

Chapter: Mental Health	Effective Date: 7/15/14
Title: Involuntary Emergency Administration of Psychotropic Medication	Page: 1 of 2
ACA: 4-JCF-4C-45(M), 4C-29	Replaces: HSP.06.10, 6/1/09
Implements: GAP.380.9192	

(a) **Standard.**

Involuntary emergency administration of psychotropic medication(s) complies with applicable state laws and regulations. When administered, the process includes:

- (1) authorization by a psychiatric provider or physician for nursing staff to administer the medication for a specified duration;
- (2) a determination by the psychiatric provider or physician that less restrictive intervention options have been exercised without success;
- (3) a written/verbal order specifying details about why, when, where, and how the medication is to be administered;
- (4) observation of the youth for adverse reactions and side effects; and
- (5) preparation of less restrictive treatment plan alternatives as soon as possible.

(b) **General Provisions.**

(1) **Criteria for the Involuntary Emergency Administration of Psychotropic Medication.**

- (A) Psychotropic medication may be administered in an injectable form to a youth with a diagnosed mental health condition in a psychiatric emergency when the youth cannot or will not give consent and the youth demonstrates any of the actions listed below:
 - (i) imminent and substantial harm to self because of overt behaviors that could result in bodily harm or death; or
 - (ii) imminent and substantial physical harm to another because of acts the youth overtly commits.
- (B) Only a psychiatric provider or a physician may prescribe the involuntary administration of psychotropic medication.
- (C) The **superintendent, manager of institutional clinical services, and the health services administrator or their designees** must ensure that all possible interventions within reason for the situation have been attempted and documented before a nurse contacts the psychiatric provider or physician for an order.

(2) **Restrictions for Administering Psychotropic Medication.**

- (A) Psychotropic drugs must not be administered for purposes of punishment or for program management or control. Pharmaceutical experimentation or research using Texas Juvenile Justice Department (TJJD) youth is strictly prohibited.
- (B) Standing medication orders are prohibited in a psychiatric emergency.

(c) **Procedures.**

- (1) A **registered nurse** notifies the psychiatric provider or physician by phone to inform him/her of the youth's behavior and physical condition, including pertinent information such as current medications, recent injury, known medical problems, and, if known, what precipitated the situation. The registered nurse documents the phone conversation in the Electronic Medical Record (EMR).
 - (2) If an order is given by the psychiatric provider or physician to medicate the youth against his/her will, the order must:
 - (A) include the route of administration;
 - (B) be effective for one dose only;
 - (C) include the justification for the involuntary medication; and
 - (D) be signed within 72 hours by the ordering provider or physician.
 - (3) When an order is given, the **health services administrator or designee** notifies:
 - (A) the superintendent and manager of institutional clinical services as soon as feasible after receipt of the order; and
 - (B) the medical director and nursing director no later than the end of the current shift.
 - (4) A **registered nurse** must report to the ordering provider or physician and document in the EMR the youth's response to the medication at 30 minutes, 60 minutes, and two hours after medication administration, to include medication effectiveness and the presence of any side effects.
 - (5) The **manager of institutional clinical services or a psychology staff member in consultation with the manager of institutional clinical services** evaluates the youth within eight hours after the medication administration and develops a less restrictive treatment plan.
 - (6) If the ordering provider is not a psychiatric provider, a **psychiatric provider** evaluates the youth within 72 hours after receiving the medication.
 - (7) The **University of Texas Medical Branch – Correctional Managed Care (UTMB) psychiatric director** (or a psychiatrist other than the one ordering the emergency medication) reviews the case within seven calendar days after the medication administration for the purpose of making an independent determination of the need for the involuntary medication. The **health services administrator** notifies the UTMB psychiatric director of the need for an independent case review.
 - (8) The **TJJD medical director and director of nursing** review documentation of all cases and evaluate policy compliance. Cases are brought to the TJJD/UTMB Continuous Quality Improvement Committee for multidisciplinary staff discussion.
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