

Psychotropic Medication System Audit

Review and Enter Y/N or NA

	Resident #1	Resident #2	Resident #3	Resident #4	Resident #5	Comments
Psychosocial evaluation is completed prior to start of therapy						
Consent for use of psychoactive medication therapy completed prior to administration						
Non-pharmacological approaches attempted and documented prior to start of medication therapy						
Behavior monitoring/side effect monitoring for targeted behaviors for why medication ordered						
Baseline AIMS present and completed every 6 months (Antipsychotics ONLY)						
Psychotropic medication has correct/appropriate diagnosis for specific condition documented in medical record						
PRN psychotropic medications limited to 14 days (unless otherwise noted by physician with documented reason for extended length of medication)						
Alert charting in EMR for 72 hours after new medication or change in dose						
IDT note weekly during At Risk for review of new psychotropic medications for 4 weeks						
Medication is coded on the MDS*						
Diagnosis for medication is coded on the MDS*						
Care plan is present with targeted individual behavior as the problem						

Reviewed by: _____

Date: _____



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	Resident #1	Resident #2	Resident #3	Resident #4	Resident #5	Comments
Psychoactive medication evaluation completed on admission/readmission/quarterly/annually AND with significant change						
Residents receiving psychoactive medications reviewed during At Risk at least monthly						
Monthly consultant pharmacists QA-Irregularities entered into QAPI with MD review						
Considerations for Schizophrenia Diagnosis						
Does the history communicate how long ago the resident was diagnosed?						
Does the history communicate who manages the diagnosis?						
Does the history describe past treatment and response to treatment?						
Does the history describe symptoms and behaviors?						
Is a PASARR Level 1 complete?						
Is a PASARR Level 2 complete?						
Is the relevant MDS Section I6000 coded for schizophrenia?						
Have symptoms been present for 6 months prior to diagnosis?						

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Considerations for Schizophrenia Diagnosis

	Resident #1	Resident #2	Resident #3	Resident #4	Resident #5	Comments
Are two or more symptoms present: delusions, hallucinations, disorganized speech, disorganized or catatonic behavior, symptoms that cause social or occupational dysfunction (e.g., impaired emotional expression, decreased speech output, reduced desire for social contact or engage in daily activities, decreased experience of pleasure)?						
Is there at least one month of active symptoms prior to diagnosis?						
Did the practitioner diagnose the resident?						
Did the psychiatrist diagnose the resident?						
Were other conditions ruled out before diagnosis: other primary mental health or substance use disorders, medical conditions, nutritional deficits, medications that could cause symptoms?						

* = Do the practitioner’s diagnostic practices meet professional standards?

Summary of Findings:

Reviewed by: _____ Date: _____

