



COUNTY OF YOLO

HEALTH AND HUMAN SERVICES AGENCY

POLICIES AND PROCEDURES

SECTION 5, CHAPTER 11, POLICY 002-A

ATTACHMENT A – PARAMETERS FOR THE USE OF PSYCHOACTIVE MEDICATIONS

A. Introduction

1. These parameters are for the use of psychoactive medications for treatment of mental health disorders in adults.
2. The purpose of these parameters is to clarify specific YCHHSA clinical policies and procedures and provide a foundation for quality management relating to the use of major classes of psychoactive medications:
 - a. Antipsychotic Medications
 - b. Mood Stabilizing Medications
 - c. Antidepressant Medications
 - d. Anxiolytic Medications
3. These parameters are not comprehensive treatment guidelines. Such guidelines exist, and should be familiar to practitioners. They include, but are not limited to:
 - a. Expert Consensus Practice Guideline for Treatment of Schizophrenia
 - b. APA Guidelines for Treatment of Schizophrenia and Mood Disorders
 - c. PORT Schizophrenia Guidelines
 - d. Texas Medication Algorithm Project
 - e. International Psychopharmacological Algorithm Project Report
 - f. AHCPR Guidelines for Depression in Primary Care
4. These parameters are for the use of psychoactive medications in YCHHSA directly-operated and contracted facilities and represent the consensus among YCHHSA practitioners and experts in psychopharmacology.
5. These parameters apply regardless of the funding source for the prescribed medications: Medicare, Medi-Cal, County General Funds, Realignment funds, categorical funding, or other.

- 6.** These parameters in no way substitute for the consumer/practitioner dialogue and respect for consumer choice that is at the core of sound clinical practice.
- 7.** These parameters are not absolute but treatment outside of such parameters may require special justification or consultation and subsequent documentation of the rationale.
- 8.** These parameters are designed to encourage consultation and monitoring at clinical sites rather than at more remote locations, and to encourage departmental education and training.
- 9.** Changes in current medication regimens made for the purpose of conformity with these treatment parameters should be initiated only after careful consideration of the original reasons for the current medication regimen.
- 10.** These parameters reflect current interpretations of best practices, and change as new information and medications become available.
- 11.** Treatment noncompliance is a special situation that must be addressed by the prescribing practitioner. The physiologic dangers inherent in this situation must be considered and the nature and outcome of such deliberations must be clearly documented in the medical record.