

Psychotropic Medication Policy and Procedure Checklist

Purpose and Intent of 483.45(c)(3)

The purpose of the Psychotropic Drugs Policy and Procedure is to develop a facility system to ensure a resident is not given psychotropic medications unless a comprehensive assessment identifies clear indications and parameters for their use, based upon regulatory compliance and best practice. In addition, the facility will manage and monitor the resident’s medication regimen, identifying the need for gradual dose reductions, use of non-pharmacological interventions in an effort to decrease or discontinue psychotropic drugs and limit PRN orders to be used only when necessary, consistent with regulatory compliance, to maintain or promote the highest level of resident function and quality of care.

To assure adherence with all the required steps for the development and implementation of a comprehensive Psychotropic Drugs policy in accordance with the new Requirements of Participation (RoP), the following checklist captures specific action items for successful completion. The left column represents the actual Requirements of Participation (RoP) language and the right column indicates specific strategies for successful completion and implementation of the revised RoP. When preparing updated policies and procedures, it is recommended to include actual RoP language as applicable.

Suggested Checklist Program and Policy and Procedure

Regulation	Recommended Actions
<p>§483.45(c)(3) (F758) A psychotropic drug is any drug that affects brain activities associated with mental processes and behavior. These drugs include, but are not limited to, drugs in the following categories: (i) Anti-psychotic; (ii) Anti-depressant; (iii) Anti-anxiety; and (iv) Hypnotic</p> <p>§483.45(e) Psychotropic Drugs. Based on a comprehensive assessment of a resident, the facility must ensure that-</p>	<p><input type="checkbox"/> Review, revise and institute the psychotropic drug policy and procedure in accordance with the (ROP). See regulatory requirements as well as template policy and procedure</p> <p><input type="checkbox"/> Update existing definitions and new terms</p>



<p>§483.45(e)(1) Residents who have not used psychotropic drugs are not given these drugs unless the medication is necessary to treat a specific condition as diagnosed and documented in the clinical record;</p> <p>§483.45(e)(2) Residents who use psychotropic drugs receive gradual dose reductions, and behavioral interventions, unless clinically contraindicated, in an effort to discontinue these drugs;</p> <p>§483.45(e)(3) Residents do not receive psychotropic drugs pursuant to a PRN order unless that medication is necessary to treat a diagnosed specific condition that is documented in the clinical record; and</p> <p>§483.45(e)(4) PRN orders for psychotropic drugs are limited to 14 days. Except as provided in §483.45(e)(5), if the attending physician or prescribing practitioner believes that it is appropriate for the PRN order to be extended beyond 14 days, he or she should document their rationale in the resident’s medical record and indicate the duration for the PRN order.</p> <p>§483.45(e)(5) PRN orders for anti-psychotic drugs are limited to 14 days and cannot be renewed unless the attending physician or prescribing practitioner evaluates the resident for the appropriateness of that medication.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Institute a Psychotropic Drug Assessment form to conduct a comprehensive evaluation of the resident <input type="checkbox"/> Update staff education materials for orientation, annual education, and agency staff orientation, as needed <input type="checkbox"/> Educate the interdisciplinary team about the Psychotropic Drugs Policy and Procedure <input type="checkbox"/> Conduct updated training for nursing leaders about supervising and monitoring for compliance with the Psychotropic Policy and Procedure <input type="checkbox"/> Review the Psychotropic Drugs Policy with the Medical Director and Pharmacy Consultant in conjunction with the Quarterly Quality Assurance Committee meeting <input type="checkbox"/> Discuss with the Medical Director education to attending physicians regarding the facility policy <input type="checkbox"/> Conduct an audit of all residents taking psychotropic medications to determine compliance and implement a corrective action plan as needed
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F757 §483.45(d)

Unnecessary Drugs—General.

Each resident’s drug regimen must be free from unnecessary drugs. An unnecessary drug is any drug when used—

- §483.45(d)(1) In excessive dose (including duplicate drug therapy); or
- §483.45(d)(2) For excessive duration; or
- §483.45(d)(3) Without adequate monitoring; or
- §483.45(d)(4) Without adequate indications for its use; or
- §483.45(d)(5) In the presence of adverse consequences which indicate the dose should be reduced or discontinued; or
- §483.45(d)(6) Any combinations of the reasons stated in paragraphs (d)(1) through (5) of this section.

- Review, revise and institute the psychotropic drug policy and procedure in accordance with the (RoP). See regulatory requirements as well as template policy and procedure
- Update existing definitions and new terms
- Update staff education materials for orientation, annual education, and agency staff orientation, as needed
- Review regulatory requirements with the Pharmacy Consultant and Medical Director

§483.12 (F605)

The resident has the right to be free from abuse, neglect, misappropriation of resident property, and exploitation as defined in this subpart. This includes but is not limited to freedom from corporal punishment, involuntary seclusion and any physical or chemical restraint not required to treat the resident’s medical symptoms.

§483.12(a) The facility must—

§483.12(a)(2) Ensure that the resident is free from physical or chemical restraints imposed for purposes of discipline or convenience and that are not required to treat the resident’s medical symptoms. When the use of restraints is indicated, the facility must use the least restrictive alternative for the least amount of time and document ongoing re-evaluation of the need for restraints.

- Review, revise and institute the psychotropic drug policy and procedure in accordance with the (RoP). See regulatory requirements as well as template policy and procedure
- Update existing definitions and new terms
- Update staff education materials for orientation, annual education, and agency staff orientation, as needed.
- Educate the interdisciplinary team about the Psychotropic Drugs Policy and Procedure.



	<ul style="list-style-type: none"> <input type="checkbox"/> Conduct updated training for nursing leaders about supervising and monitoring for compliance with the Psychotropic Policy and Procedure <input type="checkbox"/> Conduct an audit of all residents taking psychotropic medications to determine compliance and implement a corrective action plan as needed
<p>F744 §483.40(b)(3) A resident who displays or is diagnosed with dementia, receives the appropriate treatment and services to attain or maintain his or her highest practicable physical, mental, and psychosocial well-being.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Review, revise and institute the psychotropic drug policy and procedure in accordance with the (RoP). See regulatory requirements as well as template policy and procedure <input type="checkbox"/> Update existing definitions and new terms <input type="checkbox"/> Update staff education materials for orientation, annual education, and agency staff orientation, as needed. <input type="checkbox"/> Educate the interdisciplinary team about the Psychotropic Drugs Policy and Procedure. <input type="checkbox"/> Conduct updated training for nursing leaders about supervising and monitoring for compliance with the Psychotropic Policy and Procedure <input type="checkbox"/> Conduct an audit of all residents taking psychotropic medications to determine compliance and implement a corrective action plan as needed



The below areas serves as a cross reference for facility leaders to conduct addition policy and procedure review across departments to incorporate the changes set forth in **§483.45(c)(3) (F758) Psychotropic Drugs**

This listing is not all encompassing however should serve as a resource for leaders as they update their internal policies, procedures and operational processes.

Cross Reference: (additional areas for review)

- CMS Definitions
- Employee Orientation
- Annual Training Requirements
- Unnecessary Medications
- Medical Director
- Incident/Accident Policy and Procedure
- Quality Assurance and Performance Improvement
- Staff Training and Education

References

CMS State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities:

- <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Downloads/Advance-Appendix-PP-Including-Phase-2-.pdf>