## DCF Psychotropic Medication Advisory Committee Monthly Meeting Notes

January 7, 2011 1:00PM Riverview Hospital for Children and Youth Middletown, CT.

PRESENT: See enclosed attendance record.

1. <u>Call to order</u>: the meeting was called to order at 1:11 pm by Dr. Siegel.

Remembrance; Dr. Janet Williams friend and colleague: Several committee members shared their thoughts, feelings and memories of Janet. There was comment on how uplifting the funeral was. Those who wish may contribute to either the Hope CDC, a non-profit organization Janet headed which provides assistance to families in need, address: 70 Whitney Street, Hartford, CT, 06105; or the Janet Williams Memorial Fund, proceeds which will be used to support the continuing education of Janet's children. Checks can be made out to Hanson Guest, Janet's husband, and sent to Mary Alfano, Bureau of Behavioral Health and Medicine, 505 Hudson Street, Hartford, CT 06106.

- Other memorials for Dr. Williams: Dr. Siegel will keep the PMAC informed regarding the possibility of planting a garden, or tree on the grounds of Riverview Hospital in honor of Janet.
  - Dr. Siegel has assumed the responsibility of Acting Chairperson for PMAC. Dr. Siegel reported that the new DCF Commissioner has met with and will continue to meet with DCF staff. There will be a transition management team.
- 3. <u>Set date/time of next meeting</u>: The next meeting will take place on February 4, 2011 from 1-3PM; RHCY AB Conference Room.
- 4. <u>Minutes</u>: The minutes of the December 2010 PMAC meeting were reviewed and approved with the minor spelling corrections. The minutes will be posted on the website.

There was discussion regarding the ability for DSS and DCF to easily share data. It was noted that the new Governor has a goal of improving data sharing capabilities.

## 5. Announcements:

- Preliminary Review of DSS Pharmacy Analysis: Tabled until Feb 4th meeting.
- Dr. William Halsey, DSS Director of Behavioral Health: Will be at the Feb 2011 PMAC meeting.
- Mr. Aresco introduced 2 UConn Pharm D candidates in attendance.

6. <u>DSS Provider Bulletins:</u> Cheryl Wamuo and Jason Gott\_not able to attend. Defer to Feb 2011 meeting.

## 7. <u>Psychopharmacology Conference Planning Sub-Committee:</u>

- There was much discussion regarding this topic: The Conference has been presented twice and it was noted that each time there was problems getting the target audience to attend. This is possibly due to the fact that APRN's and Pediatricians find it difficult to give up a half-day of work to attend the conference.
- Also noted that there is competition in the form of a 6 month fellowship in Pediatric Psychopharmacology run by Dr. Peter Jensen's REACH program. The program involves 3 days of training plus ongoing telephonic consultations over 6 months (and 28 CMEs upon completiont) that is being held at several venues around the country (tool kits, rating scales, etc. are included). The program announcement was read aloud to the PMAC (see <a href="www.TheReachInstitute.org">www.TheReachInstitute.org</a> for details). Additionally Yale offers a similar training for pediatricians in the Spring and Pediatricians have access to other educational opportunities such as Grand Rounds at hospitals they are affiliated with..
- □ FQHC's were discussed. Noted these are all non-profit organizations. CHC (Middletown) has 10 sites around the state. Hill House Centers (New Haven) has 3 sites. The funding of these programs was discussed. Noted that the reimbursement rate is higher that the State rate due to Federal funding. Lesley will arrange a presentation to PMAC on this model of care.
- The pros and cons of canceling or changing the format and /or content of the conference were discussed. If the target audience is changed to APRNS's and/or psychiatrists then the content would need to be adjusted accordingly. It was noted that PMAC sponsorship of the conference does have inherent value. The possibility of changing the format to an on-line video/U-Tube via an internal DCF project was discussed. Publishing the formulary decision process to pediatricians etc. using the internet and/or social sites as a form of counter-detailing was discussed. The use of fact sheets sent via email (Topamax use as an example) was suggested.

## 8. Protocol- Maximum dose guideline review and update:

- □ The current Maximum dose guideline along with recommendations for change based on literature review was distributed, reviewed and discussed in detail.
- Several dose changes were approved by PMAC and these changes will be incorporated into the Guideline by Mr. Aresco and forwarded to Dr. Siegel for publication on the DCF Web Site.
- In addition to dose changes the PMAC voted to remove the following medications from the approved drug list: Nadolol and Verapamil.
- PMAC requested that the following medication be reviewed for possible removal from the approved drug list such review to take place at the next scheduled meeting of the PMAC: Loxapine, trifluoperazine, thiothixine, chlordiazepoxide, buspirone, and amantadine.

- PMAC requested that the following medication be reviewed for possible addition to the approved drug list such review to take place at the next scheduled meeting of the PMAC: Invega, Effexor, Saphras, and Iurasidone
- 9. ADJOURNMENT: The meeting was adjourned at 3:05pm.

Respectfully Submitted:

David S. Aresco