



DELAWARE HEALTH AND SOCIAL SERVICES

Division of Developmental Disabilities Services

Procedure: Behavior Modifying Medications

Approved by: 

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Revision Date: _____

I. PURPOSE:

To ensure statewide consistency for the review of behavior modifying medications for individuals living in residential services funded by the Division of Developmental Disabilities Services (DDDS).

II. APPLICATION:

DDDS Community Services Employees
DDDS Authorized Service Providers

III. STANDARDS:

A. Each individual taking Behavior Modifying Medications will be reviewed by PROBIS. All reviews and length of the review cycle will be determined by PROBIS.

B. Behavior Modifying Medications that are utilized to mitigate symptoms associated with the following disorders and interventions would be exempt from the PROBIS process:

1. Insomnia
2. Alzheimer's/ Dementia
3. End of Life/ Hospice Care
4. CP/Neurodegenerative Disorders
5. Herbal Medications
6. Seizure Disorders
7. Movement Disorders

C. A Behavior Modifying Medication shall be used in accordance with the following steps:

1. A Functional Assessment is completed by the Behavior Analyst. If the Functional Assessment deems the use of behavior modifying medication as an intervention then a referral will be made to a medical professional for further evaluation. All Behavior Interventions must include Positive Supports.
2. If a Behavior Modifying Medication is recommended, the prescriber shall provide a written order for the medication and note the indication for the medication use. Risks and benefits of the medication, including side effects will be documented in a Risk Benefit Analysis. A designated support team

member shall obtain written or witnessed verbal Informed Consent for the use of the medication from the individual, Health Care Surrogate, or Guardian.

3. The medication shall be used in conjunction with the Behavior Health Support Plan.
4. The Behavior Modifying Medication is prescribed only for a condition that is diagnosed according to the most current edition of the American Psychiatric Association's Diagnostic and Statistical Manual (DSM).

- D. Assistance or administration of behavior modifying medication shall begin upon informed consent of the individual, a Health Care Surrogate, or Guardian and shall be subject to review by PROBIS and the Human Rights Committee process. Informed Consent shall be documented in the individual's record.
- E. If the individual, Health Care Surrogate, or Guardian does not give consent the medication shall not be used and the prescriber shall be notified.
- F. It is encouraged that whenever possible, the Behavior Analyst discusses monotherapy with the prescriber. Polypharmacy may be appropriate based on documented treatment rationale and current standards and practices.

IV. DEFINITIONS:

Behavior Modifying Medications

Any chemical agent used for the direct effect it exerts upon the central nervous system to modify thoughts, feelings, mental activities, mood, or performance. These are often categorized as follows: antipsychotic, antidepressants, mood stabilizers, anti-anxiety agents, stimulants, and sedative/hypnotics.

Behavior Support Plan

A person-focused, positive behavior intervention document of behavior and/or mental health supports developed from a functional assessment based on a foundation of positive, proactive values to aid the individual in striving towards his/her goals and objectives in life with minimal interference from behaviors that impede his/her progress.

Chemical Restraint

A single dose of a medication administered in response to an unanticipated urgent situation, with the intent of immobilizing an individual and managing an already occurring event such as aggressive behavior that is placing the individual or others in imminent danger of physical harm. (Board of Nursing 2014)

Herbal, Vitamins, Mineral, Homeopathic Remedies

Products that are categorized as food supplements, are not drugs, and do not fall under the jurisdiction of the Federal Drug Administration (FDA).

Human Rights Committee (HRC)

A group of people who are not employees of DDDS who provide monitoring to assure the protection of legal and human rights of Individuals with Intellectual Disabilities. The membership may include physicians, lawyers, parents or other volunteers. A DDDS employee shall act as a liaison between HRC and the regional offices.

Informed Consent

The consent of a patient to the performance of health care services by a health care provider who has informed the patient both verbally and in writing, to an extent reasonably comprehensible to general lay understanding, of the nature of the proposed procedure or treatment and of the risks and alternatives to treatment which a reasonable patient would consider material to the decision whether or not to undergo the treatment. The patient must understand the information provided by the health care provider. (Title 16, Chapter 55, subsection 5530 (b))

Monotherapy

The use of only one medication at one time.

Planning / Support Team

Includes the individual and the people who are important in their life, at the very minimum, all planning and support teams shall include the individual who is receiving supports, his or her guardian if applicable, and the persons who the individual request to be involved in the individual planning process.

Polypharmacy

The use of two or more medications at one time. There are two types of polypharmacy:

- Inter-class Polypharmacy: The use of two or more medications from two or more different classes of medication (e.g., use of a neuroleptic with an antidepressant; the use of an antidepressant with an antianxiety agent, etc.);
- Intra-class Polypharmacy: The use of two or more medications from the same class of medication (e.g., two neuroleptics, two antidepressants, etc.).

Positive Behavior Supports

An integrated approach to teach an individual adaptive and socially appropriate skill and competencies. Supports may include teaching strategies and/or environmental supports to increase adaptive behaviors. These approaches must treat individuals in a respectful, age-appropriate manner, and should be built into the individual's daily life. (NASDDDS Research Committee -11/11//2014)

PRN Medication Intervention

A single dose of medication administered in response to an unanticipated urgent situation given on an as needed basis as a strategy to prevent or decrease a psychiatric crisis or behavior issue as written in a Behavior Health Support Plan and ordered by a medical professional. The PRN cannot be used to immobilize the individual. (see Chemical Restraint)

Peer Review of Behavior Intervention Strategies (PROBIS)

The DDDS approved peer review committee, appointed by the Division Director or designee, charged with the review and approval of the Behavior Health Support Plan. Individuals on the PROBIS committee should have knowledge and experience in the field of psychology, behavior science, and or practical experience with developing Behavior Health Support Plans.

Risk Benefit Analysis

A method that addresses the question of whether a risk is “acceptable.” This question is raised in the context of clinical decision-making: the analysis requires a comprehensive estimation and evaluation of risks and benefits, highlighting the trade-offs between the two that inform a decision maker. Such analysis also entails a careful quantification of the costs associated with a proposed program for reducing or avoiding risks. (In part - New England Journal of Medicine, April 2002; 346)

V. REFERENCES:

- Behavior Analyst Manual
- Federal Drug Administration (FDA)
- PROBIS Policy
- Human Rights Committee Policy
- Most current edition of the DSM
- Title 16, Chapter 55, subsection 5530 (b)
- Behavior Support Policy
- New England Journal of Medicine, April 2002; 346