



Psychotropic Medication Monitoring Manual

Team Members: Stacy Danov, Fred Ferron,
Jason Flint, Cindy Kern, Peter Miller, Theresa
Mustonen, Gerry Nord, Mary Piggott

How to submit questions

Q&A for Live Sites

Livestream participants - email your
questions to:

positivesupports@state.mn.us

Manual Development Process

- Phase 1 reviews completed
- Phase 2 reviews currently being done
- Conversion to web based manual
- Phase 3 review to external stakeholders

Target Audience

- People who are prescribed psychotropic medications and receiving services from 245D license holders.
- Families, friends, advocates and team members
- Case Managers
- Licensed Practitioners
- Providers licensed under 245D

6 Purposes of the Manual

1. To ensure a person-centered planning process is conducted and maintained to support a person who receives psychotropic medication.
2. To protect the rights of people served, especially the right to participate in the development and management of their psychotropic medication services/supports.

6 Purposes of the Manual

3. To provide the highest quality of life possible as determined by each person served.

4. To protect the integrity of the relationship between a person and their licensed practitioner.

6 Purposes of the Manual

5. To ensure consistent and effective psychotropic medication services across different settings and circumstances.

6. To provide tools and guidance to enhance the knowledge of the person and those who provide supports and services for managing psychotropic medications.

- The goal of psychotropic medication treatment is to improve a person's life by reducing psychiatric target symptoms and increasing the quality of the life the person prefers to live.

8 Leading Practice Guidelines

1. All approaches/process are guided by principles of person centered thinking, shared decision making and patient-centered care;
2. Treatment approaches based on solid evidence based research;

8 Leading Practice Guidelines

3. Treatments need to be appropriate for the mental health diagnosis being treated, not aimed solely at movement restriction or excessive sedation;

4. A range of assessments and treatments need to be considered & used in the development of the service and support plan;

8 Leading Practice Guidelines

5. Non-pharmacological co-therapies considered/implemented prior to and in conjunction with psychotropic medications;
6. Specific person centered goals are established and monitored;

8 Leading Practice Guidelines

7. Psychotropic medications are used in appropriate dosages and combinations with other medications;

8. The need for on-going psychotropic medications must be regularly and systematically evaluated.

Organization of Manual

- **Initiation** of Psychotropic Medication
 - Interdisciplinary assessment process, baseline data and initial appointment with licensed practitioner.
- **Continuation** of Psychotropic Medication
 - Optimizing a person's quality of life, on-going assessment, positive support, side effect monitoring, PRN medications.
- **Review** of Psychotropic Medication
 - Improving, not improving and refusing

Psychotropic Medication Monitoring Form

- Summarization of information for the baseline and on-going monitoring of medications.
- Three sections (person, clinical, licensed practitioner)
- Compare changes across time in:
 - the quality of a person's life
 - Increases in adaptive behavior skills
 - Decreases in targeted symptoms of the mental health diagnosis

Part A: Person Centered Lifestyle

- Designed to be completed by the person receiving medications
- Identifies changes seen in a person's lifestyle since their last medication review

Part A: Person Centered Lifestyle Questions

Do you have a person centered support plan? YES NO In Development

Are you in charge of and/or actively engaged in planning your day to day life activities? YES NO

Have you gained more influence and control over your daily life since taking psychotropic medication?

Increase _____ Stable _____ Decrease _____

Comments:

Do people know and honor what matters most to you in your day to day life? YES NO

Has there been a change in what matters most and/or what is important to you since taking psychotropic medications?

Increase _____ Stable _____ Decrease _____

Comments:

Do you have dreams identified for your life? YES NO

In your daily life, do you feel you are moving forward to realizing those dreams?

Increase _____ Stable _____ Decrease _____

Comments:

Part B: Clinical

- To be completed by license holder and/or clinical staff
- Complete prior to appointment with licensed practitioner
- Summarizes person's medical/medication history, current medications, side effects data and PRN use (if needed).

Part C: Licensed Practitioner

- To be completed at the appointment
- Reviews history and presenting conditions
- Identification of mental health diagnosis, targeted symptoms, review of systems, and observed mental health symptoms.
- Guided questions to focus attention on person centered and clinical components (Parts A & B)

- The best way to support a person who has been given a mental health diagnosis and has been identified as needing psychotropic medication is to undergo a person-centered interdisciplinary assessment process.

Interdisciplinary Assessments

- Person Centered Planning & Discovery
- Quality of Life Indicators
- Functional Behavior Assessment
- Diagnostic Assessment
- Comprehensive Mental Health/General Medical Assessment
- Side effect assessment

Detail & Complexity of Assessment

Process depends on:

- Targeted symptoms a person engages in
- The person's mental health diagnosis
- The person's medical diagnosis
- The relationship between bio-psycho-social variables in a person's life
- The life the person desires to live, based on their person centered plan

Person Centered Planning & Discovery

- In the person centered planning and discovery process the person drives the collection of information and the discussion of their needs, interests, preferences, hopes, dreams and what is important to and for him or her.

Developing the PCP

- The development of the plan should begin with the person and the people in the person's life who care most and are involved in the person's life.
- Whenever possible include people who are community members in the person centered planning process such as friends and contacts the person knows in the community.

Person Centered Planning Processes

- Many skills and tools
- Suggested skills within this manual are examples of only a few possibilities
- Many ways person centered planning can be accomplished for a person

PCT Skills in this Manual

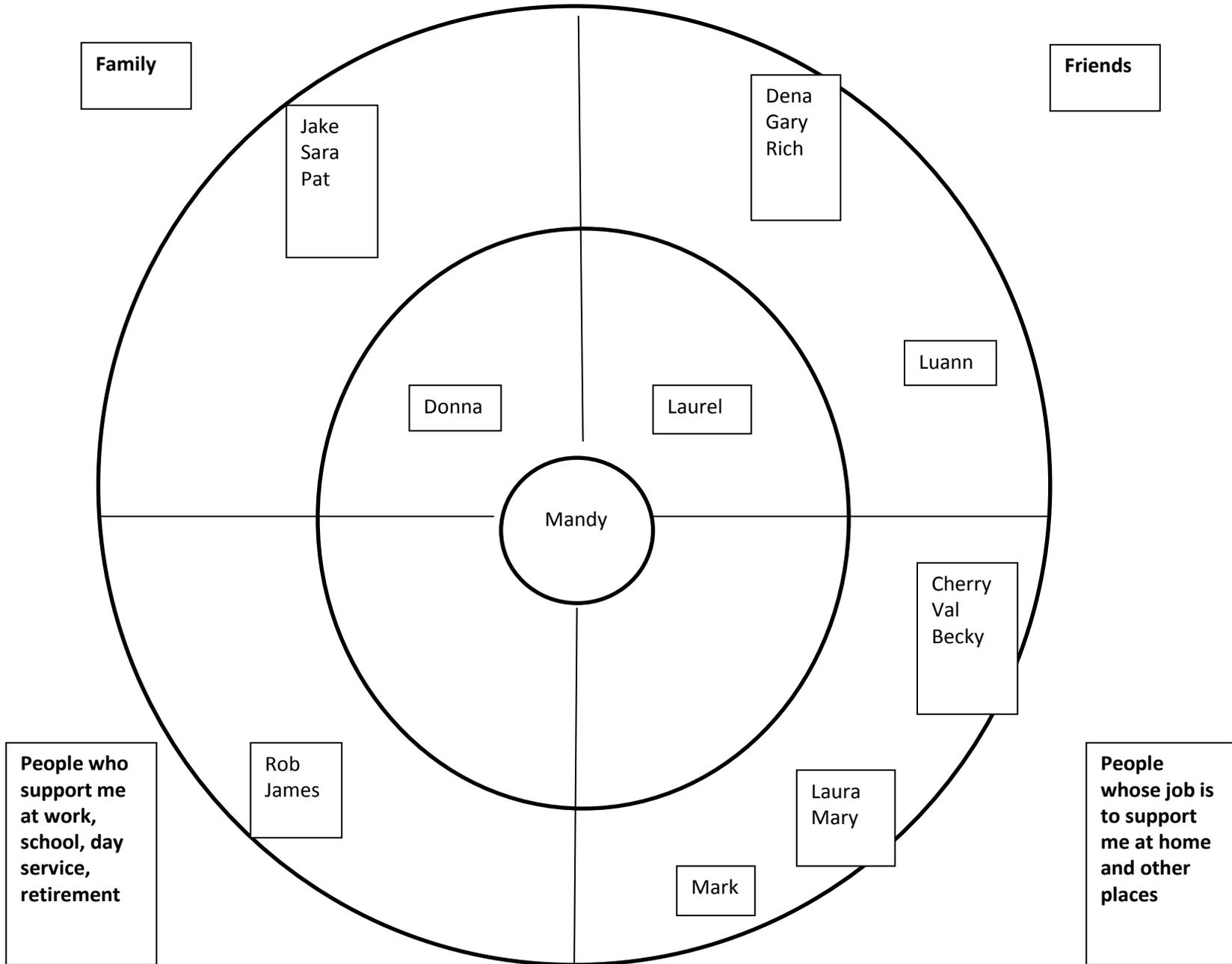
- Relationship Mapping
- Four + 1 Questions
- Important To/Important For
- What's Working/What's Not Working

Relationship Mapping

- Good to establish baseline of who is in a person's life
- Clarifies people's roles in person's life
- Identifies the relationship (closeness)
- Assists person in identifying who is most important in their life
- Who they want to provide information about themselves
- Who they do not want involved in their lives

The **relationship mapping** tool can be used on a quarterly or semi-annual basis to serve as a good indicator of how a person's relationships with others have been affected by the use of psychotropic medication.

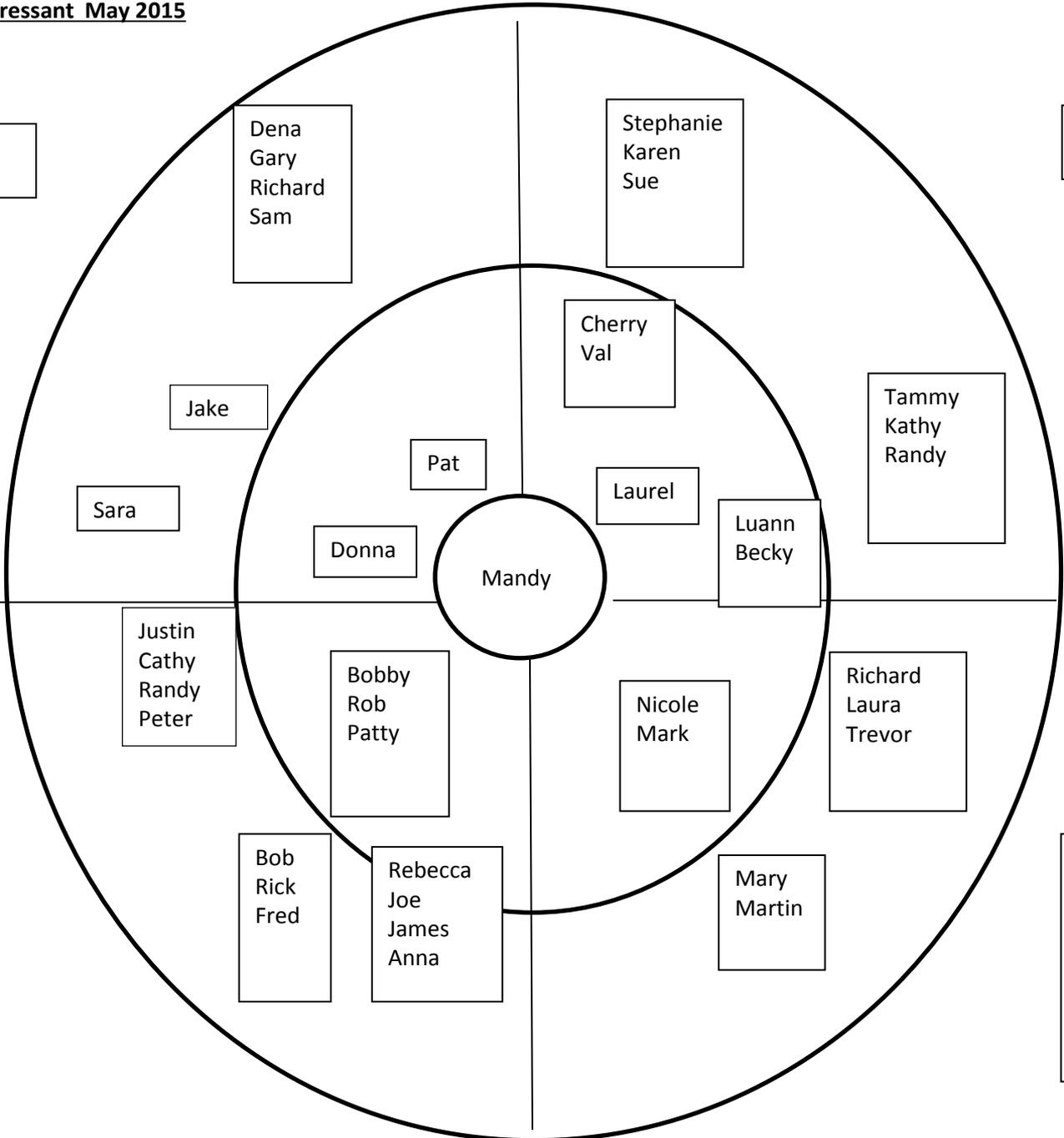
Relationship Map
Baseline Prior to Antidepressant May 2014



Relationship Map
12 Months After Antidepressant May 2015

Family

Friends



People who support me at work, school, day service, retirement

People whose job is to support me at home and other places

A person centered plan should be an on-going process of discovery with changes in the plan as the person progresses in the development of a more desired life.

Quality of Life

- The extent to which a person is experiencing a life that is focused on their hopes, dreams and desires across their home, school, work, and community settings.

Quality of Life Domains

- Emotional well being
- Interpersonal relationships
- Material well being
- Personal development
- Physical well being
- Self-determination
- Social inclusion
- Rights

Functional Behavior Assessment

- The **purpose** of a functional behavior assessment is to improve the quality of positive behavior support plans.
- The **goal** of the FBA assessment process is to determine what unique combination of changes in a person's life will result in the desired changes in the person's life-style and targeted symptoms.

A functional behavior assessment involves clearly defining the targeted symptoms in measureable, observable terms, identifying the situations in which the targeted symptoms are likely to occur and not occur, and generates a hypothesis of why the behavior occurs.

Diagnostic Assessment

- A written report documenting the clinical and functional face to face evaluation of a person's mental health. The diagnostic assessment can be performed with or without medical services.

Comprehensive Mental Health/General Medical Assessment

- This assessment is to be conducted by a licensed practitioner and is important before the initiation of psychotropic medications.
- The assessment includes
 - A comprehensive mental health evaluation
 - A thorough general medical examination

Comprehensive Mental Health Evaluation Includes

- Face to face evaluation between the person and the licensed practitioner
- Investigates a person's clinical status, including presenting problems, history of the present illness, previous mental health, physical health and medication history, relevant personal and family history, personal strengths and a mental status examination.

General Medical Examination Includes

- Obtaining a person's medical history, conducting a comprehensive review of systems, conducting a physical examination, and running lab tests as needed.

Side Effects Assessment

- Side effects are usually regarded as an undesirable secondary effect which occurs in addition to the desired therapeutic effect of a medication.
- Prior to initiating medication it is recommended that a baseline be established to measure potential side effects

The person receiving psychotropic medications, the license holder, and other team members should all be familiar with both the long and short-term side effects of all medications prescribed and how to assess for potential concerns.

It is the responsibility of the licensed practitioner to identify the side effects of concern and to determine which if any side effects need to be monitored and reported back to them.

If requested by the licensed practitioner, the license holder is responsible for establishing, collecting data and summarizing the side effect information.

Side Effect Monitoring Frequency

- Based on a person's needs as determined by the licensed practitioner.
- Minimally, side effect monitoring should be conducted once every 6 months or prior to each visit to the licensed practitioner (as requested)

Side Effect Information Form

- Identify the possible side effect profile
- Specify the frequency and type of monitoring
- Ensure all people support person are aware of potential side effects and how to report their observations.

Meeting with the Licensed Practitioner

- Summarize person centered planning and quality of life indicators
- Brief health history
- Psychotropic medication history
- List current prescribed/OTC medications
- Provide observable measureable description of the target symptoms
- Baseline measures of potential side effects (if available)
- Any additional information to contribute to determining the desired outcomes for the person

Informed Consent

- The purpose of informed consent is to provide the person and his or her legal representative with the most complete information possible regarding the risks and benefits of treatment.

Elements of Informed Consent

- Generic and commonly known name of the medication
- The purpose of the medication
- The risks and possible side effects of the medication
- The expected benefit of the medication
- The contact information of who to call if they have questions or concerns at any time

Continuation of Psychotropic Medication

- For people currently being prescribed psychotropic medication
 - On-going data collection
 - Optimizing a person's quality of life
 - Positive support strategies
 - Side effect monitoring
 - Finding the optimal effective dose

On-Going Data Collection

- Determining a person's response to medication depends on the continuous gathering of assessment information
- Regular quarterly reviews with the person and their interdisciplinary team

Quarterly Team Review & Discussion

- Is medication appropriate for the person
- Does the mental health diagnosis corresponds with the purpose and use of the medication
- Are the person's dreams, preferences, needs, interests and participation in their community enhanced through use of the medication?
- Is the person centered plan followed and updated continuously?

Quarterly Team Review & Discussion

- Review of the person's accomplishments and concerns are discussed.
- Targeted symptoms of the mental health diagnosis are clearly defined, measured, analyzed and reviewed
- Data on the targeted symptoms, person centered plan and adaptive behaviors are compared to the baseline data and trends over time
- Treatment decisions and program changes are made based on a review of the data, the person centered plan and a person's quality of life

Person's taking psychotropic medication often need positive support strategies in their lives in addition to the medication.

Positive Support Plans

- Set of strategies
- Used across a person's life
- Increases their self-determination and quality of life while eliminating or decreasing the occurrence of targeted symptoms

Some targeted symptoms occur not only because of the mental health diagnosis but because they have come under control of other aspects of the person's environment.

Functional Behavior Assessments
assist in identifying the roles of
social, biological and
environmental variables in a
person's life

The **purpose** of a functional behavior assessment is to improve the quality of positive behavior support plans.

Positive Support Plans Include:

- Modifications to the person's social & physical environments
- Positive reinforcement
- Teaching alternatives to undesired behavior
- Proactive and reactive strategies
- Functional communication skills
- Teaching the person new skills

Finding the Optimal Effective Dose

- Regular (quarterly) evaluations asking whether the medication a person is taking is producing the desired effect with regard to symptom management and improved quality of life.

Decisions to Reduce/Eliminate Medication

- The person's diagnosis
- Treatment response
- Medication history
- Informed consent
- Recommendations of the Licensed Practitioner

The person and their team must determine if the psychotropic medication treatment improves or interferes with his/her quality of life.

Pro re nata (PRN)

- Latin phrase meaning “in the circumstances or as the circumstance arises”.
- Abbreviated to “PRN”

Pro Re Nata continued

- Reference to medication dose that is not scheduled
- The decision of when to offer the PRN medication is with the person and the people who support him or her.

PRN Planning Process

1. Identify the person's mental health diagnosis
2. Describe the targeted symptoms to be alleviated by the PRN medication
3. Specify interventions staff should follow before offering the PRN medication

PRN Planning Process

4. Identify specific conditions in which the person would most benefit from being offered their PRN medication.
5. Include the name of the medication, dosage, specific criteria and frequency of administration, and the daily maximum dose for the person.

Basic Criteria for Using PRN's

1. Diagnosed mental health disorder the PRN medication is prescribed to treat
2. Ensure person's willingness to accept PRN when offered
3. Specific conditions identified for use of the PRN

Appropriate use of PRN Medication

- Local community dance in the evening
- Worries about what others will think of him
- Becomes anxious paces in bedroom
- Sweating, refusing to talk to others
- Finds staff person and requests PRN
- Has a diagnosis of anxiety disorder with targeted symptoms that include sweating, pacing, isolation.

PRN Appropriate Use

- PRN can be offered to the person and or person can be assisted in requesting PRN.
- Person needs to be willing and able to accept the PRN without the use of restraint or staff restricting movement in any way.
- Do not force a person to take a PRN

Review of Psychotropic Medications

- Improvement/resolution of targeted symptoms and increased quality of life
- Nothing improves/targeted symptoms increasing

Improvement/Resolution

- Frequency and intensity of targeted symptoms decrease over time.
- Quality of person's life improves
- Gradual increase in social activities
- Increases in friends and acquaintances
- Goal achievement within person centered planning

Improvement/Resolution

- Determine how to ensure continual improvements in both behavior and quality of the person's life
- Increase independence
- Gradually reduce supports
- Determine with licensed practitioner the optimal effective dose of medication

Nothing Improves

- Several months on psychotropic medication
 - No change in person's adaptive behaviors
 - No change in targeted symptoms
- Quarterly Team Review & Discussion
 - Review the current plan
 - Problem solve and modify the plan

Quarterly Team Review & Discussion

- Is medication appropriate for the person
- Does the mental health diagnosis corresponds with the purpose and use of the medication
- Are the person's dreams, preferences, needs, interests and participation in their community enhanced through use of the medication?
- Is the person centered plan followed and updated continuously?

Quarterly Team Review & Discussion

- Review of the person's accomplishments and concerns are discussed.
- Targeted symptoms of the mental health diagnosis are clearly defined, measured, analyzed and reviewed
- Data on the targeted symptoms, person centered plan and adaptive behaviors are compared to the baseline data and trends over time
- Treatment decisions and program changes are made based on a review of the data, the person centered plan and a person's quality of life

Psychotropic Medication FORMS

Person Centered Thinking Skills Forms

Psychotropic Medication Monitoring Form

Part A – Person centered assessment

Part B – Clinical (medical/clinical staff)

Part C – Prescriber (clinical appointment)

Side Effect Information Form

PRN Planning Form

Informed Consent Form



Psychotropic Medication Monitoring Manual

Team Members: Stacy Danov, Fred Ferron,
Jason Flint, Cindy Kern, Peter Miller, Theresa
Mustonen, Gerry Nord, Mary Piggott

How to submit questions

Q&A for Live Sites

Livestream participants - email your questions to:

positivesupports@state.mn.us