Family Partnerships of Central Florida
BREVARD | ORANGE | OSCEOLA | SEMINOLE

PROCEDURE

Series:	**Operating Procedures**	**COA:** **CFOP: 170-18**
Procedure Name:	Pre-Consent Review for Psychotropic Medication Treatment Plans for Children Age 0-17 In Out-Of-Home Care Who Are Prescribed Two (2) Or More Psychotropic Medications	
Procedure Number:	OP-1098	
Review Date:	01/10/12, 05/03/16, 09/25/2020, 4/17/24	
Revision #/Date:	08/06/08, 10/01/25	
Effective Date:	04/07/05	
Applicable to:	All FPOCF Staff and Contract Providers	

SUBJECT:	Psychotropic medication
PURPOSE:	This operating procedure describes the process for obtaining a pre-consent review for children 0-17 years of age who are in out-of-home placement and prescribed two (2) or more psychotropic medications.

PROCEDURE:

References:

Relevant provisions relating to use of psychotropic medication for children are as follows:

a. Section 39.407, Florida Statutes, Medical, psychiatric, and psychological examination and treatment of child; physical or mental examination of parent or person requesting custody of child.

b. Department of Children and Families General Counsel Opinion No. 2001-04 and 2001-04(a).

1. Definitions:

Authorization for Psychotropic Medication Treatment

i. A person who has the power to provide consent for a child to receive psychotropic medication, as provided by law, includes a birth or adoptive parent or a legal guardian.

ii. If a child does not have a birth or adoptive parent or a legal guardian, authorization to treat psychotropic medication must be pursued through a court order.

Care/Case Manager - A person who is responsible for participating in the development and implementation of a case plan, linking the service providers to a child or adolescent and his or her family, monitoring the delivery of services, providing advocacy services, and collecting information to determine the effect of the services and treatment on child safety, well-being and permanency.

FPOCF - Refers to Family Partnerships of Central Florida, unless otherwise specified.

Prescribing Practitioner - A physician licensed under Chapter 458 or 459, Florida Statutes, or an advanced registered nurse practitioner licensed under Chapter 464, Florida Statutes.

Psychotropic Medication - Any drug prescribed with the primary intent to stabilize or improve mood, mental status, behavioral symptomatology, or mental illness. The medications include, but are not limited to, the following major categories:

a. Antipsychotics;
b. Antidepressants;
c. Anxiolytics;
d. Mood stabilizers;
e. Psychomotor stimulants or atomoxetine; and,
f. Other medications commonly used may include, but are not limited to, alpha 2 blockers, beta blockers, anticonvulsants, cognition enhancers, and opiate blockers. These other medications shall be considered a psychotropic medication only when used to stabilize or improve mood, mental status, behavior, or mental illness. When a physician has clearly documented that psychotropic medications are being prescribed for purposes other than to improve mood, mental status, behavior, or mental illness, a pre-consent review is not required.

2. General Statement

A mandatory pre-consent review by a child psychiatrist, contracted by the department, is obtained prior to prescription of a psychotropic medication for any child under the age 0-17 who is in the custody of Family Partnerships of Central Florida in out-of-home care. The final recommendation of the consultant child psychiatrist is intended to be used by the person who has legal authority to consent for extraordinary medical treatment or the judge who is providing the court order for treatment with a psychotropic medication.

3. Pre-Consent Review Procedure

a. Completion of the pre-consent review process for children age 0-17 who are in the custody of the department in out-of-home care and prescribed two (2) or more psychotropic medications is the responsibility of the child's care/case manager.

b. The care/case manager will complete the demographic section of the Psychotropic Medication Treatment Plan Review form (CF-FSP 5279, available in DCF Forms on the Internet and Intranet) if the child is 0-17 years of age, in the custody of the department in out-of-home care and prescribed two (2) or more psychotropic medications.

c. The care/case manager will coordinate a psychiatric evaluation for the child, will take the child to the prescribing practitioner's office for the evaluation, and if two (2) or more psychotropic medications have been prescribed will request the prescribing practitioner to complete the psychotropic medication treatment plan on the Psychotropic Medication Treatment Plan Review form (CF-FSP 5279) during the time the child is there.

d. The care/case manager will complete the on-line medical review request form accessed at https://dcf.psychaitry.ufl.edu/ within one (1) business day of the child's office visit.

e. The department's contracted consultant child psychiatrist will review the submitted request and document their review and recommendations on page 2 of the form within 48 hours of receipt and send an encrypted email of the completed review to the care/case manager. If further information is needed or the consultant does not concur with the prescribing practitioner's treatment plan, the consultant will contact the prescribing practitioner by telephone to discuss the treatment plan. If the consultant is unable to obtain the information needed to provide a completed review, the consultant will note that inability on the form.

f. The care/case manager will provide the completed Psychotropic Medication Treatment Plan Review to the prescribing practitioner on the day it is received.

g. The care/case manager will deliver the Psychotropic Medication Treatment Plan Review to the individual with legal authority for providing informed consent or to the child welfare legal attorney who shall file the motion for court authorization for psychotropic medication treatment within one business day.

h. If the individual responsible for providing consent or the judge responsible for providing the court order for treatment have questions regarding the psychotropic medication treatment plan review or the consultant child psychiatrist's recommendations, the care/case manager will assist with obtaining the information.

i. The care/case manager will upload a copy of the Psychotropic Medication Treatment Plan Review in the mental health/medical tab of the child's FSFN file cabinet.

j. If the psychotropic medication treatment identified in the plan does not yield expected results, the pre-consent review process identifying a new medication treatment plan will begin again as described in paragraphs 6a through i above.

BY DIRECTION OF THE PRESIDENT AND
CHIEF EXECUTIVE OFFICER:

PHILIP J. SCARPELLI
President and Chief Executive Officer
Family Partnerships of Central Florida

APPROVAL DATE: 10/31/2025