

Psychotropic Medication Advisory Committee
Open Meeting Minutes
Harry S. Truman Building
301 E. Main Street, Jefferson City, MO
January 27, 2020
9:00 AM to 12:00 PM

Committee Members

Present

Judge Sue Crane (Chair)	Dr. Maya Moody (Phone)	A.G
Dr. Laine Young- Walker (Co-chair) (Phone)	Dr. Mark Roaseau (Phone)	A.J.
Dr. Patsy Carter	Connie Cahalan	Nick Mebruer
Dr. Josh Moore	Carrie Bolm	
Dr. Nathan Beucke	Lisa Dyer	

Additional Psychotropic Medication Advisory Committee (PMAC) Meeting Participants

Stacie Frueh	Children's Division, Health Specialist Coordinator
Mark Gutchen	Department of Social Services, General Counsel
Teri Armistead	Children's Division, Deputy Director
Ellen Haynes	Children's Division Special Counsel
Melissa Kenny (Phone)	Children's Division, Health Specialist Unit Manager
Larry Smith	Children's Division, Program Development Specialist
Al Greimann	Missouri Hospital Association Member
Sarah Willson	Missouri Hospital Association Member

1. Welcome

- Meeting called to order at 9:03 AM by Chair.
- Teri Armistead was introduced to the Committee.
- Motion to approve the minutes from November 25, 2019. Seconded and approved.

2. Agenda Review

A. Words from PMAC Chair

- Chair introduced self and described her role as the facilitator of the PMAC meetings.
- Chair's primary purpose is to listen to the committee members' topics and formulate a plan to address the topics.

- Chair requested information regarding the CD staff positions related to the Settlement Agreement.
- CD Health Specialist Coordinator explained that there were 12 positions allocated in the Agreement. Currently, there is only one (1) vacancy. The positions are based throughout the state covering each judicial circuit. The positions are entitled: Health Information Specialist (HIS); the unit also has a manager and coordinator.
- The primary duties of the HIS staff are medical records, education, and case reviews specific to the Agreement.

B. Continued Informed Consent Discussion

During the November 25, 2019 meeting the following topic was discussed:

Informed Consent – Children in Inpatient Hospitalization

Children who are admitted to inpatient hospitalization settings can sometimes demonstrate aggressive behaviors that potentially pose a threat to other patients and staff. There are medications which can be administered to decrease aggressive behaviors. The tension lies with the definition of emergency administration allowed by the settlement (PRN meds); hospital standards governing chemical restraint; and the accessibility of CD and parents to quickly make an informed consent decision.

- Chair began the discussion with an indication that this topic was a continuation from the last PMAC meeting.
- Al Greimann and Sarah Willson, discussed the concerns with PRN medications, which are usually one time dose per episode vs medications prescribed on an ongoing basis to help address aggressive behaviors. Each time a PRN is needed a new order must be obtained.
- Al Greimann and Sarah Willson indicated that they would like to prepare a proposed protocol, for committee review, to allow hospitals to administer psychotropic medications in specific circumstances prior to obtaining informed consent.
- Guardian ad Litem requested information regarding what types of medications could be used.
- Al Greimann and Sarah Willson discussed possible solution of creating tool box of approved medications (PRN protocol). Al and Sarah will write up proposed protocol and present at the next PMAC meeting.
- Youth committee members asked if the proposed protocol was put into place, under what circumstances the child would get the medications.
- Al Greimann responded that the protocol would only be for very specific cases i.e., children who are demonstrating signs of immediate physical harm to self and others. The medication would no longer be administered when the aggressive behavior stops.
- Al Greimann indicated that the issue is obtaining timely informed consent for the administration of psychotropic medications during crisis situations.
- Committee members indicated that the importance of providing timely informed consent has been emphasized to case managers during various trainings.
- DMH representative indicated that training alone may not be the way to address the problem. There may need to be a system or process change that could be a better way to address the problem.

C. Clinical Sub-Committee – update regarding excessive dosage

- Chair for the clinical sub-committee began the conversation with an update of both clinical sub-committee meetings.
- Clinical sub-committee met on December 17, 2019 and January 14, 2020.
- During the December meeting, Chair established a project timeline.
- The timeline required the clinical sub-committee to have an "Excessive Dosage Criteria" guideline draft to the PMAC committee in April 2020 and the final guideline in June 2020.
- Chair asked clinical sub-committee members to review three (3) state programs regarding the "Excessive Dosage Criteria" and share their reviews during the January meeting.
- The states were Texas, Florida and New Jersey.
- During the January meeting, Texas and Florida appeared to have the most comprehensive program for psychotropic medications.
- A general consensus among the clinical sub-committee members was that the psychotropic medication review tables contained in both the Texas and Florida programs were helpful in providing a framework for an "Excessive Dosage Criteria" guideline.
- Some other positive features were topics about how to reduce medications, the concept of de-prescribing medications, comprehensive assessments and emphasis on non-pharmacological interventions.
- Chair indicated that timeline and draft for April will be re-emphasized during the next meeting.
- Committee member asked if any of the states showed lower rates of psychotropic medication use.
- Clinical sub-committee member responded Texas has shown a decrease and they have doing their program for six (6) years.

D. Youth Issues-Create sub-committee to prepare our children to be their own informed medical advocates.

- DSS General Counsel discussed a video produced by youth in Children's Division's legal custody.
- The public release of the video has not occurred due to consent concerns for youth 17 years of age and older involved in the video.
- Chair has requested to see the video and has encouraged all members to see the video when it is legally ready for the public.
- Youth committee members mentioned going to foster care homes and talking to children about being their own advocates.
- CD staff mentioned that this would be good in conjunction with residential care staff.
- Youth committee members felt the addition of any adults during their visits would not allow the children to talk open and freely about their concerns.
- CFE representative indicated that there is a program in place that could provide the same services regarding advocacy.
- Youth committee members were aware of the program and felt it could meet their needs for medical advocacy.
- Youth committee members volunteered to participate in the program with CFE representative.

4. Open Discussion

- No open discussion from the PMAC members or the PMAC participants.

5. Action Items

Chair has instructed PMAC members on the following:

1. Send any ideas on programs/processes for prescribing psychotropic medications to children during inpatient treatment to the Chair. The Chair will review and provide feedback at next meeting.
2. CFE will gather data on children who are in foster care and prescribed psychotropic medications to do a comprehensive review of inpatient hospitalizations.
3. Missouri Hospital Association will present their protocol of the suggestions for use of psychotropic medications for specific inpatient hospital situations.
4. Clinical sub-committee members provide an update on the progress of the "Excessive Dosage Criteria" guideline.

6. Meeting Adjourned

Meeting was moved to adjourn at 12:02 p.m.

Meetings scheduled from 9:00 A.M. – 12:00 P.M. and will be held at Governor Office Building, 200 Madison St., Jefferson City, MO in Room 315 on:

February 24, 2020

March 23, 2020

April 27, 2020

June 22, 2020

July 27, 2020

August 24, 2020

September 28, 2020

October 26, 2020

November 23, 2020

December 28, 2020

May 25, 2020 – No Meeting State Holiday