

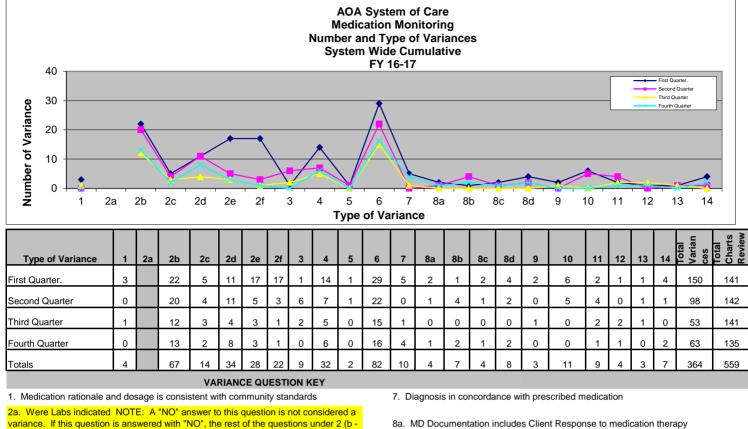
Data Sources: Medication Monitoring Reports FY 16-17 Report By: County of San Diego HHSA BHS QI - Quality Management Team - TW



Comparison FY 16-17 Medication Monitoring Report Adult/Older Adult System of Care

Comparison of Variances in previous Fiscal Years. Questions 9 - 14 were added in FY 13-14.

		EV 16 17	EV 15 16	FY 14-15	EV 12 14	EV 12 12
		1 1 10-17	1115-10	1114-13	1 1 13-14	1 1 12-13
1	Medication rationale and dosage is consistent with the community standards.	4	13	15	7	10
2a	Were labs indicated? NOTE: A "NO" answer to this question is not considered a variance. the questions under 2 (b - f) should be N/A	If this que	stion is ans	wered with	"NO", the	rest of
2b	Were lab results obtained?	67	91	85	73	41
2c	Were labs reviewed by Medical Staff?	14	49	42	40	13
2d	Were lab results present in the chart?	34	61	47	47	26
2e	Were attempts made to obtain appropriate labs?	28	33	24	26	33
2f	If treatment continues without labs, is there appropriate rationale to continue or discontinue meds?	22	16	22	17	4
3	Physical health conditions and treatment are considered when prescribing psychiatric medication.	9	8	10	10	2
4	No more than 1 of each chemical class concurrently without a clearly documented rationale.	32	10	21	14	5
5	Were Adverse Drug Reactions and/or Side Effects treated and managed effectively?	2	3	3	4	6
6	Informed consent is evidenced by a signed consent form.	82	48	38	49	56
7	Diagnosis in concordance with prescribed medication.	10	5	11	5	9
8a	MD Documentation includes Client Response to medication therapy	4	1	3	1	2
8b	MD Documentation includes Presence/absence of side effects	7	13	8	10	14
8c	MD Documentation includes Extent of client's adherence with the prescribed medication regimen and relevant interventions.	4	8	1	7	6
8d	MD Documentation includes Client's degree of knowledge regarding management of his/her medication(s).	8	16	7	5	20
9	Benzodiazepine Criteria: Dose is within community standards of FDA Guidelines.	3	0	0	0	
10	Documentation shows absence of BZD abuse.	11	6	9	4	
11	For long-term use of BZD medication, rationale is documented based on previous failures on other treatment medications or modalities.	9	10	13	8	
12	No more than one anxiolytic is prescribed without a clearly documented rationale.	4	2	2	1	
13	If treatment is for short-term use as a sleep aid, documentation shows evidence that patient has failed previous non-BZD medications.	3	0	5	1	
14	If patient is requesting medication between doctor visits or escalating doses without physician approval, interventions to address these behaviors are documented.	7	1	1	0	



f) should be N/A 2b. Were lab results obtained

- 2c. Were labs reviewed by Medical Staff
- 2d. Were lab results present in chart

2e. Were attempts made to obtain appropriate labs

2f. If treatment continues without labs, is there appropriate rationale to continue or discontinue meds

3. Physical Health conditions and treatment considered when prescribing psychiatric medication

4. No more than 1 of each chemical class concurrently without a clearly documented rationale

5. Adverse Drug Reactions and/or side effects treated and managed effectively

6. Informed consent is evidenced by a signed consent form

8a. MD Documentation includes Client Response to medication therapy

8b. MD Documentation includes Presence/absence of side effects

8c. MD Documentation includes Extent of client's adherence with the prescribed medication regimen and relevant interventions.

8d. MD Documentation includes Client's degree of knowledge regarding management of his/her medication(s).

9. Benzodiazepine Criteria: Dose is within community standards of FDA Guidelines

10. Documentation shows absence of BZD abuse

11. For long-term use of BZD medication, rationale is documented based on previous failures on other treatment medications or modalities

12. No more than one anxiolytic is prescribed without a clearly documented rationale

13. If treatment is for short-term use as a sleep aid, documentation shows evidence that patient has failed previous non-BZD medications

14. If patient is requesting medication between doctor visits or escalating doses

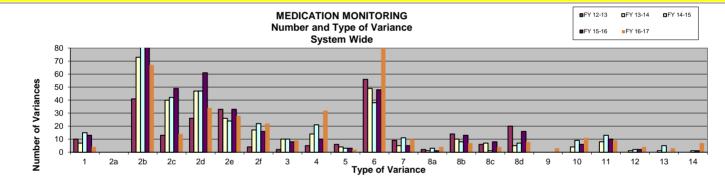
without physician approval, interventions to address these behaviors are documented

Adults Mental Health Services Providers Medication Monitoring Reported Variances by Program Comparison by Fiscal Year

	Number of variances by question																							
	1	2a	2b	2c	2d	2e	2f	3	4	5	6	7	8a	8b	8c	8d	9	10	11	12	13	14	# of Charts Reviewed	# of Variances
FY 12-13	10		41	13	26	33	4	2	5	6	56	9	2	14	6	20							782	247
% of Total Variances	1%		5%	2%	3%	4%	1%	0%	1%	1%	7%	1%	0%	2%	1%	3%								
FY 13-14	7		73	40	47	26	17	10	14	4	49	5	1	10	7	5	0	4	8	1	1	0	329	810
% of Total Variances	2%		22%	12%	14%	8%	5%	3%	4%	1%	15%	2%	0%	3%	2%	2%	0%	1%	2%	0%	0%	0%		
FY 14-15	15		85	42	47	24	22	10	21	3	38	11	3	8	1	7	0	9	13	2	5	1	367	715
% of Total Variances	4%		23%	11%	13%	7%	6%	3%	6%	1%	10%	3%	1%	2%	0%	2%	0%	2%	4%	1%	1%	0%		
FY 15-16	13		91	49	61	33	16	8	10	3	48	5	1	13	8	16	0	6	10	2	0	1	394	600
% of Total Variances	3%		23%	12%	15%	8%	4%	2%	3%	1%	12%	1%	0%	3%	2%	4%	0%	2%	3%	1%	0%	0%		
FY 16-17	4		67	14	34	28	22	9	32	2	82	10	4	7	4	8	3	11	9	4	3	7	364	559
% of Total Variances	1%		18%	4%	9%	8%	6%	2%	9%	1%	23%	3%	1%	2%	1%	2%	1%	3%	2%	1%	1%	2%		

Note: Criteria 2 was expanded on the review tool in FY 12-13, so a question to question comparison to former fiscal years is not possible. Note: Criteria 2a was Criteria 2 in previous fiscal years. Criteria 2b through 2f were not included on the review tool in previous fiscal years. Note: A negative answer to criteria 2a is not considered a variance in FY 12-13

Note: Criteria 9 - 14 were added in FY 13-14



Criteria

1. Medication rationale and dosage is consistent with community standards

2a. Were Labs indicated NOTE: A "NO" answer to this question is not considered a variance. If this question is answered with "NO", the rest of the questions under 2 (b - f) should be N/A

- 2b. Were lab results obtained
- 2c. Were labs reviewed by Medical Staff
- 2d. Were lab results present in chart
- 2e. Were attempts made to obtain appropriate labs
- 2f. If treatment continues without labs, is there appropriate rationale to continue or discontinue meds
- 3. Physical Health conditions and treatment considered when prescribing psychiatric medication
- 4. No more than 1 of each chemical class concurrently without a clearly documented rationale
- 5. Adverse Drug Reactions and/or side effects treated and managed effectively
- 6. Informed consent is evidenced by a signed consent form

7. Diagnosis in concordance with prescribed medication

- 8a. MD Documentation includes Client Response to medication therapy
- 8b. MD Documentation includes Presence/absence of side effects
- 8c. MD Documentation includes Extent of client's adherence with the prescribed

medication regimen and relevant interventions. 8d. MD Documentation includes Client's degree of knowledge regarding management of

- his/her medication(s).
- 9. Benzodiazepine Criteria: Dose is within community standards of FDA Guidelines
- 10. Documentation shows absence of BZD abuse
- 11. For long-term use of BZD medication, rationale is documented based on previous failures on other treatment medications or modalities
- 12. No more than one anxiolytic is prescribed without a clearly documented rationale

13. If treatment is for short-term use as a sleep aid, documentation shows evidence that patient has failed previous non-BZD medications

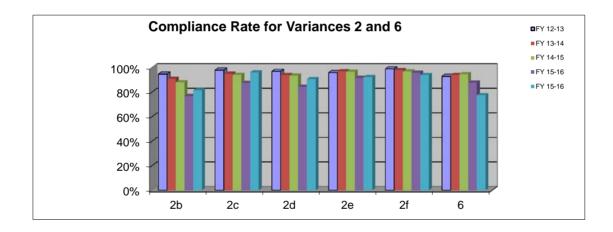
14. If patient is requesting medication between doctor visits or escalating doses without physician approval, interventions to address these behaviors are documented

ADULTS MENTAL HEALTH SERVICES PROVIDER MEDICATION MONITORING

Compliance Analysis - Variances 2 (Labs) and 6 (Informed Consent)

	Charts Reviewed			# Var	iances			_		
		2b	2c	2d	2e	2f	6		2b	2
FY 12-13	782	41	13	26	33	4	56		95%	98
FY 13-14	810	73	40	47	26	17	49		91%	95
FY 14-15	715	85	42	47	24	22	38		88%	94
FY 15-16	394	91	49	61	33	16	48		77%	88
FY 16-17	364	67	14	34	28	22	82		82%	96

Compliance Rate											
2b	2c	2d	2e	2f	6						
95%	98%	97%	96%	99%	93%						
91%	95%	94%	97%	98%	94%						
88%	94%	93%	97%	97%	95%						
77%	88%	85%	92%	96%	88%						
82%	96%	91%	92%	94%	77%						



2a. Were Labs indicated NOTE: A "NO" answer to this question is not considered a variance. If this question is answered with "NO", the rest of the questions under 2 (b - f) should be N/A

2b. Were lab results obtained

2c. Were labs reviewed by Medical Staff

2d. Were lab results present in chart

2e. Were attempts made to obtain appropriate labs

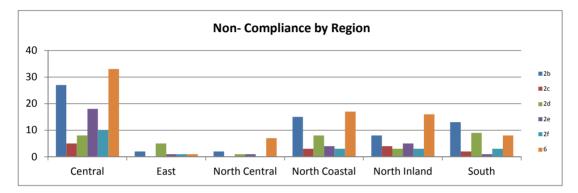
2f. If treatment continues without labs, is there appropriate rationale to continue or discontinue meds

6. Informed consent is evidenced by a signed consent form

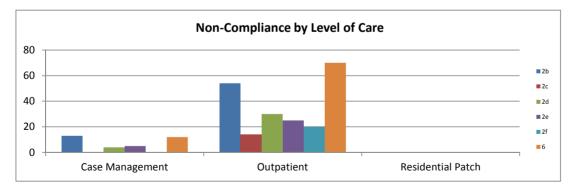
ADULTS MENTAL HEALTH SERVICES PROVIDERS MEDICATION MONITORING

Compliance Analysis (Variance 2 - Labs and Variance 6 - Informed Consent)

By Region						
	2b	2c	2d	2e	2f	6
Central	27	5	8	18	10	33
East	2	0	5	1	1	1
North Central	2	0	1	1	0	7
North Coastal	15	3	8	4	3	17
North Inland	8	4	3	5	3	16
South	13	2	9	1	3	8
Total - Var 2	165			82		



By Level of Care						
	2b	2c	2d	2e	2f	6
Case Management	13	0	4	5	0	12
Outpatient	54	14	30	25	20	70
Residential Patch	0	0	0	0	0	0
Total - Var 2	165 Total - Var 6					82



Note: The numbers reported here represent the instances of non-compliance as reported by the providers.