COBB COUNTY COMMUNITY SERVICES BOARD

Policy # 8013	Consent for Medication and AIMS – Modified Abnormal Involuntary Movement Scale	Service Delivery
Origination Date: March 30, 2004		
Revision Date: February 20,2006; January 20, 2009; July 16, 2009; January 10, 2011, October 3, 2012, February 5, 2019 **Reviewed Date: February 2005; May 10, 2007; July 16, 2010, July 9, 2013, July 19, 2016**		
Approved: Foster Norman **Foster Norman, Executive Director**		

POLICY:

It is the policy of the Cobb Community Services Board to recognize an individual's right to exercise informed consent to treatment prior to the administration of psychotropic medication and throughout the course of treatment with such medication and to assess and reassess individuals who are treated, or who may be treated with antipsychotic, psychotropic medications for medication induced movement disorder by completing the Modified Abnormal Involuntary Movement scale (AIMS).

DEFINITIONS:

Psychotropic Medication is defined as those medications which are categorized as antipsychotic, anti-manic, antidepressant, and anti-anxiety drugs. This does not include medications typically prescribed for extra pyramidal side effects.

Initial prescription is defined as the first time a psychotropic medication is prescribed to an individual or any subsequent change to the category of medication prescribed, but does not include changes of medication within the same category or changes in dosage.

PROCEDURE:

1. The Cobb County Community Services Board's physician or APRN (Advanced Practice Registered Nurse) or PA (Physician's Assistant) will assess the individual and determine if psychotropic medication is indicated and document the assessment in the individual's record before the initial prescription.
2. At the time of the initial prescription, the physician, APRN or PA will discuss with the adult individual (if competent or legal guardian if incompetent) or the parent/legal guardian for a child or adolescent the purpose and expected benefits of the medication, common side effects and possible risks, alternative treatments including no treatment, the possible need for medical or laboratory consultations, possible need for adjustment of medication dose over time and any dietary restrictions as well as the right to withdraw consent or refuse medication in a clear and reasonable manner consistent with the individual's, parent's or legal guardian's emotional and intellectual level.

3. After the information in #2 has been communicated to the individual/parent/legal guardian, the ordering practitioner will obtain signatures on the appropriate Consent for Medication form (adult or child and adolescent), *obtain witness signature for child and adolescent individuals* and then sign and date the consent form.
4. The ordering practitioner will indicate consent signed on the online medication order form when order is written for first time or when reordered if chart has been closed and then reopened.
5. A new consent form must be executed prior to the prescribing of another medication not stated on a current and valid Consent for Medication form.
6. Dosage changes for the **exact** medication **do not** require a new consent.
7. For ***children and adolescents*** a renewal of the informed consent process and signatures must be completed every 12 months even in the event there are no changes that occur to the medication plan.
8. Unless the youth is maintained under formal legal guardianship upon reaching the age of 18, a new psychotropic medication informed consent must be obtained from the youth as a legally responsible adult.
9. If the **child or adolescent** has been removed from the home by the Department of Family and Children Services (DFCS), and is in the custody of DFCS/State of Georgia, the person who is providing informed consent is the Department of Human Services (DHS) through the Division of Family and Children Services (DFCS). If the provider is unable to obtain signature on the informed consent, the provider must thoroughly document efforts taken to obtain the informed consent on more than one occasion, and place those in the medication record of the child or adolescent.
10. If the **child or adolescent** has discontinued the medications for a period of 90 days, a new informed consent must be completed. The discussion with the parent/legal guardian in this situation should include a review of the potential side effects of a discontinuance of psychotropic medications and a consideration of the current willingness and desire of the youth to follow the current treatment plan should be made.
    1. The Chief Quality Officer maintains the current consent versions electronically.
    2. For individuals who will be prescribed a psychotropic medication, the individual is assessed prior to beginning treatment with the psychotropic medication and a Modified Abnormal Involuntary Movement Scale (AIMS) is completed. Applicable medications may include but is not limited to: Abilify, Clozaril, Risperdal, Seroquel, and Zyprexa.
    3. The Physician/APRN/RN or anyone who has documented training on AIMS, completes the Modified Abnormal Involuntary Movement Scale in the electronic medical record as the assessment tool.
    4. Individuals currently taking psychotropic medication are assessed on each visit to the Physician/APRN, at a minimum of every six (6) months (unless otherwise indicated by Physician order) as long as the individual is taking psychotropic medications and an AIMS is completed.
4. Any abnormal findings are reported to the appropriate Physician/APRN immediately.