PSYCHOTROPIC MEDICATIONS

POLICY

(Ref. 10 CCR 2505-10 8.609)

Psychotropic medications shall not be used for the convenience of staff, for punishment, as a substitute for services and supports or in quantities that interfere with the overall intent and implementation of the person's Service Plan (SP).

Psychotropic medication for individuals receiving services shall be used only for diagnosed psychiatric disorders and:

- When a specific psychiatric evaluation or consultation has resulted in the recommendation for use of medication;
- When the person's SP specifies the use of psychotropic medication and the data to be collected to assess progress toward the treatment objective;
- After informed consent of the person receiving services or the legal guardian has been obtained or pursuant to a valid court order;
- After completion of a comprehensive review of the person's life situation and an ISSP. The ISSP shall explain the specific methodologies, strategies or procedures that will be used and,
- Referred to the Human Rights Committee (HRC) for regular review.

Administration of psychotropic medications to individual receiving services shall:

- Be authorized through a time-limited prescription of not more than ninety (90) days and reviewed at least annually by a psychiatrist;
- Be in the minimum effective dose possible;
- Allow for gradual reduction of the dosage and ultimate discontinuation of the drug unless clinical data establishes the presence of a psychiatric condition that requires a maintenance level of the drug be administered;
- Include training for staff who are implementing the Individual Service and Support Plan (ISSP) in the observation of potential side effects and adverse reactions to the drugs and document any observed side effects.
- Include regular monitoring of the person receiving services for potential irreversible side effects such as tardive dyskinesia and other abnormal movements and effects, neurotoxicity, and neuroleptic malignant syndrome.
- Include documentation of the effects of medications and any changes in medication;
- Any adverse reactions or side effects will be addressed with the psychiatrist
- Not be ordered on a PRN or "as needed" basis.