

**Department of Mental Health
Adult Community Clinical service**

Frequently Asked Questions

Documentation Requirements for Medication Management

Question 1: Do DMH regulations and Medication Administration Program (MAP) Policy require a medication need area be included in the Community Service Plan for individuals who are not self administering their medication(s) and choose to continue with the current level of staff assistance and/or support they receive?

Answer 1: No, regulations do not require a medication need area be included in the Community Service Plan. However, it is required that all individuals served receive a medication management assessment and training to obtain or enhance self-medication skills.

Question 2: When the situation in Question 1 above occurs, what documentation is required?

Answer 2: The following documentation is required:

- a. Comprehensive Assessment must include as part of the assessment, medication management including an evaluation of the individual's current baseline functioning. In this instance the baseline functioning information should clearly articulate what the current level of staff assistance and/or support the person served is receiving. The need area must be noted as a prioritized need including an explanation/rationale for why the assessed need is deferred and why training is being implemented separate from the Community Service Plan.
1. Shift/Daily Note detailing any changes in the level of staff assistance and/or support as noted in the Community Service Plan baseline, when/if needed.

Question 3: If the level of staff assistance and/or support needs to be increased or decreased, does the baseline information in the CA need to be updated?

Answer 3: Yes, it is necessary to document changes to the level of staff assistance and/or support in the CA.

NOTE: The information contained in this FAQ does not change any documentation requirements set forth in the DMH Medication Administration Program Policy.