

5 Ways Psychotropic Stewardship Boosts Compliance with New Guidance

Implementing a psychotropic stewardship program requires time and effort, but it will prevent headaches, problems, and costs down the line. The latest updates to the State Operations Manual, which surveyors started using for inspections on October 24, contains details that will have an impact on psychotropic prescribing and use.

Specifically, the new guidance states that requirements for psychotropic medication use also apply to antipsychotic, antidepressant, anti-anxiety, and hypnotic medications without exception. Surveyors are expected to screen for indications that any of these drugs were used to sedate patients or to restrict movement or cognition. In the update for tag F740, there are updated definitions for both depression and anxiety disorders.

The updates also offer more direct guidance on gradual dose reduction and prescribing standards for psychotropics. Specifically, the regulations say: "Dose reductions should occur in modest increments over adequate periods of time to minimize withdrawal symptoms and to monitor symptom recurrence."

Boost Stewardship, Ease Survey Woes

Psychotropic stewardship can help boost compliance with the regulations and help avoid survey questions and citations by:

"Psychotropic stewardship enables you to look at each resident using specific criteria and makes sure you have everything covered."

– Jeff Herr,
PharmD, manager of
clinical operations
at PharMerica

1. **Identifying indications for use on admission.** An effective psychotropic stewardship program walks nurses and others involved in admissions through a checklist or form to determine when and why the medication was started, if the indication was delirium or other acute condition that is expected to resolve, what symptoms presented, and what the goals of therapy are. If it is determined that the medication was started for a chronic condition, the stewardship program can help focus on the original indication and symptomology as well as other pertinent specifics. The consultant pharmacist can get involved early in the process to address any questions about indication and, if appropriate, work with the prescriber to taper doses or discontinue the medication.
2. **Ensuring the interdisciplinary team is involved in care planning.** Stewardship helps make sure that goals of therapy and plans for dose tapering or discontinuation of drugs are discussed with the family or responsible party when starting psychotropics. Surveyors will want to know that these conversations are taking place and that everyone understands why and how drugs are being used. They also will be looking to see that there are parameters for when tapering or discontinuation will happen.
3. **Preventing errors and omissions in documentation.** With surveyors sharpening their focus on indication, the stewardship program will clarify what's acceptable, what's not, and bring everyone back to the same page. "There will be fewer questions and less scrutiny if you consistently have people on medications with appropriate indications and diagnoses," said Jeffrey Herr, PharmD, manager of clinical operations at PharMerica.

continued on next page

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4. **Creating a system where nothing falls through the cracks.** Surveyors will be looking to see if any residents were admitted or started on psychotropics without any timeline or effort to consider dose reduction, therapeutic alternatives, nonpharmacologic interventions, or discontinuing the drug. Herr said, "Psychotropic stewardship enables you to look at each resident using specific criteria and makes sure you have everything covered. It also helps guarantee that you have every team member on the same wavelength. When you do all this, you have less chance of receiving deficiencies."
5. **Preparing facilities for the possibility of mandatory stewardship down the road.** "Stewardship isn't a regulatory requirement – at least not yet – but having a program will help facilities stay in compliance and avoid survey citations. It helps ensure that medications are optimized and being used appropriately," said David Phillips, PharmD, manager of clinical operations for the Mid-Atlantic at PharMerica. He added, "However, we are seeing the writing on the wall. CMS has long had a focus on psychotropics, and I wouldn't be surprised if stewardship is mandated sometime in the coming years. Having a program now will give facilities a leg up if and when such an initiative is mandated."

No Heavy Lift, But a Lighter Load

Starting psychotropic stewardship doesn't have to be a heavy lift. While it can be challenging to taking the time for something new, you can start with things you're already doing and build the program in incremental steps.

Ultimately, said Matthew Palmer, PharmD, BCGP, manager of clinical operations at PharMerica, "the stewardship program will give you a framework, including care plan templates that are resident specific and help guide your team, even when you have agency or new staff. And it will encourage strong teamwork, engagement, and collaboration where everyone is focused on individual goals for residents and what is in their best interest."