

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE POLICY	
Chapter 8: Out-of-Home Services Section 30: Psychotropic Medication		
Effective Date: January 1, 2026	Version: 1	

POLICY OVERVIEW

The Indiana Department of Child Services (DCS) wants to make sure that children in its care only take psychotropic medications when it's safe and necessary. These medications are used to treat emotional and behavioral health issues and must be used carefully. DCS works to include the child's parent, guardian, or custodian in decisions about these medications whenever possible. The Child and Family Team (CFT) may also seek other treatments to meet the child's needs.

POLICY STATEMENT

DCS will get consent, when possible, from the parent, guardian, or custodian before approving psychotropic medication for a child under DCS care and supervision. Diligent efforts must be made to involve them in this decision.

Note: If a parent, guardian, or custodian cannot be found within 24 hours and waiting would impact the child's health, DCS will approve the use of the medication.

DCS will seek a court order for the **continued** use of psychotropic medication if:

1. Waiting on parental consent may impact the child's well-being;
2. Parental rights have been terminated;
3. The parent, guardian, or custodian cannot make decisions due to physical or mental impairment;
4. The child is in acute psychiatric treatment; or
5. A court has already approved the requested medication.

Acute Psychiatric Stays

Only DCS consent is necessary for prescribing a psychotropic medication to a child under DCS care and supervision during an acute psychiatric stay.

Note: Psychotropic medication may be administered without DCS consent when:

1. The child is an immediate danger to self or others; and
2. No other treatment will reduce the danger.

Psychotropic Medications During Residential Treatment

If a child is prescribed psychotropic medication and is in a residential treatment facility (excluding emergency shelter care [ESC]), the provider must upload a report from the licensed professional to KidTraks every 35 calendar days that includes the child's health care information (e.g., medical treatment and psychotropic medication) and the licensed professional's in-person observation of the child, at least every 93 calendar days.

LEGAL REFERENCES

- [IC 16-36-1: Health Care Consent](#)
- [IC 25-22.5: Physicians](#)
- [IC 25-23: Nurses](#)
- [IC 25-27.5: Physician Assistants](#)
- [IC 31-27-9: Health Records and Medications](#)
- [IC 31-27-9-3: Psychotropic medication](#)