

RIVER VALLEY COUNSELING CENTER, INC.

POLICY/PROCEDURE # C40.01

SUBJECT: INITIAL PSYCHIATRIC ASSESMENT/PSYCHOPHARMACOLOGICAL EVALAUTION

DATE REVIEWED/REVISED: 1/16, 1/2019, 3/20

POLICY STATEMENT: It is the policy of RVCC to assure standardized and comprehensive psychiatric evaluation for all clients referred for psychiatric assessment during the COVID-19 crisis. RVCC believes that ready access to psychopharmacological evaluation and intervention is essential to the success of treatment in the least restrictive environment during the COVID-19 crisis

PURPOSE: In all cases in which a client is seen for medications, an initial psychiatric evaluation is completed by a medical provider during the COVID-19 crisis.

RESPONSIBILITY: This policy pertains to clinical, medical and front desk staff.

PROCEDURE:

1. The Primary Clinician must complete all of the Comprehensive Assessment paperwork before submitting a psychiatric evaluation referral and include a brief statement using a "Non Billable" note about why he/she is making the referral for medication.
2. The status of the client will be considered regarding scheduling. If the need for a psychopharmacology evaluation is deemed to be urgent or emergent, the Primary Clinician works with front desk staff to schedule an appointment as soon as possible.
3. Front desk staff confirms that all comprehensive assessment paperwork is complete and schedules the appointment with the client.
4. If an initial psychiatric evaluation appointment is missed, the client must wait 60 days for a rescheduled appointment; however, exceptions may be made at the discretion of the Clinical Site Director and Medical Provider.
5. When possible, all transferred cases should receive a new comprehensive psychiatric evaluation by the new medical provider. The last available note(s) should be made available for the new prescriber.

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6. Clients will be referred to a psychiatrist/APRN to determine the following:
 - a. Assessment of differential psychiatric diagnosis/confirms diagnosis;
 - b. Assessment of need for psychotropic medication;
 - c. Evaluation of neuropsychiatric/organic disorders;
 - d. Monitoring of psychotropic medication; and/or
 - e. Evaluation to respond to appropriate requests for evaluation by other agencies (i.e., disability determinations, leaves of absence, etc.)
7. The medical provider determines a formulation of the case and the plan for medication management, laboratory work-up, medical referral(s) and other medical intervention(s). Other comorbid medical diagnosis will be considered. The medication plan includes a list of all medications specified goals. Educational material will be available for clients to review regarding medication prescribed if requested.
8. Historical information documented in the RVCC Comprehensive Assessment *is reviewed and updated. Data for these sections is added to expand or amend the information in the Comprehensive Assessment.* If no changes are necessary in a given section, the medical provider may check the box that states, "If no changes are necessary in a given section, the medical provider may check the box that states either "None reported," "No Additional History to be Added," "No Changes" or "N/A."
9. The medical provider completes a full mental status examination.
10. Clinicians are responsible to consult with the psychiatric staff and report any changes in symptoms and behaviors or potential side effects.
11. The medical provider signs the Psychiatric Evaluation and Activity box.

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