

PSYCHOPHARMACOLOGY

ETHICS OF MEDICATION: CLINICAL APPLICATION

PRESENTERS:

Deborah P. Coehlo, PHD, CPNP, CPMHS, CFLE Manya C. Ralkowski, EDS, BCBA, LBA, IBA

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Downloadable Tools

To access the downloadable tools, go to: Psychopharmacology's Resources and Tools

- 1. https://www.atrainceu.com/content/6-applying-ethics-clinical-practice: This site offers information on Ethical Decision-Making Process

 Goldberg, S. G., & Wagner, K. (2019). American Psychological Association practice guidelines for psychopharmacology: Ethical practice considerations for psychologists involving psychotropic use with children and adolescents. Journal of Clinical Psychology, 75(3), 344–363.
- https://doiorg.ezproxy.proxy.library.oregonstate.edu/10.1002/jclp.22705: This site offers clear guid elines for ethical practice with psychotropic medications for children and adolescents.

Downloadable Tools

To access the downloadable tools, go to: Psychopharmacology's Resources and Tools

- 1. Article ABA Article Cultivating The Ethical Repertoir
- 2. Article ABA How to Identify Ethical Practices in Organisations
- 3. Article APA and Ethics
- 4. Article Children Psychopharmacology and Ethics
- 5. <u>Article Compassionate Care in Behavior Analytic Relationships</u>
- 6. Article Ethics and Child hood Mental H health
- 7. Article Psychopharm School and Psychotropic Medications
- 8. Article Psychopharmacology and Ethics in Children
- 9. <u>Article Psychopharmacology and Preschoolers and Ethics</u>

Downloadable Tools

To access the downloadable tools, go to: Psychopharmacology's Resources and Tools

- 1. BACB Code Enforcement Procedures
- 2. BACB Compliance Code English
- 3. Booklet ABA Fieldwork and Supervision for Behavior Analysts Editable Worksheets
- 4. The Behavioral Scientists Ethics Checklist 1
- 5. Intro To New Ethics Code BACB: December 2020 Newsletter
- 6. New Ethics Code 2022 Ethics Cross Walk
- 7. Ethical Decision Making Process
- 8. <u>Information to Provide to Prescribers by Other Professionals and Parents</u>
- 9. Common Medications Used in School-aged Children
- 10. How side effects of Meds can impact BIPS

Subject Matter Expert **Deborah P. Coehlo, PhD, C-PNP, PMHS, CFLE**

Founder and Director Juniper Pediatrics



Dr. Debbie Coehlo is a certified Pediatric Nurse Practitioner and Pediatric Mental Health Specialist with a Doctoral Degree in Family Sciences and Human Development. She is the Founder and Director of Juniper Pediatrics, a clinic modeled after John F Kennedy's multidisciplinary system of care. Using a holistic, integrated care model, Juniper provides counseling, medication management and family therapy for children with ASD, ADHD and other childhood mental health disorders.

Dr. Coehlo completed her Master's in Nursing with a specialty in parent- child nursing. She spent 10 years working at the Child Development Center at the University of Washington in the Genetics Clinic and Multidisciplinary Clinic. In 1999, she complete her Doctorate degree in Human Development and Family Studies.

She continues to teach at the undergraduate and graduate level and had pursued research in the area of social networking, transitioning to out of home care for families, and child development.

Dr. Coehlo is a co- editor for the 4th and 5th edition of Family Health Nursing (F.A. Dais, 2010/2013) and has published several journal articles in the areas of families choosing residential care, families in transition, family health nursing, and care of children with special health care needs.

Panelist Manya C. Ralkowski, EdS, BCBA, LBA, IBA

Instructional Leadership — Curriculum Specialist Board Certified Behavior Analyst Licensed Behavior Analyst International Behavior Analyst



Ms. Manya Ralkowski has been practicing in the field of applied behavior analysis for over 27 years. Her training began under direct education and training from consultants from the Lovaas Clinic in Los Angeles while completing her bachelor of arts in Communication Disorders with endorsements in special education and psychology at Western Washington University. Ms. Ralkowski continued her education and training with a master's degree in Education from Lesley University and a graduate certificate in Applied Behavior Analysis from the University of Washington while working as an assistant teacher on the Project DATA grant at the Haring Center-Professional Training Unit. She also possesses a doctorate degree in Instructional Leadership.

Her extensive educational and clinical background has afforded her many opportunities to build programs where there were none. Ms. Ralkowski has brought many programs and change to the PNW as a Design Team member for Seattle Public Schools creating the first STEM school for the district, a district consultant creating and replicating inclusion programs across the region, and most recently a Clinical Director, starting up a school and home-based ABA program serving 10+ districts and over 20 communities regionally.

Since 1994, Ms. Ralkowski has been creating and designing ABA programs and educational services from San Diego up the coast and into BC, Canada. She has been trained in many ABA based methodologies including PRT, DTT, NET, Verbal Behavior, Precision Teaching, PECS, and naturalistic ABA. She brings together disciplines such as ABA, special education, speech pathology, psychology, and remedial reading instruction for a comprehensive program for each student, each family, each teacher, and each school to create stronger and more inclusive communities.

Learner Objectives

- 1. Explain the four ethical principles and how they apply to prescribing psychotropic medications in children.
- 2. Evaluate societal and cultural factors that may influence whether medications are used to treat mental health disorders in children.
- 3. Apply knowledge to specific case studies including assessment, diagnosis, treatment, and evaluation of outcomes.
- 4. Examine approaches used to discussing ethical principles related to prescribing medications with parents of children with mental health disorders.

CASE STUDY

Mathew is a 7-year-old male with ASD- Severe (Level 3). He is non-verbal, and his developmental level is estimated at 18 months communication, 26 months social skills, 66 months gross motor skills, 36 months fine motor skills, and 40 months cognitive skills. He also has severe aggressive behavior, including hitting and kicking his family members daily, throwing objects, and screaming for 2-hour episodes 4-5 times per week. His treatment plan includes ABA therapy for 4 hours per day 4 days per week, case management, speech therapy, physical therapy, and occupational therapy one hour per week, family therapy with parent coaching two hours per week, and Risperdal (Risperidone .5 mg three times per day). His teacher reports that he falls asleep at school for up to 3 hours per day. His mother, who is single, is afraid to change his medication due to fear of his aggression. What are the ethical issues?



Autonomy

- Who is responsible for making decisions regarding Mathew's medication?
- 2. What information does the mother need to make an informed decision?
- What information does the teacher need to help with the decisions. What information should the teacher provide to the mother? To the prescribing provider?

BENEFICENCE



- 1. What should be done to help Matthew?
- 2. What should be done to help Matthew's mother?

"Numerous single mothers of children with disabilities contacted me to share their stories of the immense stress, loneliness, and despair they experience on a daily basis." (J. Hummell- DA, 2020)

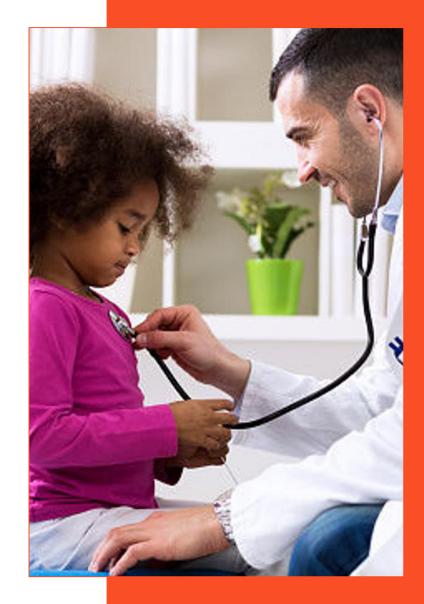


Non-Maleficence

How can the health care providers ensure that they do no harm?

JUSTICE

- Is the prescribing practices of psychotropic medications equal across diverse groups?
- Are children with ASD more represented in groups of children being treated with psychotropic medications, particularly 2nd generation anti-psychotic medications, in an ethical and just way?



Thinking About Matthew

- 1. What are the ethical issues?
- 2. What facts can help ethical decision-making with Matthew?
- 3. Who are the stakeholders?
- What laws, policies, and standards of practice are important to consider when thinking about Matthew?
- 5. What resources may help?

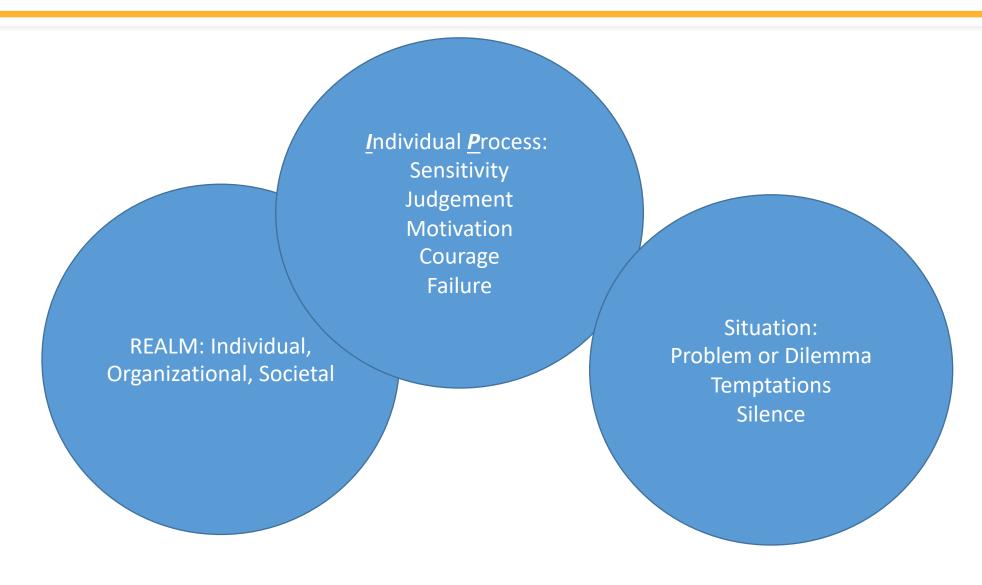
Thinking About Matthew

Let's Test the Right vs Wrong:

- 1. Legal test: Is there anything illegal about Matthew's care?
- 2. Does anything stink?
- 3. Is there anything you would not like to tell your Mom about?
- 4. What would happen if this story were on the front news?
- 5. Are there any ethical standards being violated?



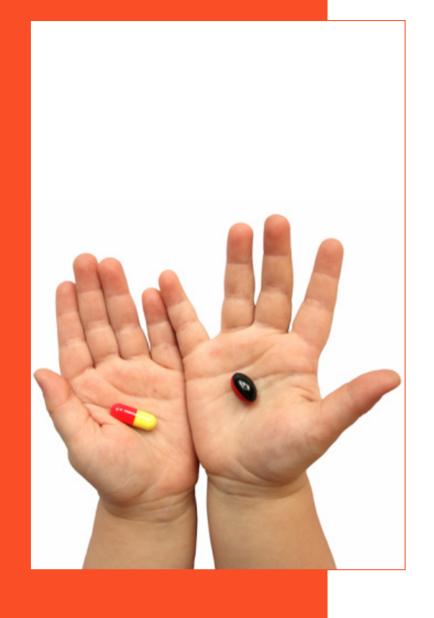
Ethical Decision-Making Model: RIPS



Steps to Using the RIPS Model

- 1. Recognize and define the ethical issues
- 2. Reflect
 - a) Facts
 - b) Stakeholders
 - c) Consequences
 - d) Relevant laws, policies, standards of practice
 - e) Available resources
 - f) Tests for Right vs Wrong
 - 1. Legal
 - 2. Stench
 - 3. Mom
 - 4. Front Page
 - 5. Professional ethics

- 3. Decide
 - a) Follow the rules
 - b) Determine the ends
 - c) Consider the relationships
- 4. Implement, evaluate, and reassess
 - a) What were the consequences
 - b) What was learned
 - c) What is still needed
 - 1. Education
 - 2. Discussion
 - 3. Resources



One Person's Story

Adult with Diagnosis of Bipolar Abrupt Termination of Medication

- Initially treated with lithium following a documented manic episode 12 years ago
- Changed to Lamotrigine (Lamictal) and titrated to 500 mg per day.
- Developed side effect of vertigo and temporary paralysis.
- Continued the medication
- Developed severe vertigo to the point of needing complete bedrest for several days.
- Tried to call PHP for advice- no response.
- Stopped Lamictal abruptly.
- Currently trying to determine next best steps: Changing dose or medication, counseling, ABA, nutritional changes, daily life/environmental changes, etc.???

Case Study (Adult with bi-polar / Terminated Medication)

Patient Description	Background Information	Treatment Team	Ethical Dilemmas	What are next steps?
Gender: Female	 Chronic Migraine 	Primary Care Physician	Autonomy:	Moving forward with new team
Age: 55 years old	(since mid 20s)	Psychiatrist 1:	Beneficence:	with hew team
Height: 5'3"	 Chronic Insomnia 	(Initial Diagnosis)	Non-maleficence:	Changes in treatment plan
	(since mid 30s)	Psychiatrist 2: Chicago		and services?
Weight: 116 pounds	 Bi-Polar (since early 40s) 	Psychiatrist 3: Chicago	Justice:	Integrated
Smoke/Drug: No				treatment
Drink: Occasional	Behavioral Patter ns:	Psychiatrist 4: CA		model?
Diet: Healthy/1200-1300		Psychiatrist 5: CA		
calories per day	Possible triggers:	Psychiatrist 6: TBD		
Exercise: 4-6 times per		,		
week				

Common Barriers

- Client Protection
- Variation in training and professionalism
- > Time constraints
- Reluctance
- Lack of knowledge and awareness
- Lack of coordination and case management

Ethics Resources for the Behavior Analyst

- √ https://www.bacb.com/bacb-podcasts/
- ✓ The Professional and Ethical Compliance Code for Behavior Analysts
- ✓ The RBT Ethics Code
- ✓ Ethical Guidelines overview of the code
- ✓ ABA Ethics Hotline

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- Psychopharmacology and ADHD: April 14, 2021 (Recorded)
- Psychopharmacology and Autism: May 12, 2021 (Recorded)
- Psychopharmacology and Mood Disorders: June 9, 2021 (Recorded)
- Psychopharmacology and Evidence-Based Practices: July 14, 2021 (Recorded)
- Ethics of Medication: August 11, 2021
- Psychopharmacology: Diagnosis and Assessment: September 8, 2021

