

News release

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Oregon selected for a national pilot project to improve the use of psychotropic medications among children in foster care

Multi-year quality improvement initiative awarded based on state's progress

Oregon continues efforts to ensure the most appropriate use of psychotropic medications in the child welfare system. Based on this progress, the Department of Human Services (DHS) and Oregon Health Authority (OHA) announced today that Oregon has been chosen as one of five states that will be part of a national pilot project focused on improving use of medication among children and adolescents in foster care with mental and behavioral health needs.

This three-year initiative, developed by the Center for Health Care Strategies (CHCS) and made possible through the Annie E. Casey Foundation, will identify new strategies focused on quality improvement related to prescribing, monitoring, and oversight of psychotropic medication use. Oregon will join Illinois, New Jersey, New York and Vermont in creating a cross-agency team – including state Medicaid, child welfare, and behavioral health agencies as well as families, youth and providers, to develop and implement new approaches to psychotropic medication use.

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Nationwide rates of psychotropic medication use are especially high among children in the child welfare system. Oregon has made improvements and in 2009 new legislation strengthened psychotropic medication laws allowing children in its care to have the appropriate health assessment and early diagnosis in the course of treatment. On October 31, 2008, 20 percent of children in Oregon's foster care were receiving psychotropic medications. By comparison, in 2010, our numbers show improvement with 14 percent receiving psychotropic medications.

"Foster children are in the care and custody of the state, and we take their medical care very seriously," said Erinn Kelley-Siel, DHS director. "DHS and our partners at OHA have been working closely on this issue for several years, and this collaborative will help us continue to improve the quality of services foster children deserve when they are in a crisis."

Recent federal legislation requires child welfare agencies to partner with state Medicaid agencies (Oregon Health Authority has this role in Oregon) to develop coordinated plans for the monitoring and oversight of psychotropic medication use among children in foster care.

"This important initiative will help us better coordinate the mental health treatment for foster children," says Bruce Goldberg, M.D., Oregon Health Authority director. "We know that coordination of care will bring better health for children and also lower costs for the state, and we look forward to working with our federal partners."

Lessons and best practices identified through the collaborative will be shared broadly to guide other states in developing effective policies and practices for the appropriate use of psychotropic medications, so as to improve care and outcomes for children in foster care throughout the country.

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“We are delighted to welcome these five states to advance opportunities for more effective psychotropic medication use for children in foster care,” says Kamala D. Allen, director of Child Health Quality at CHCS. “These teams are clearly committed to finding innovative ways to ensure that the children entrusted to their care receive the most appropriate services to meet their needs, and achieve the best outcomes possible.”

For more information on CHCS’s work in children’s behavioral health and child welfare, visit www.chcs.org.

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