

CORRECTIONAL MANAGED HEALTH CARE POLICY MANUAL	Effective Date: 11/5/2019	NUMBER: I-67.1  Page 1 of 3
	Replaces: 2/25/2019	
	Formulated: 9/89 Reviewed: 10/2022	
<b>COMPELLED PSYCHOACTIVE MEDICATION FOR MENTAL ILLNESS</b>		

**POLICY:** Psychoactive medications may be compelled by the treating psychiatrist/ mid-level practitioner for a patient who is imminently dangerous to self or others due to mental illness or at risk of significant deterioration.

**DEFINITION:**

Compelled psychoactive medication is administered when the patient meets the criteria in IA and/or B; has had a due process hearing in the case of a non-emergent situation, and a psychiatrist/ mid-level practitioner(s) has given order for compelled medication.

**PROCEDURE:**

- I. A patient may be compelled to take psychoactive medication(s) when the patient has refused to voluntarily take medication(s) and when the refusal results in a condition deemed by mental health professional(s) as meeting at least one of the following criteria:
  - A. Emergency – A patient is considered at imminent risk to cause serious harm to self or others, secondary to mental illness.
    - 1. Compelled medication(s) administered on an emergency basis are valid for only a one time dose.
    - 2. Compelled medication(s) administered on an emergency basis cannot be written as standing orders or “as needed” (i.e. PRN).
    - 3. Compelled medication(s) are administered in Behavioral Health Facilities, crisis management, or infirmary settings. Emergency medications may also be necessary to safely transport inmates to a behavioral health or crisis management facility.
    - 4. A certificate for Emergency Compelled Psychoactive Medication (HSP-IA) will be completed for **each** instance of emergency medication administered.
  - B. Non-emergency – Occurs when a patient’s continued suffering from severe and abnormal mental, and physical distress, is likely to result in a deterioration of independent functioning. Non-emergency compelled medication certificates are valid for 30 days.
- II. ***Emergency Compelled Medications:***
  - A. Mental health, and/or medical staff must provide supportive documentation for involuntary medication in the electronic health record based on observations of dangerous behavior and/or symptoms of mental illness exacerbated by non-compliance with psychotropic medication(s). Prior to the administration of compelled medication attempts are made by clinical staff to obtain voluntary compliance and these attempts are documented in the electronic health record.
  - B. In emergency circumstances, occurring after working hours, a psychiatrist or mid-level practitioner may order emergency medications via telephone. Telephone orders for emergency medications must be co-signed within 72 hours. Emergency Compelled Medication Certificates are valid for a single dose of medication. If the patient agrees to take the medication, the order

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for emergency medication may not be discontinued. It will be documented on the Certificate of Emergency Compelled Medication in a Mentally Ill Person Form (HSP 1A) (See Attachment) that: 1) the patient voluntarily accepted the compelled medication; no enforcement occurred, OR 2) enforcement of the compelled medications occurred.

- C. Following the administration of compelled medication(s) the administering nurse will document injuries, adverse drug effects, and desired results. Documentation will reflect, for **each** administration, whether the compelled medication was accepted voluntarily or required enforcement.
- D. The Certificate of Emergency Compelled Psychoactive Medication in a Mentally Ill Person Form (HSP 1A) will be completed and forwarded to the facility mental health clinical director for review and signature, and the certificate will be scanned into the electronic health record of all patients including those who voluntarily accept the compelled medication(s) after the process has begun.
- E. All incidents of emergency compelled medication(s) are reviewed by the facility QI/QM committee.

### III. *Non-emergency Compelled Medication:*

- A. Documentation in the health record is made by the treating psychiatrist/mid-level practitioner and treating clinician of the patient's mental deterioration and/or dangerousness due to mental illness and of the patient's refusal to voluntarily comply with prescribed medications.
- B. The treating psychiatrist/mid-level practitioner determines that the patient is in need of psychoactive medication, with or without the patient's consent and documents the decision in the record. One certificate is required for compelled medication. Documentation must include two examinations with concurring signatures by a treating and a non-treating psychiatrist or mid-level practitioner. The required criteria for non-emergency compelled medication(s) includes: risk to self or others, deterioration in functioning or likelihood of deterioration, secondary to mental illness. Non-emergency certificates are valid for 30 days.
- C. A non-treating psychiatrist /mid-level practitioner officiates an Administrative Due Process Procedure which includes the patient, a designated non-treating mental health clinician (as the patient advocate), and the treating psychiatrist /mid-level practitioner. Results of the Due Process Hearing are documented in the electronic health record and signed by panel members. If the hearing concludes that compelled medication(s) is necessary, the treating psychiatrist /mid-level practitioner writes orders for the compelled medication(s).
- D. Following the administration of compelled medication(s), the administering nurse will document injuries, adverse drug effects, and desired results. Documentation will reflect, for **each** administration, whether the compelled medication was accepted voluntarily or required enforcement.
- E. The Certificate of Non-Emergency Compelled Psychoactive Medication in a Mentally Ill Person Form (HSP-1) will be completed and forwarded to the facility mental health clinical director for review and signature and scanned in the health record. (See Attachment B)
- F. All incidents of Non-emergency compelled psychoactive medication(s) are reviewed by the facility QI/QM Committee.

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IV. ***Procedures for all compelled medications:***

The Facility mental health Clinical Director or designee will maintain a log of all incidents of compelled medication(s). Each month a copy of the Compelled Medication Log will be forwarded to the TDCJ Director of Mental Health Monitoring and Liaison for review. The Compelled Psychoactive Medication Log will include the following information, at a minimum:

- A. Date of incident
- B. Patient name and TDCJ#
- C. Emergency or non-emergency
- D. Psychiatrist/MLP ordering compelled medications
- E. Mental health diagnosis
- F. Date of QI/QM review
- G. Date documentation was forwarded to the TDCJ Director of Mental Health Monitoring and Liaison