

MDS Alert

Pharmacy Services Rules Revamped, Too

Watch out for a new requirement for your residents' medications: monthly drug reviews. The requirements going into effect Nov. 28, 2017, say your facility's consulting pharmacist must conduct a monthly review of all residents' drug regimens - **as well as their medical charts** - in order to remain in compliance. Pharmacists must document any irregularities and physicians must respond - and their responses must be documented, too.

CMS has been pushing the reduction of drugs, with a particular focus on reducing antipsychotic medications, and surveyors will be upping their scrutiny of documentation.

Medication Management

Focus on how an interdisciplinary team can bring different perspectives to your care - and how the combined brainpower and specialties can contribute to the reduction of medications in your facility's residents.

If your facility isn't already requiring an interdisciplinary team to meet monthly for comprehensive reviews of the drug regimens of all residents receiving psychotropic medications, consider implementing such a policy now, says **Maureen Kelly, Rn, Don-Ct**, senior clinical consultant at **LW Consulting inc.** in Harrisburg, Pennsylvania. The team should include staff who provide care and staff who oversee care, along with the consulting pharmacist, the unit leader, and the nurse assessment coordinator who come together to discuss each resident's GDR.

Remember: Psychotropic drugs can only be prescribed to treat certain qualifying conditions, as diagnosed and documented in the clinical record, and GDRs are required unless clinically contraindicated. If a GDR is contraindicated, a physician must document as such, and the resident's drug regimen should still be evaluated in the monthly meeting. Don't forget to notate everything on the resident's care plan.