



**Medication Management
Policy and Procedure Manual**

Revised: 9/10/2024

TITLE: MEDICATION MANAGEMENT	REFERENCE: MM.01.01.01
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: ADMISSIONS PROCESS

PURPOSE:

The purpose of this policy is to provide a system for admitting new clients while maintaining company standards and state and federal regulations.

RESPONSIBILITY:

It is the responsibility of the Founder to implement this policy and disseminate this information to each employee under his or her direction.

POLICY:

It is the policy of the Jones Wellness Center to provide a system to admit clients under a rigorous system that ensures the safety and health of all clients and staff.

PROCEDURE:

1. Jones Wellness Center does not prescribe medications.
2. When a client arrives to be admitted, the staff will perform a comprehensive assessment and health screen of the client to confirm they are physically and medically capable of completing the treatment.
3. The facility at minimum will obtain and make accessible the following client information to all staff involved with medication management:
 - a. Age
 - b. Sex
 - c. Diagnosis/Condition
 - d. Allergies/Sensitivities
 - e. Height/Weight
 - f. History of Drug/Alcohol Use/Abuse
 - g. Current Medications
 - h. Pregnancy/Lactation (when necessary)
 - i. Treatment History
4. This information listed above will be stored in the EMR and accessible in real time to all staff involved with the client.
5. Jones Wellness Center does not managed medications and will be referred to the prescribing physician for any follow-up or additional requests for medications and/or adjustments.
 - a. With proper release of information, staff will coordinate with prescribers to give collaborating information as necessary for the prescribers insight and their evaluation of medication management.
6. Client do not bring in personal medications into the facility. Client Bringing in Personal Medications:
 - a. If the client brought personal medications, they would need to be inventoried and properly stored.
 - b. All personal (non-narcotic) medications must be accounted for in the nursing assessment.

NOTICE FOR STAFF

1. High-risk and high-alert medications will be identified by the organization.
2. Medications considered to be look-alike and/or sound-alike will be stored in such a manner to reduce the risk of error.
3. The use of certain psychopharmacologic drugs will be monitored as these are considered high-risk medication.
4. The organization has defined as current high-risk medication the following:
 - a. Classified as high risk:
 - i. Zyprexa, Seroquel, Abilify due to the possibility of metabolic syndrome.

- ii. Depakote and Lithium Carbonate due to the possibility of toxicity and need for blood levels to be continuously monitored.
- iii. MAO inhibitors are not prescribed due to the interaction with certain foods and liquor.
- iv. Clozaril due to the possibility of causing agranulocytosis.
 - 1. Patients being treated with Clozapine must have a baseline white blood cell (WBC) count and absolute neutrophil count (ANC) before initiation of treatment as well as regular WBC counts during treatment and for at least four (4) weeks after discontinuation of treatment.
- v. Controlled substances such as benzodiazepines and opioid analgesics which are potentially habit forming and severity of side effects could be lethal.
- vi. Insulin, due to the availability, many of the insulin products will be “look alike/sound-alike” and, as a result, inappropriate insulin has been given.
 - 1. To prevent and reduce errors, the following is to be followed:
 - a. The abbreviation “U” is not accepted. The word “units” must be used.
 - b. All insulin doses are recorded on the MOR.
- vii. Gabapentin due to the ability of patients to hoard and misuse.
 - 1. The use of high-dose and/or multiple psychopharmacologic medications will include documentation of the justification for use in the medical record.
 - 2. Any medications which include two prescriptions or more of the same class of medications with the exception of certain medications utilized for sleep will be considered polypharmacy and require justification for usage by the prescribing MD.
- viii. All aspects of medication side effects and/or adverse events will be monitored including, but not limited to the potential risk of tardive dyskinesia.

TITLE: MEDICATION MANAGEMENT	REFERENCE: MM.01.01.03
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: HIGH RISK – HIGH ALERT MEDICATIONS

PURPOSE:

High-alert medications are drugs that have a heightened risk of causing significant patient harm when they are used in error. Hazardous drugs and medications are those in which studies in animals or humans indicate that exposure to them has a potential for causing cancer, developmental or reproductive toxicity, genotoxicity, or harm to organs. The purpose of this policy is to increase the awareness of high-alert medications, look alike/sound alike medications, and hazardous medications thereby improving patient safety.

RESPONSIBILITY:

It is the responsibility of the Founder to implement this policy. It is the responsibility of the Founder to delineate this policy.

POLICY:

1. Jones Wellness Center does not manage medications. However, staff is aware of high-alert and hazardous medications. The primary objective is to provide the highest quality of care with the lowest potential for patient and staff risk.
2. Safety procedures include:
 - a. Selection of all medications including high alert and hazardous medications.
 - b. ISMP and FDA alerts are regularly reviewed for medications to add to this policy/procedure.
 - c. Jones Wellness Center will identify and label all hazardous drugs. A high alert and hazardous drug list including handling precautions is available.
 - d. No medication management (prescribing or otherwise) is done at the facility.

PROCEDURE:

1. **Hazardous Medications:**
 - a. It is the policy of Jones Wellness Center to not utilize Hazardous Medications.
 - b. Jones Wellness Center reviews Hazardous Medications on <https://www.cdc.gov/niosh/docs/2016-161/pdfs/2016-161.pdf>. This is in an effort to be aware of such medications that a client may be taking outside of the facility.
 - i. Medications are not allowed at the facility.
2. **High Alert Medications:**
 - a. High Alert Medications are those drugs which are involved in a higher percentage of medication incidents and/or sentinel and significant events, or that carry an increased risk for error, abuse, injury or other adverse outcomes.
 - b. It is the policy of Jones Wellness Center to not utilize High Alert Medications.
 - c. Jones Wellness Center reviews High Alert Medications on <https://www.ismp.org/recommendations>. This is in an effort to be aware of such medications that a client may be taking outside of the facility.
 - i. Medications are not allowed at the facility.

TITLE: MEDICATION MANAGEMENT	REFERENCE: MM.01.01.05
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: PSYCHOTROPIC MEDICATIONS

POLICY: Jones Wellness Center does not prescribe psychotropic medications.

TITLE: MEDICATION MANAGEMENT	REFERENCE: MM.03.01.01
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: MEDICATION STORAGE

PURPOSE:

The purpose of this policy is to describe the process for the safe, secure storage of medication.

PROCEDURES:

Jones Wellness Center does not store or administer medications.

TITLE: MEDICATION MANAGEMENT	REFERENCE: MM.04.01.01, RC.02.03.07
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: MEDICATION ORDERS

POLICY

1. It is the policy of Jones Wellness Center to not write medication orders.

TITLE: MEDICATION MANAGEMENT	REFERENCE: MM.05.01.17; MM.06.01.05
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: MEDICATION SAMPLES & INVESTIGATIONAL MEDICATIONS

PURPOSE:

The purpose of this policy is to ensure that no investigational medications or medication samples are used. No medications are retrieved and handled at the facility. Thus, there are no recalls or discontinuations to be aware of at this facility.

RESPONSIBILITY:

It is the responsibility of the Medical Director and/or designee to implement this policy and procedure.

POLICY:

1. It is the policy of Jones Wellness Center to not use any psychotropic medication samples or any other kinds of sample medications of any kind, at any time.
2. It is the policy of Jones Wellness Center to not use any investigational medications.

TITLE: MEDICATION MANAGEMENT	REFERENCE: MM.07.01.01
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: FIRST DOSE EFFECTS OF NEW MEDICATION

PURPOSE:

The purpose of this policy is to ensure that clients are assessed after the first dose of new medications.

POLICY:

It is the policy of Jones Wellness Center to be aware of new medications and report back to the prescribing physician when necessary.

PROCEDURE:

1. If a new medication is prescribed from an outside provider, the staff member will record the following client information:
 - a. Name
 - b. Dosage
 - c. Frequency
 - d. Desired effects and potential side effects
2. If the client reports any untoward effects of a new medication, with a release of information, the staff will notify the provider of the adverse effect.

TITLE: MEDICATION MANAGEMENT	REFERENCE: MM.08.01.01
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: ANNUAL EVALUATION OF THE MEDICATION MANAGEMENT PROCESSES

PURPOSE:

The purpose of this policy is to provide a system to review data and implement performance improvement measures for our Medication Management processes.

RESPONSIBILITY:

It is the responsibility of the Compliance Director to implement this policy and procedure. It is the responsibility of the Medical Director to disseminate this information to employees under their direction.

POLICY:

1. It is the policy of Jones Wellness Center to track data regarding its Medication Management process and review that data at least annually to understand where our liability and strengths are.
2. The areas reviewed and data collected to conduct such a review is as follows:
 - a. **High-Alert/Hazardous Medications:**
 - i. Review incident reports.
 - ii. Is the list applicable to our medication stock, formulary, and/or what the physician is typically prescribing?
 - iii. Were there any security or diversion issues?
 - iv. Review staff and client grievances.
 - v. Review policy for completeness and accuracy.
 - b. **Psychotropic Medications:**
 - i. Review incident reports.
 - ii. Review policy.
 - iii. Review staff and client grievances.
 - iv. Review number of AIMs conducted on clients with multiple psychotropics (chart audit).
 - v. Review policy for completeness and accuracy.
 - c. **Look-Alike/Sound-Alike Medications:**
 - i. Review incident reports.
 - ii. Is the list applicable to our medication stock, formulary, and/or what the physician is typically prescribing?
 - iii. Review staff and client grievances.
 - iv. Review policy for completeness and accuracy.
 - d. **Medication Safety:**
 - i. Review incident reports.
 - ii. Review staff survey on medication management safety.
 - iii. Review medication management compliance checklist.
 - iv. Are there any unused, unlabeled, discontinued, or expired medications with active medications?
 - e. **Medication Effects, Reactions, and ADE's**
 - i. Review incident reports.
 - ii. Review staff survey on medication management safety.
 - iii. Review medication management compliance checklist.
 - iv. Review policy and interview staff.
 - f. **Performance Improvement:**
 - i. Have risks around medication management been prioritized for the following year?
 - ii. Are they relevant to data collected previously, high-volume, high-risk, or error prone?