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| <p>NH DEPARTMENT OF CORRECTIONS POLICY AND PROCEDURE DIRECTIVE</p> <p>SUBJECT: MEDICATION NON-COMPLIANCE AND MONITORING INMATES</p> <p>PROPONENT: <u>Helen Hanks, Administrative Director</u> <i>Name/Title</i></p> <p><u>Medical/Forensic Services 271-3707</u> <i>Office Phone #</i></p> | <p>CHAPTER <u>Health Services</u></p> <p>STATEMENT NUMBER <u>6.68</u></p> <p>EFFECTIVE DATE <u>11/30/12</u></p> <p>REVIEW DATE <u>11/30/13</u></p> <p>SUPERSEDES PPD# <u>NEW</u></p> <p>DATED <u>N/A</u></p> |
| <p>ISSUING OFFICER:</p> <p>_____</p> <p><i>William Wrenn, Commissioner</i></p> | <p>DIRECTOR'S INITIALS: _____</p> <p>DATE: _____</p> <p>APPENDIX ATTACHED:</p> <p>YES _____ NO _____</p> |
| <p>REFERENCE NO: See reference section on last page of PPD.</p> | |

I. PURPOSE:

To ensure monitoring and intervention regarding inmate compliance with prescribed medication regimens, in order to achieve optimal compliance.

II. APPLICABILITY:

To all healthcare staff involved in the administration of medications.

III. POLICY:

It is the policy of the NH Department of Corrections (NHDOC) that:

- A. Inmate compliance with prescribed medication regimens will be monitored and documented by nursing staff on a daily basis through review of the Medication Administration Records (MAR's).
- B. Documented non-compliance will be addressed through documented counseling by the healthcare staff.
- C. Non-compliance that is not resolved by initial counseling and non-compliance with critical medications will be referred to the prescribing practitioner for subsequent action.

IV. PROCEDURE:

- A. Medication nurses are responsible for documenting instances of inmate non-compliance with medication administration (no shows and refusals). All such documentation will be noted on the MAR.
 - 1. Refusals
If an inmate refuses a medication, the notation "R" is entered and circled on the MAR. The circle notes that the medication was not given; the "R" documents the reason that the medication was not given.
 - 2. No Show
If an inmate has failed to appear to receive the medication as scheduled, the medication nurse will document the "No Show" by placing R (refused) inside the appropriate day's grid square on the MAR and circle. The nurse will

- inquire after
as
- the medication pass as to why they did not show for medication and treat clinically indicated.
- B. Inmate non-compliance with medication administration is monitored at least daily by the assigned clinic nurse by reviewing all MAR's, and documented on the Medication Non-Compliance Log (attachment 1).
- C. The following areas of non-compliance will be reported on the Daily Non-Compliance Log, to be addressed the following day:
1. Inmate has missed a dose of Insulin.
 2. Inmate has missed one dose of Coumadin.
 3. Inmate has missed two doses of Isoniazid (INH) on a bi-weekly schedule.
 4. Inmate has missed three consecutive doses of any other medication.
 5. Inmate has an intermittent pattern of medication compliance, as indicated by documented "no show" or medication refusal on an irregular basis not exceeding three consecutive doses.
- D. The Non-Compliance Log will be completed daily by the assigned medication nurse. Each item entered must be completed by filling in the date, inmate name, ID number, medication(s), routing for follow-up and initials of the nurse making the entry. All Non-Compliance Logs will be retained in a three-ring binder. They will be distributed daily to the prescribing practitioners and clinic nurse/supervisor.
- E. PSYCHOTROPIC MEDICATIONS
1. One copy of the Medication Non-Compliance Log will be sent to the attention of the prescribing psychiatric practitioner.
 2. Urgent situations must be communicated immediately to the treating staff or in absence of the psychiatric practitioner the on-call psychiatric practitioner is to be consulted.
 3. The clinical staff assigned to the inmate's care would review the list daily.
 4. Within 72 hours of the review, non-compliant inmates will be scheduled for an interview and counseling with the prescribing psychiatrist and/or the assigned mental health clinician and will document the intervention in a progress note CHOICES. All encounters with inmates regarding non-compliance will be documented in the appropriate progress note format in CHOICES.
- F. ALL OTHER (NON-PSYCHOTROPIC) MEDICATIONS
1. A copy of the daily Medication Non-Compliance Log will be sent to the physician/nurse practitioner and the clinic nurse/nursing supervisor or triaged to the appropriate provider.
 2. In the case of critical or sensitive medications (ex: Coumadin, Digoxin, Insulin, Isoniazid), the inmate will be added to the clinic list, or if the situation is critical, the inmate will be referred to the appropriate MD on site.
 3. Urgent situations must be communicated immediately by phone to the on-site physician or on-call physician.
- G. During counseling visits regarding non-compliant medication, the health care professional will interview the non-compliant inmate regarding the medication regimen and the possible medical consequences of refusing the medication, and will document the visit with a progress note in the medical record.
1. A physician must be notified immediately of any situation, which, in the opinion of the nurse, poses a health risk to the inmate.
- H. When an inmate has not received medication because it has not been received from the pharmacy, it is the responsibility of the medication nurse to take immediate action to correct the situation by contacting the pharmacy for resolution, using stock medication if appropriate, or utilizing a purchase order through an approved outside pharmacy if necessary. If the medication is not available a physician/nurse practitioner must be notified to obtain an alternative treatment plan.
- I. Inmates who refuse prescribed medication will sign a Declination of Treatment Form
- the

after counseling. Documentation of all encounters will be maintained in the medical record. If the provider chooses to discontinue the medication, no further declination will be sought. Further counseling and/or intervention will be provided at the discretion of the prescriber. If the prescriber chooses to continue the order, counseling for non-compliance will continue as stated above.

J. In the event of an inmate's repeated declination to accept critical or sensitive medications despite repeated counseling efforts the prescriber and the Medical Director will be notified to determine the next steps (i.e., transfer to a more appropriate facility and/or pursuit of further assessment of competence, need for guardianship, etc.)

REFERENCES:

Standards for the Administration of Correctional Agencies
Second Edition Standards

Standards for Adult Correctional Institutions
Fourth Edition Standards

Standards for Adult Community Residential Services
Fourth Edition Standards

Standards for Adult Probation and Parole Field Services
Third Edition Standards

Other

HANKS/pf

Attachment

MEDICATION NON-COMPLIANCE LOG

| Date | Name | ID # | Medication | Follow-up Sick Call (specify) | Follow-up Physician Notified | Nurse Initial |
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CRITERIA: Patients who have missed the following medication doses should be added to the log:

- Insulin – one dose
- Coumadin - one dose
- INH – two doses if on twice-weekly schedule
- All other medications – three doses
- Intermittent pattern of medication compliance

DISTRIBUTION:
 Physician – one copy daily
 Psychiatrist – one copy daily
 Clinic nurse/supervisor – one copy daily

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