk procedures and codes in the case management system.</i></p> <p>Would two months be sufficient time for implementation?  <i>-No.</i></p>	<p>No response required.</p> <p>No response required.</p> <p>The committee recognize the challenges associated of implementing any new forms. However, the committee believes that these revisions will simplify the process that was adopted July 1, 2016 and significantly promote efficiency. Thus, the committee continues to recommend an effective date of January 1, 2018.</p>
20.	LA County Dept. of Public Health - CMS By: Alonso Machuca Public Health Nurse	N	<p>Remove the public health nurse from the JV224 form.</p> <p>The PHN is a consultant and does not carry a case. The PHN provides recommendations to the Probation Officer or Social Worker.</p>	The committee has revised the form to remove the signature line for public health nurses. While this form did not circulate for comment during this spring cycle, it generated many comments. Rule 5.640 requires, and form JV-217-INFO instructs that this form must be filled out by a social worker or probation officer.
21.	DPH-Children Medical Services By: Sofia Public Health Nurse	N	Jv-224 includes Public Health Nurse under item #2. Social worker and Probation are case carrying worker. PHN is consultant and per child welfare guidelines secondary to the case. Phn will review and recommend as appropriate after approval or denial. Phn can continue to assist in advocating for the youth.	The committee has revised the form to remove the signature line for public health nurses. While this form did not circulate for comment during this spring cycle, it generated many comments. Rule 5.640 requires, and form JV-217-INFO instructs that this form must be filled out by a social worker or probation officer.
22.	DPH-CMS	N	Remove Public Health Nurse from JV224 form,	The committee has revised the form to remove the



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	By: Esther Feng PHN		PHN is consultant, not a case manager.	signature line for public health nurses. While this form did not circulate for comment during this spring cycle, it generated many comments. Rule 5.640 requires, and form JV-217-INFO instructs that this form must be filled out by a social worker or probation officer.
23.	Sofia Lujano, PHN Health Care for Children in Foster Care		<p>These are my thoughts in serving this vulnerable population. We will not be able to serve the children (minor or youth) well-being, if we continue to believe that the public health nurse can complete this task alone. In our role as public Health nurse we depend on the team and the team depends on us.</p> <p>I kindly ask you to consider that the interdisciplinary team play their role;</p> <ul style="list-style-type: none"><li>• JV-224 includes Public Health Nurse under item #2. This item should not be included in this form.</li><li>• In child welfare, the Social worker and Probation role includes being the primary case carrying worker.</li></ul> <p>The PHN is a consultant and per child welfare guidelines PHN role is assigned as secondary to the case. Phn will review and recommend as appropriate after approval or denial JV-220. Phn can continue to assist in advocating for the youth. This process has worked, what has not worked is that we sometimes do not have the man power to meet the needs of these children. Please consider that given the circumstance all duties cannot be given to the nurse otherwise we</p>	The committee has revised the form to remove the signature line for public health nurses. While this form did not circulate for comment during this spring cycle, it generated many comments. Rule 5.640 requires, and form JV-217-INFO instructs that this form must be filled out by a social worker or probation officer.

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			<p>are truly not helping the children.</p> <p>Jv-224 includes Public Health Nurse under item #2. Social worker and Probation are case carrying worker. PHN is consultant and per child welfare guidelines secondary to the case. Phn will review and recommend as appropriate after approval or denial. Phn can continue to assist in advocating for the youth.</p>	
24.	Orange County Bar Association By: Michael L. Baroni, President	AM	<p>The rule modifications and form changes are well-taken, and streamline the fairly burdensome forms that treating physicians must now complete to authorize such medication.</p> <p>As for the specific questions presented: an additional form for the required findings authorizing/denying parental/guardian authorization is not necessary. Such a requirement would add yet another layer of increasingly complex paperwork in an aspect of dependency proceedings already overflowing with such required forms, and such a form is unnecessary given that the court would be presumed to be acting under its proper statutory authority.</p> <p>In addition, rule 5.640(e) should indeed be changed to include legal guardians as those eligible to receive court authorization to approve or deny psychotropic medication, especially considering that rule 5.640(a) as proposed would reference parents and guardians as so eligible.</p>	<p>No response required.</p> <p>The committee is recommending that the Judicial Council adopt <i>Order Delegating Judicial Authority Over Psychotropic Medication</i> (form JV-216) as a mandatory form. Of the commentators who answered this specific question, only one was opposed to the creation of this form. By filling out one simple form, the entire JV-220 process, including multiple lengthy forms, would not be necessary.</p> <p>The committee has amended the rule to include legal guardians.</p>

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25.	<p><b>Mary Ader</b>, Deputy Director, Legislative Affairs, County Behavioral Health Directors Association of California (CBHDA)</p> <p><b>Chris Castrillo</b>, Legislative Advocate, California Academy of Child &amp; Adolescent Psychiatry</p> <p><b>Randall Hagar</b>, Director of Governmental Relations, California Psychiatric Association</p>		<p>We appreciate the efforts to enhance communication between all parties and the juvenile court with regard to the JV-220 procedures that govern the prescribing of psychotropic medication to youth in foster care. We hope that revisions will achieve a better balance in providing useful information to the court and other stakeholders and reduce the burden on mental health providers. The goal of the JV-220 procedures is to reduce or eliminate the suffering of children due to mental illness. We continue to support this goal and strive to implement procedures accordingly.</p> <p>The phrase that “concerns remain that psychotropic medication is overused” despite previous efforts to curb usage, is included in the introduction of the notice for solicitation of comments (page 2). We request that the source of the data for this extremely broad and significant statement be included.</p> <p>The proposed streamlining of physician forms on the top of page 3 appears to address some of the concerns related to time burdens for physicians with the current forms.</p> <p>However, several concerns remain:</p> <ul style="list-style-type: none"><li>• Form JV-220(A): Item #7, #8 and #9a are appropriate to be combined together as one description of a child’s overall mental health which could include personal health information, symptoms and response to medications, all in narrative form. Detail could be drawn from clinical progress notes</li></ul>	<p>No response required.</p> <p>Most of the new questions on form JV-220(A) are mandated by SB 238 or already existed on the form in a series of questions that were separated into distinct items to ensure they were answered. The committee added two other questions that it believed were critical. The new questions on the proposed form that are not required by SB 238</p>

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		<p>to reduce the time for completion of the form.</p> <ul style="list-style-type: none"><li>Form JV-220(A), Item #8 requires description of symptoms and duration. This seems appropriate. However, asking for a child's treatment plan in this context seems excessive.</li><li>Form JV-220(A): Item #9b: "Past treatment efforts" can be difficult to document or obtain from children and caregivers without the specifics contained in a medical record or the Health and Education Passport. For example, it is unlikely that a 5 year old child will recall accurately how a medication affected his/her behavior ten years later. Seldom are past caregivers available to comment. Item #11c may also be problematic for same reasons. Information provided with respect to #9a is much more available and reliable but may also be enhanced when prior medical documentation is available.</li><li>Form JV-220(A), Item #10: With regard to nonpharmacological treatment alternatives, the form should also require specification of treatment alternatives the physician would like to see in place.</li></ul>	<p>are: "How long have you been treating the child?" and "In what capacity have you been treating the child (e.g. treating psychiatrist, treating pediatrician)?" The committee also made the medication administration schedule, which is currently on the form, mandatory rather than optional.</p> <p>If the physician filling out the form believes he or she has already answered a question, he or she can write, "See answer to question ___."</p> <p>Both of these items have the option for the physician to check a box indicating "I don't know."</p> <p>The committee has amended this item on the form to include a question about what treatment alternatives should be offered.</p>

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		<ul style="list-style-type: none"><li>Form JV-220(A), Item #21 and Item #19 could be consolidated in some fashion. It would be sensible to discuss issues related to continuing a medication “in the long term”, titrating medication and discontinuing medication in a single section.</li><li>Form JV-220(B): The requirement is to complete this form “only” if both boxes are checked. If the physician who completes JV-220(B) did not complete JV-220(A) previously, it is doubtful that the JV-220(B) physician will have much of note to add to a new JV-220(A) form. Deleting this requirement would better align with streamlining the JV-220 process.</li><li>Form JV-220(A): We recommend that a place for a diagnosis is included on the form.</li><li>Form JV-220(B), Item #7b. Please see comment on JV-220(A) #9.</li><li>Form JV-220(B), Item #17. Consolidation of #17 and #7 is recommended since both potentially include discussion of what may</li></ul>	<p>The committee has amended the form to renumber these two items sequentially.</p> <p>In the Winter 2016 cycle, the committee created a new form <i>Prescribing Physician’s Statement, Request to Continue—Attachment</i> (form JV-220(B)) to decrease the amount of information and time needed to complete the form when the same physician is requesting a renewal of a medication previously authorized by the court. Allowing a physician who has not previously prescribed the medication to fill out the shortened form is a suggestion that is likely to have varying opinions and would need to circulate for public comment. The committee will discuss this comment if the rule is again circulated for public comment.</p> <p>As circulated for public comment, the form requests the diagnoses from the <i>Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5)</i> at item 12.</p> <p>Both of these items have the option for the physician to check a box indicating “I don’t know.”</p> <p>The committee concluded that these should remain as separate items. One asks about the child’s response to the current medication and the other asks for information about the future,</p>

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		be extraordinary circumstances for the proposed medication regimen.	prescribed medication.
		In general, the fewer forms required, the more streamlined the JV-220 process will become, thereby improving the quality of and access to care for foster youth.	No response required.
		In regard to including the “legal guardian” (and Rule 5.640) as one who has authority for “informed consent”, it would be advisable that, if there is a legal precedent for “legal guardians” to give informed consent for other health decisions, then such authority be provided to them in this instance. This would streamline JV 220 related processes.	The committee has amended the rule and forms to include legal guardians.
		In regard to the discussion identified on page 5 related to serving children who cross county boundaries, a recently enacted law, AB 1299 (Ridley-Thomas), Chapter 603, Statutes of 2016, includes requirements to resolve the issues related to these same children. It may be prudent for the Judicial Council to urge county agencies that, insofar as the JV-220 procedures are concerned, decisions align with the spirit of AB 1299 to the degree possible.	No response required.
		We have concerns with how reasonable the seven day codified completion time is, considering how many issues must be addressed via the JV-220 process.	The requirement that within seven court days from receipt of a request the judicial officer shall either approve or deny the request is contained in statute. (Welf & Inst. Code §§ 369.5, 739.5). It is beyond the Judicial Council’s rulemaking authority to change this completion time.

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26.	CDSS By: Lori Fuller Permanency Policy Bureau Chief	AM	<p>1. Form JV-222 (Input on Application for Psych Med) states “Mandatory Form” whereas the JV-217 INFO indicates the form as an “Optional Form”. Also, the individuals listed in (2) on the JV-222 are not the same as those enumerated in the Rule of Court 5.640(c)(3), which says the JV-222 may be filed by a “parent or guardian, his or her attorney of record, a child’s attorney of record, a child’s CAPTA guardian ad litem, or the child’s Indian tribe.” Furthermore, Rule of Court 5.640(c)(2) indicates the child, caregiver, parents, tribe, and CASA may provide input through the JV-218, JV-219, or by letter, talking to the judge at a court hearing, through the social worker, probation officer, attorney, or CASA, or for CASA’s, via their court report, so these individuals are NOT required to use any judicial council form.</p> <p>2. Form JV-224 (County Report on Psych Meds) reads that social workers or probation officers must file this form, however, the form allows PHNs and “other county staff” to complete the form. Perhaps instructions need to be clarified to state that PHN or other staff may complete the form but it must be filed by SW or PO.</p> <p>3. Form JV-220 On page 2 and the corresponding Rule 5.640(c)(6) have been reworded to state that an applicant who is not the Social Worker or Probation Officer does not need to fill out items 5-13 of the form and only need to complete and sign page one. However, the signature line on page 1 of the form,</p>	<p>1. The committee has revised the form to indicate it is an Optional Form.</p> <p>2. The committee has revised the form to remove the signature line for public health nurses. While this form did not circulate for comment during this spring cycle, it generated many comments. Rule 5.640 requires, and form JV-217-INFO instructs that this form must be filled out by a social worker or probation officer.</p> <p>3. The committee has revised the form to indicate that the social worker or probation officer must complete all items of the form. The committee is unaware if staff other than the child’s assigned social worker or probation officer is filling out the first page of this form, therefor, changing the wording of who must sign page one is possible to</p>

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		currently reads “child welfare staff” whereas page two reads “social workers”. It would be beneficial that language remain consistent. The instructions underneath the signature line state child welfare staff and Probation officers need to sign page one and complete items 5- 13. However, according to Rule 5.640(c)(6), it states “if the applicant is the social worker or probation officer, he/she must complete all items on form JV-220. The signature line should be re-worded to state SW and PO must sign above and complete items 1-13 OR delete this language as specific instructions are on page two.	have varying opinions and would need to circulate for public comment. The committee will discuss this comment when the form is again circulated for public comment.
		4. Delegation of Authority for parental consent in Rule 5.640(e). The proposed changes in the proposed Rule 5.640(b)(1) –(2) includes “parent or guardian”, but in 5.640(e) only parents are mentioned, not guardians, and the JV-216 only includes findings and orders for a parent, not a guardian. Same thing with the second bullet point of the JV-217 INFO, only mentions child’s parents, not guardians. These need to be consistent.	4. The committee has amended the rule and forms to consistently include legal guardians.
		5. Short-term Residential Therapeutic Programs On page 8 of the proposed Rule of court 5.640(c)(9)(A), the rule notes that if a child is living in a group home, notice to the caregiver must be by notice to the group home administrator. It is suggested that STRTP’s be included: “...if a child is living in a group home or short-term residential therapeutic program, notice to the caregiver must be by notice to the	5. The committee has amended the rule and form with references to “short-term residential therapeutic program” consistent with this comment.



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			group home or short-term residential therapeutic program administrator. Also on page 10, in 5.640(h)(4) “If the child resides in a group home or short-term residential therapeutic program, a copy of the order....must be provided to the group home or short-term residential therapeutic program administrator....” Again on page 1 of the JV-220 under (1) Information about where the child lives. STRTC should be updated to STRTP.	
27.	State Bar of California By: Sharon Djemal Chair, Standing Committee on the Delivery of Legal Services	A	<ul style="list-style-type: none"> <li>Does the proposal appropriately address the stated purpose? <i>Yes. These are clean up changes that will further serve to streamline and reduce the time needed for the required recommendations to get to the court</i></li> <li>Should a form be created to document the court’s findings and order when the court orders that a parent is authorized to approve or deny the administration of psychotropic medication? If so, should that form be mandatory or optional? <i>Yes, a form should be created so that the parents’ views are considered and directions to the parents are clear. The form should be a mandatory form.</i></li> <li>Should rule 5.640(e) include legal guardians, in addition to parents, as those the court can order authorized to approve or deny the administration of psychotropic medication? <i>Yes. Many low-income children have guardians and recognizing them can help shorten the</i></li> </ul>	<p>No response required.</p> <p>The committee is recommending that the Judicial Council adopt <i>Order Delegating Judicial Authority Over Psychotropic Medication</i> (form JV-216) as a mandatory form.</p> <p>The committee has amended the rule and forms to consistently include legal guardians.</p>

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			<p><i>process.</i></p> <p>Low-income children with mental health challenges are often remanded into custody in order for all physicians to see the child and make their recommendations. Anything that can help the physicians do their jobs and get their recommendations to the court is beneficial. Also, the proposal will aid the understanding of the process for practitioners, including pro bono attorneys, who might not practice full time in this area.</p>	
28.	County of San Diego Health & Human Services Agency Children, Youth and Families, Behavioral Health Services By: Laura Vleugels, MD Supervising Child and Adolescent Psychiatrist		<p>Historically, there have been multiple requests to the County for the forms to be available on-line. Prescribers desire the ability to save the document so that it could be edited at a later time for subsequent submissions. There have also been multiple requests for a process by which the forms could be submitted electronically.</p> <p>There have been questions as to whether or not the JV-220 with the JV-223 that has been signed off by the Court could serve as informed consent, or not. The Department of Health Care Services (DHCS) noted in an audit that the JV-220 forms are missing specific elements and thus, to date, the JV-220 forms do NOT suffice as informed consent. This leads to challenges for our providers as they are unsure who should sign the informed Consent documents used for non-dependent youth. The missing elements identified by DHCS include 1) route of administration (by mouth, injection, etc.) and 2)</p>	<p>The forms are available online on the Judicial Council's website. If an agency would like to save the document, Word versions of the forms are available upon request and signing a usage agreement.</p> <p>The committee does not intend for these forms to be used to provide informed consent.</p>

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Child and Adolescent Psychiatrist at a local FQHC		a list of potential side effects of prescribed medications. If it is the Judicial Council's intent that this process serve as informed consent for dependent youth, please consider adding the elements identified by DHCS.	
		The County of San Diego has initiated a brief work study to evaluate the length of time that elapses between when a JV-220 form is submitted by a prescriber and when the JV-223 is received by that prescriber. Our focus has been to evaluate this duration for youth in group homes and in juvenile detention. Our primary concerns are delayed access to care for children and youth who are suffering from severe psychiatric symptoms and who have functional impairment. We have found and are concerned that the JV-22- process is taking an extreme amount of time (usually more than 4 weeks). A child or youth is left waiting for nearly a month while the process takes place for relief from symptoms after finally being evaluated by a psychiatrist.	The committee is aware that this process is often taking too long. Hopefully the work study being conducted in this county can identify where these delays are occurring.
		<ul style="list-style-type: none"><li>• We all agree at FHC with the suggested simplifications.</li><li>• I agree with changes below to the JV-220 and feel that would appropriately address my concerns as a provider.</li><li>• I also feel that it would be helpful to document if the courts find a parent can make decisions regarding meds and should be mandatory as otherwise not sure if this would always be done. Have the parents be able to sign consents and makes decisions for medications,</li></ul>	<p>No response required.</p> <p>No response required.</p> <p>The committee is recommending that the Judicial Council adopt <i>Order Delegating Judicial Authority Over Psychotropic Medication</i> (form JV-216) as a mandatory form.</p>

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Child and Adolescent Psychiatrist at an Outpatient Clinic and at our Juvenile Detention Facility		<p>would help speed up the process for starting and changing medications vs waiting several wks for a JV-220 to go through.</p> <ul style="list-style-type: none"><li>• I also feel that it should include legal guardians as in normal situations they would be able to make those decisions and often times I am dealing with legal guardians vs the biological parents.</li><li>• Very glad for the clarification about only needing to do JV-220 (a or b)</li><li>• Would be good to know local court rules or where to find them regarding notification. I could not locate this online and suspect that it is not really spelled out anywhere, at least in our notification. Maybe I just don't know where to look.</li><li>• Regarding the JV-220A – they stated they wanted to make it simpler. It is the same form with one new section (9b), another previous questions subsumed and another moved in regards to the order. This is still highly repetitive, reduplicative and pointless to provide to a judge who will not really be able to make an informed decision. It will take even more time that previous. I understand that judicial oversight is deemed to be important but this is clearly just about trying to limit access as this will just dramatically increase the time it take to care for a foster kid as opposed to a non-foster kid. Prediction: Even fewer providers will do it and more will simply refuse to see this population. I am not sure that this is even a medical billable activity (although I could be wrong on this last</li></ul>	<p>The committee has amended the rule to include legal guardians.</p> <p>No response required.</p> <p>As circulated for public comment, the rule was reorganized to make it clear that local county practice and local rules of court determine the procedures for the provision of notice.</p> <p>Most of the new questions on form JV-220(A) are mandated by SB 238 or already existed on the form in a series of questions that were separated into distinct items to ensure they were answered. The committee added two other questions that it believed were critical. The new questions on the proposed form that are not required by SB 238 are: “How long have you been treating the child?” and “In what capacity have you been treating the child (e.g. treating psychiatrist, treating pediatrician)?” The committee also made the medication administration schedule, which is currently on the form, mandatory rather than optional.</p> <p>If the physician filling out the form believes he or she has already answered a question, he or she can write, “See answer to question ___.”</p>

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	Child and Adolescent Psychiatrist who evaluates many CWS involved youth		<p>point). Question 7 is not necessary. Question 11b would be included in the chart in 11c and so is pointless. The diagnosis should be subsumed under symptoms (one question) or vice versa, Question 16 is a repetition of question 10. Question 18 is pointless.</p> <ul style="list-style-type: none"><li>• Regarding the JV-220B – I can’t tell anything else different except the addition of the diagnosis.</li><li>• What are they looking for in response to “Child’s overall mental health” (Question #7)?</li></ul>	<p>No response required.</p> <p>SB 238 amended Welfare and Institutions Code sections 369.5 and 739.5 to require that the rule of court and forms ensure that “information regarding the child’s overall mental health assessment and treatment plan is provided to the court”.</p>
29.	Superior Court of California, County of Los Angeles By: Sandra Pigati-Pizano, Management Analyst Management Research Unit	AM	<p><b>References to Physician’s Request to Continue Medication - Attachment (form JV-220(B))</b></p> <p>The issue of missing information on the JV-223 regarding the reference to the JV-220(B) pages was raised by judicial officers in Los Angeles County. The revisions address this issue and will provide clarification for the courts and staff as to the pages that will need to be copied.</p> <p><b>Other form changes</b></p> <p>The addition of parents to the description in the Guide to Psychotropic Medication Forms (form JV-217-INFO) is helpful, especially for delinquency cases, where parents are more likely to be involved.</p> <p>Including the list of specific documents and</p>	<p>No response required.</p> <p>No response required.</p> <p>No response required.</p>

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		<p>forms that must be provided to parties on the Proof of Notice of Application (form JV-221) will help staff in providing proper notice given that the documents and forms provided with the notice letter will vary depending on the party.</p> <p><b>Rule 5.640</b> Section (e) adds the requirement to use form JV-216 which will be key in tracking the dependents and wards who are taking psychotropic medication that has been authorized by parent or legal guardian consent rather than the court.</p> <p>The language in Rule 5.640 (h) Copy of order to caregiver and the revisions to the JV-223 will minimize confusion regarding the reference to provide copies of specific pages from the JV-220(A) or (B) for the caregiver.</p> <p><b>Suggested Modifications:</b></p> <ul style="list-style-type: none"><li>• Form JV-216 - Each section that mentions “parent” should include “legal guardian” as well. (Items 1, 2, and 3)</li><li>• Form JV-217-INFO - Optional Forms - add in “legal guardian”, “The parent, legal guardian, child, caregiver,...” Item 8 - Add “legal guardian” to the first and second paragraphs after “parent.”</li><li>• Form JV-221 - This form should include information as to which parties should receive a blank copy of a JV form or information on how to obtain the form that matches Rule 5.640. This would have a positive impact on time and cost for courts like Los Angeles that</li></ul>	<p>No response required.</p> <p>No response required.</p> <p>The committee has revised the form to include references to legal guardian.</p> <p>The committee has revised the form to include references to legal guardian.</p> <p>The committee has revised this form to clarify when information on how to obtain a copy of the form is permitted by rule 5.640</p>

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		<p>are providing the notices.</p> <ul style="list-style-type: none"> <li>Form JV-222 - Item 2 - Include a box for “legal guardian”.</li> </ul> <p><b>Request for Specific Comments:</b></p> <p>Does the proposal appropriately address the stated purpose?  <i>Yes</i></p> <p>Should a form be created to document the court’s findings and order when the court orders that a parent is authorized to approve or deny the administration of psychotropic medication? If so, should that form be mandatory or optional?  <i>Yes, a form to document the court’s findings and order that authorizes parents to approve or deny psychotropic medication will help to minimize confusion as to when the agencies need to seek future approval from the court or a parent. The issue comes up regularly in Los Angeles and we currently do not have a paper trail in the court file. The form should be mandatory given that the court is required to make findings and the issue is of statewide concern. In addition, it will facilitate research and data tracking.</i></p> <p>Should rule 5.640(e) include legal guardians, in addition to parents, as those the court can order authorized to approve or deny the administration of psychotropic medication?  <i>Yes, legal guardians should be included. Often,</i></p>	<p>The committee has revised this form to include a box for legal guardian.</p> <p>No response required.</p> <p>The committee is recommending that the Judicial Council adopt <i>Order Delegating Judicial Authority Over Psychotropic Medication</i> (form JV-216) as a mandatory form.</p> <p>The committee has amended the rule, and relevant portions of the forms, to include legal guardians.</p>

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		<p><i>the caregivers are not parents, but may involve legal guardians such as grandparents. This will minimize confusion as to whether the legal guardian is able to authorize the administration of psychotropic medications.</i></p> <p>Would the proposal provide cost savings? If so, please quantify.  <i>It may require additional resources for implementation.</i></p> <p>What would the implementation requirements be for courts - for example, training staff (please identify position and expected hours of training), revising processes and procedures (please describe), changing docket codes in case management systems, or modifying case management systems?  <i>There will be a need for training and revision of procedures. The training and revision should be minimal.</i></p> <p>Would two months from Judicial Council approval of this proposal until its effective date provide sufficient time for implementation?  <i>Yes</i></p> <p>How well would this proposal work in courts of different sizes?  <i>Los Angeles County has a regular committee and dedicated staff to facilitate the implementation of such proposed changes. How well the proposal works will depend on the resources available to each jurisdiction.</i></p>	<p>No response required.</p> <p>No response required.</p> <p>No response required.</p> <p>No response required.</p>



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30.	The State Bar of California By: Saul Bercovitch   Assistant General Counsel Office of General Counsel		<p>SUPPORT WITH COMMENTS</p> <p>The Executive Committee of the Family Law Section of the State Bar (FLEXCOM) supports the proposed changes, with the following comments.</p> <p>FLEXCOM offers the following responses to specific questions posed in the Invitation to Comment.</p> <ul style="list-style-type: none"><li>• Should a form be created to document the court’s findings and order when the court orders that a parent is authorized to approve or deny the administration of psychotropic medication? If so, should that form be mandatory or optional?</li></ul> <p>Having a form that the court can use when delegating decisionmaking authority back to the parent would be beneficial, as it would keep parties from having to scour through minute orders to confirm what happened. The proposed form includes the required findings a court must make in conjunction with such a delegation.</p> <p>FLEXCOM recommends the form, and the applicable subdivision of the rule, be amended in two ways. The first would call for a time period in which the delegation is effective. The second is to give the court the option of identifying the facts in support of the aforementioned findings.</p> <ul style="list-style-type: none"><li>•</li></ul>	<p>The committee is recommending that the Judicial Council adopt <i>Order Delegating Judicial Authority Over Psychotropic Medication</i> (form JV-216) as a mandatory form.</p> <p>Ultimately, the committee concluded, and now recommends, that an expiration date should not be included on the form, but that the form should read: “The parent or legal guardian in (1) is authorized to approve or deny the administration of psychotropic medication for the child, unless such authority is modified by a subsequently issued order.” The committee concluded that requiring the court to identify the facts in support</p>

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			<ul style="list-style-type: none"><li>Should rule 5.640(e) include legal guardians, in addition to parents, as those the court can order authorized to approve or deny the administration of psychotropic medication</li></ul> <p>FLEXCOM opposes such a delegation. The reasons for which a court should have authority to delegate to a noncustodial parent do not uniformly apply with the same force to a noncustodial legal guardian.</p> <p>On a somewhat related note, there is some ambiguity as to whether a court must authorize the administration of medication if the child is in the care of a legal guardian. FLEXCOM recommends that Rule 5.640 be amended to clarify that a guardian with custody of a dependent or ward has the exclusive authority to authorize medication.</p>	<p>of the required findings was too time-consuming and not necessary to include on the form since that information would be included in the record of the hearing.</p> <p>The court can only authorize a parent to approve or deny the administration of psychotropic medication upon finding that the parent poses no danger to the child and has the capacity to authorize psychotropic medication. Based on all other comments received on the issue of legal guardians, the committee has amended the rule and relevant portions of the forms to include legal guardians.</p> <p>The committee has amended rule 5.640(e) to include legal guardians. The rule only applies if a child has been removed from the custody of his or her parent or legal guardian.</p>
31.	Foster Care By: Rosie Louu	N	1. The PMA is too many pages, provider cannot complete all the pages.	1. Most of the new questions on form JV-220(A) are mandated by SB 238 or already existed on the form in a series of questions that were separated into distinct items to ensure they were answered. The committee added two other questions that it believed were critical. The new questions on the proposed form that are not required by SB 238 are: “How long have you been treating the child?” and “In what capacity have you been

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				treating the child (e.g. treating psychiatrist, treating pediatrician)?” The committee also made the medication administration schedule, which is currently on the form, mandatory rather than optional.
				If the physician filling out the form believes he or she has already answered a question, he or she can write, “See answer to question ____.”
			2. Sufficiency service time to patient not to the paper work.	2. See response above.
			3. PMA could be one of the task management by professional of Mental Health Department.	3. Sections 369.5 and 739.5 require that the court authorization of psychotropic medication must be based on a request from a physician.
			4. A foster child's case management is by social worker. Social worker made the overall care of plan for the child. Social worker has complete information about the child.	4. The committee has revised the form JV-224 to remove the signature line for public health nurses. While this form did not circulate for comment during this spring cycle, it generated many comments. Rule 5.640 requires, and form JV-217-INFO instructs that this form must be filled out by a social worker or probation officer.
			5. PHN name on the PMA is not proper. PHN would not have overall information about the child.	5. See response above,