

## AUDITING PSYCHOTROPIC MEDICATION THERAPY

Name: \_\_\_\_\_

DOB: \_\_\_\_\_

	Yes	No	Not Sure
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|--|--------------------------|--------------------------|--------------------------|
| 1. Has the patient been given a psychiatric diagnosis?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is an interdisciplinary assessment indicated for the concerns for which the medication is being used, and has it been carried out?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is medication treatment consistent with the diagnosis?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. If patient does not have a psychiatric diagnosis and is being treated for "behaviour problems" are guidelines for problem behaviours being followed?                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is the patient capable of consenting to medication treatment?<br>If capable, has he/she given consent? If not capable, has consent been obtained from his/ substitute decision maker? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Has the patient and/or his/her substitute decision maker (SDM) been informed regarding anticipated therapeutic medication treatment effects and potential side effects?               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Has a proper medical assessment been carried out prior to initiating medication therapy?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Have target behaviours against which to monitor medication effectiveness been defined?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Is there a plan to measure these target behaviours objectively and systematically?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Is the patient being regularly monitored for side effects?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Is the patient receiving too many psychotropic agents?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Is the patient being under-medicated?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Is the patient being over-medicated?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Is medication therapy being changed too rapidly?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Are PRN and stat doses of medications being used excessively?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Are patients treated with antipsychotic agents being regularly evaluated for tardive dyskinesia and metabolic syndrome?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Have the psychotropic medication therapy and psychiatric diagnosis or special behavioural pharmacological justification for the medication been reviewed in the past year?           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Has a date been set for the next review?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**Comments/Action Plan (for issues flagged):**

**Date** (dd/mm/yyyy): \_\_\_\_\_ **Signature:** \_\_\_\_\_

This tool was developed in recognition of the complexities of psychotropic medication use in adults with developmental disabilities (DD). Research has demonstrated that such medications are often overprescribed or otherwise inappropriately prescribed. This tool is intended to help primary care providers to audit psychotropic medication use in their patients with DD, so that such medications are used following best practice guidelines in this population.

Underlying the use of this tool is the concept of partnership with patients and caregivers in use of psychotropic medications, monitoring effectiveness, and any side effects of these medications.

As recommended in the *Primary Care of Adults with Developmental Disabilities: Canadian Consensus Guidelines*<sup>1</sup>:

- Medications should be reviewed **every three months, including indications, dosages, efficacy and side effects** [Guideline 5].
- Regularly audit the use of prescribed psychotropic medication, including those used PRN [Guideline 22].
- Review the psychiatric diagnosis and the appropriateness of prescribed medications for this diagnosis whenever there is a behaviour change [Guideline 27].
- Adults with DD may be unable to communicate side-effects and may also respond to psychotropic medications differently from those in the general population [Guideline 27].
- Reassess the need for ongoing use of antipsychotic medications at regular intervals and consider dose reduction or discontinuation when appropriate [Guideline 28].

Adapted from Sovner 1985 and Deb 2006 by the Behavioural and Mental Health Working Group, chaired by Dr. E. Bradley, Surrey Place Centre.

1. Sullivan WF, Berg JM, Bradley E, Cheetham T, Denton R, Heng J, Hennen B, Joyce D, Kelly M, Korossy M, Lunskey Y, McMillan S. Primary care of adults with developmental disabilities: Canadian consensus guidelines. *Can Fam Physician* 2011;57:541-53.

2. Sovner R, Hurley AD. Assessing the quality of psychotropic drug regimens prescribed for mentally retarded persons. *Psych Aspects Ment Retard* 1985 August/September; 4 (8/9):31-38.

3. Deb S, Clarke D, Unwin G. Using medication to manage behaviour problems among adults with a learning disability. 2006;36. [www.ld-medication.bham.ac.uk/1qrg.pdf](http://www.ld-medication.bham.ac.uk/1qrg.pdf)