

A Report to the Secretary  
Analysis of Florida Safe Families Network (FSFN) Data on  
Psychotropic Medication  
May 28, 2009

The Department has completed an initial review of data regarding children in the custody of the Department who receive psychotropic medications. These data are provided in Attachment 1. Children continually enter and leave the child welfare system, and their circumstances change. This report will be updated on a weekly basis and posted to the Department's Gabriel Myers website, which is [www.dcf.state.fl.us/admin/GMWorkgroup/index.shtml](http://www.dcf.state.fl.us/admin/GMWorkgroup/index.shtml). The following describes the review process, the steps already taken and those planned to improve the quality of the data, and the steps being taken to obtain required approvals for administration of the medications if the approvals are not currently reflected in DCF records.

## **Background**

On April 16, 2009, the Broward County Sheriffs Office, Protective Investigations Division, received a report from the Florida Abuse Hotline regarding the tragic death of Gabriel Myers, a 7-year-old foster child living in Ft. Lauderdale. After his death, the Department of Children and Families (DCF, or the Department) and ChildNet, Inc., the community-based care (CBC) lead agency for Broward County, completed a quality assurance review of the case. This quality assurance review was completed on April 24, 2009.

Among other deficiencies noted, a valid informed consent, consistent with the requirements of Florida Statutes, had not been obtained for psychotropic medication prescribed for Gabriel. After further review of Gabriel's case file, Department staff noted that the Department's data system, the Florida Safe Families Network (FSFN), did not properly reflect medication information in the individual case files.

As a result, DCF Secretary George Sheldon directed that the files of every foster child be reviewed to ensure that any child who was prescribed psychotropic medication was accurately reflected in the Department's automated records. Further, he directed that staff verify the existence of a parental consent or a court order authorizing the child to receive such medication. It became apparent during the review that many FSFN data fields had missing data elements pertaining to psychotropic medications, including such items as dates of parental consent or judicial court orders, diagnoses, assessment dates, and dosages.

DCF Acting Assistant Secretary for Operations (ASO) John Cooper directed DCF Regional Directors and Circuit Administrators to review the FSFN files on all

children for the accuracy and completeness of medication data, to update files as necessary, and to ensure that informed consent or a court order was obtained in every case with a current prescription for psychotropic medication.

On May 5, 2009, ASO Cooper and Assistant Secretary for Programs David Fairbanks directed Regional Directors and the local lead agencies to look outside the FSFN system, to the original case files, and independently identify all children with current prescriptions for one or more psychotropic medications without relying on the FSFN data system. The information in each child's case file was to be compared with the information in FSFN to ensure that the FSFN record is current and accurate. They were also instructed to verify that all children with current prescriptions for psychotropic medication have informed parental consent and/or court orders for the medications. Children's Legal Services attorneys and CBC case managers were to review cases together and immediately obtain the required approvals for the administration of any psychotropic medication prescribed.

On May 12, 2009, ASO Cooper directed that each Regional Director verify the data entry that is required for each child prescribed psychotropic medication and to make sure no children prescribed such drugs were omitted from FSFN. Missing and incomplete data in the FSFN Medication section should be corrected, and proper training and supervisory review should occur to ensure accurate documentation of medication.

In addition, ASO Cooper made it clear that the consent requirement applied to any psychotropic medication (regardless of diagnosis or reason it was prescribed) or any prescribed medication that may be used as a psychotropic medication. As provided by Florida Statutes 39.407, before medication is given to the child, there must be either informed consent from the parent or legal guardian, or a court order.

## **Review of Data**

The results of the initial report indicate:

- A total of 2,669 (13.19%) of Florida children in out-of-home care have been prescribed one or more psychotropic medications.
- The largest segment (59%) of those 2,669 children on psychotropic medication is between the ages of 13 and 17 years old.
- There are 73 children (2.75% of the 2,669) ages 5 and under who are receiving psychotropic medications.
- No record of consent or judicial order was found for 16.2% of the 2,669 children receiving psychotropic medication.

As previously noted, a detailed breakdown of these data is provided in Attachment 1 of this report.

## **Florida Statutes, Rules and Procedures relating to Psychotropic Medication**

The basic law regarding administration of psychotropic medication is found in Florida Statutes Section 39.407 and is implemented through Florida Administrative Code Chapter 65C-28.003 and DCF Operating Procedure (CFOP) 175-98. CFOP 175-98 focuses on children ages 5 years and under and outlines steps that must be taken prior to administration of psychotropic medications, including a second-party review. Copies of these regulating documents are Attachments 2, 3 and 4 to this report.

### **Actions Underway to Address Gaps Identified**

1. Children's Legal Services attorneys and case managers are working together to ensure that in every case lacking parental consent, these are obtained by June 5, 2009. Where parental consent cannot be obtained by that date, the matter will be taken before the court of jurisdiction. By June 5 every child who is taking the medications and lacks parental consent will be brought to the court's attention. In some cases, it may be necessary to obtain updated psychological or medical assessments before final approval is given. The judge will determine, based on each child's circumstances, what is in the child's best interest.
2. The Department is conducting an immediate quality assurance review focusing on the validity and reliability of the data contained in FSFN and the quality of the consents already obtained. Reviews will be conducted by quality assurance specialists and legal staff in collaboration with community-based care lead agencies. The top priority of this review will be children 5 and under.
3. Using the results of the special quality assurance review, the Department will strengthen its quarterly quality management process to ensure that there is on-going review of children in out-of-home care receiving psychotropic medications. This enhanced review will determine if applicable Florida Statutes, Florida Administrative Code, and CFOP 175-98 are being followed consistently. It will also determine whether data on psychotropic medications are entered into the FSFN data system completely, accurately and in a timely manner.
4. CBC lead agencies and DCF Regions are designating a point of contact for a weekly call on psychotropic medication. The purpose of these calls is to ensure effective communication on improvements that must take place, to respond to any questions from the CBCs concerning psychotropic medications, and to resolve outstanding issues. Instructions regarding the enhanced quality assurance process for FSFN data integrity will be provided, and training needs

will be identified. These weekly calls will be jointly led by the Assistant Secretary for Programs and the Acting Assistant Secretary for Operations.

5. The Department is working with the pharmacy program at the Agency for Health Care Administration (AHCA) to cross-check FSFN data on psychotropic medications against the AHCA pharmacy database on paid Medicaid claims. Although the information in the AHCA pharmacy database may not be entirely consistent with FSFN data, such a cross-match is another tool to validate that all children prescribed psychotropic medications are, in fact, identified, and their circumstances documented correctly.

6. The Department is taking immediate steps to strengthen the requirements on lead agencies regarding the timeliness and accuracy of data entry into the system of record (FSFN).

7. In anticipation of developing a standardized statewide policy, the Department has requested that all CBCs with local policies on administration of psychotropic medication provide these to the Department for review. Nine CBCs have such policies. The remainder indicated that they do not have their own local policies. Under their contracts with DCF, the CBCs without local policies are governed by DCF policies. (A chart reflecting the status of the local policies is Attachment 5.)

Attachment 5

Status of CBC Local Policies on Psychotropic Medication

Region/Agency (Circuit) – 5/12/2009	CBC Policy & Procedure on Psychotropic Medication Yes/No – Date of Policy
<b>Northwest Region</b>	
BIG BEND CBC EAST (2)	No - Draft Submitted to CBC Leadership
BIG BEND CBC WEST (14)	No - Draft Submitted to CBC Leadership
Families First Network (1)	No
<b>Northeast Region</b>	
CLAY & BAKER KIDS NET, INC. (4)	Yes - 12/01/2003
COMM. PARTNERSHIP FOR CHILDREN (7)	No
Family Support Services (4)	Yes - 7/2005
PARTNERSHIP FOR STRONG FAMILIE (3 ,8)	Yes - 2/21/2005
St. Johns County Commission/Family Integrity Program (7)	No
<b>Central Region</b>	
CBC of Brevard (18)	Yes
CBC of Seminole (18)	No
Family Services of Metro Orlando (9)	No
HEARTLAND FOR CHILDREN, INC. (10)	No
Kids Central, Inc. (5)	Yes - 8/10/2006
United for Families (19)	Yes - 2/13/2008
<b>Suncoast Region</b>	
Children's Network of SW Florida (20)	No
Eckerd Youth Alternatives Inc (6)	Yes - Uses the "YMCA" policy
Hillsborough KIDS, Inc. (13)	No – However, anticipates finalizing its policy in the next few weeks.
YMCA SOUTH (12)	Yes - 5/14/2004
<b>Southeast Region</b>	
Child and Family Connections (15)	Yes - 1/31/2008
ChildNet, Inc. (17)	Yes - 9/08/2005
<b>Southern Region</b>	
Our Kids Inc. (11,16)	No - However, has local form and protocol