

# Important Information About Giving Foster Children Medication

## All medication given to a child must be written on the Medication Log.

Ask your caseworker for one of these if it wasn't provided to you. It's good to keep a few on hand. Give these logs to the child's case worker at the end of each month to be reviewed.

## Special rules about psychotropic medications

There are special rules about psychotropic medication for children in foster care. A psychotropic medication is any kind of medication used to alter the child's sleep, mood, emotions or behaviors. These medications include some common over-the-counter medications, like Benadryl and Melatonin for sleep. They also include stimulant medications for ADHD. Research shows psychotropic medications are prescribed for children in foster care much more than other children. To make sure foster children are appropriately treated for mental health conditions, DHS created a process to review and approve these medications.

## DHS added more layers of oversight and approval before a child can start a psychotropic medication.

- The policy doesn't apply to medications that a child is already taking when they enter foster care.
- The child must have a current mental health assessment before new medications can be started.
- The prescribing clinician must request approval from the local DHS office. PCPs are aware of this policy and have the forms they need to fax to the Child Welfare office.
- Sometimes the prescribing clinician will still send the prescription home with you before receiving approval. Don't fill the prescription until the case worker notifies you that it is approved. If the prescription is sent to the pharmacy electronically, don't give the medication to the child without receiving approval from the caseworker.

If you are taking a child to their PCP or other clinician with concerns about their sleep, behaviors, emotions or activity level, DHS would like everybody to pause and see if there are trauma informed, non-medication interventions to try first. These could include:

- Routine and stability.
- Empathy and connection with a caregiver (Trauma Based Relational Intervention is a model that is very effective in parenting children who have experienced trauma).\*
- Mental health counseling, such as Cognitive Behavioral Therapy.
- Focusing on the child's strengths and gifts, rather than their deficits.
- Encouraging physical activity, especially those that are rhythmic or sensory soothing, like dancing, swinging and swimming.
- Identifying the child's triggers and developing a plan that the child can also agree to try (this is often used in Collaborative Problem Solving [CPS]).\*

*\*Please ask your certifier or the child's case worker for help finding these resources!*



**Have questions? Call us: 503-947-1187**

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You can get this document in other languages, large print, braille or a format you prefer. Contact Health and Wellness Services at 503-947-1187. We accept all relay calls or you can dial 711.