STANDARDIZED PROCEDURES for

Psychiatric Nurse Practitioners in

Orange County Health Care Agency

Behavioral Health Services

County Outpatient Programs

2020

This is a "process specific" Standardized Procedure (SP) for the Psychiatric Nurse Practitioner's (NP's) role in the Orange County's Health Care Agency (OCHCA) Behavioral Health Services (BHS), Adult and Older Adult Behavioral Health (AOABH) and Children, Youth and Prevention Behavioral Health (CYPBH) County Outpatient Programs (hereby referred to as HCA BHS Outpatient Programs).

This process specific Standardized Procedure includes a written description of the method used in developing, approving, and revising the SP for work in HCA BHS Outpatient Programs. In conformance with the Board of Registered Nursing, Title 16, California Code of Regulations (CCR) Section 1474, and the Medical Board of California, Title 16, CCR Section 1379, the following items are included:

1) HCA BHS Outpatient Program Psychiatric NPs are registered nurses with a Master's Degree in nursing, a specialty in psychiatry or adult medicine, and a state issued Nurse Practitioner certificate. *Section 1474 (b)(4)*

2) NPs are authorized to perform SP functions as established by HCA Human Resources job classification requirements. *Section 1474 (b)(6)*

3) The service provided by an NP may be at any physical site that the NP is functioning in his/her role as an HCA employee. *Section 1474 (b)(9)*

4) Initial evaluation of the NP's competence occurs when the supervising psychiatrist observes the NP conduct initial and follow-up medication / furnishing service. NPs will maintain competence by fulfilling Board of Registered Nursing licensure requirements regarding Continuing Education Units (CEUs), and attending psychopharmacology and other clinical training in HCA BHS. Regular supervision with the supervising psychiatrist, utilization review by the NP's service chief, and medication monitoring will serve as ongoing evaluation of the NP's competence to perform under the SP. *Section 1474 (b)(5)*

5) Weekly supervision time is scheduled with a supervising psychiatrist. The supervising HCA BHS psychiatrist listed at the bottom of this SP will be physically present or available at another HCA worksite by telephone whenever the NP listed at the end of this SP is working as an NP in the HCA BHS Outpatient Programs. *Section 1474 (b)(7)*

6) NPs may obtain an initial psychiatric and medical history and perform an overall assessment for any presenting problem. NPs will provide behavioral health services consistent with the NP's educational preparation or for which clinical competency has been established and maintained. *Section 1474 (b)(2)*

7) NPs may order and interpret specific laboratory and diagnostic studies for the beneficiary as clinically indicated. *Section 1474 (b)(2)*

8) NPs may consent beneficiaries for medications and order prescription medication as necessary for treatment using the NP's name and furnishing number. After review of

adequate documentation, NPs may provide Temporary Medication Refills (TMRs) to BHS outpatient beneficiaries that have been previously assessed by the NP or a psychiatrist in the HCA BHS Outpatient Program. Each NP and psychiatrist will have access to the HCA BHS's Prescribing Practice Guidelines and BHS formulary. *Section 1474 (b)(3)*

9) NPs may furnish controlled substance medications (Schedule II and above) as necessary for beneficiaries already established on a controlled substance regimen by a psychiatrist, and in concordance with the HCA BHS Prescribing Practice Guidelines and BHS formulary. NPs will regularly discuss all of their clients on controlled substances with the supervising psychiatrist. The NP must consult with the supervising psychiatrist prior to initiation or increasing the dosage of a controlled substance. The NP will also consult with the supervising psychiatrist regarding adverse changes in the beneficiary's symptoms, significant side effects, or misuse of these medications. *B&P Code Section 2836.1*

10) The NP will notify the supervising physician (and document the communication) of any situations which the NP feels exceeds his/her ability to manage the beneficiary, any significant worsening of a beneficiary's symptoms including need for psychiatric hospitalization assessment, and any instances when beneficiary impairment is not managed by standard interventions (i.e. medication adverse effects, poor response, etc). *Section 1474 (b)(8)*

11) After the NP has conducted a psychiatric assessment and in collaboration with the supervising psychiatrist, NPs may sign forms related to beneficiary care within the scope of their practice. *1474 (b)(2); B&P Code Section 2835.7 & UIC 2708*

12) NPs will complete documentation about the beneficiary's clinical status and update the medication list in the beneficiary's electronic chart according to HCA BHS established charting procedures. *Section 1474 (b)(10)*

13) The NP Standardized Procedure will be reviewed annually by the HCA BHS Outpatient Program administration, supervising psychiatrists, and NPs. *Section 1474 (b)(11)*

14) The dated signatures of the HCA BHS personnel authorized to approve protocols follows at the end of this SP (and each subsequent change after a review). This SP is valid until superseded by the next version, or until there is written indication that the supervision relationship has ended. *Section 1474 (b)(1)*

Signatures of OCHCA personnel authorized to approve protocols:

_____   _____
Annette Mugrditchian, LCSW   DATE   Andrew Inglis, M.D.   DATE
BHS Director of Operations   AOABH/CYPBH Medical Director

_____   _____
Angela Yu, M.D.   DATE   Atur Turakhia, M.D.   DATE
AOABH Associate Medical Director   CYPBH Associate Medical Director

_____
Diana Cupp, R.N./N.P.   DATE
AOABH Nurse Practitioner

Signatures of nurse practitioners and supervising psychiatrists:

_____   _____
Diana Cupp, R.N./N.P.   DATE   Laila Akhbarati, M.D.   DATE
AOABH Nurse Practitioner   AOABH Psychiatrist

_____   _____
Angela Yu, M.D.   DATE   Eleni Hailemariam, M.D.   DATE
AOABH Associate Medical Director   AOABH Associate Medical Director

_____   _____
Diane Hannaford, R.N./N.P.   DATE   DATE
AOABH Nurse Practitioner

_____   _____
                                  DATE   DATE

_____   _____
                                  DATE   DATE

_____   _____
                                  DATE   DATE

_____   _____
                                  DATE   DATE

_____   DATE   _____   DATE

_____   DATE   _____   DATE

_____   DATE   _____   DATE

_____   DATE   _____   DATE

_____   DATE   _____   DATE

_____   DATE   _____   DATE

_____   DATE   _____   DATE

Signatures of nurse practitioner and supervising psychiatrist rescinding above supervision agreement:

_____   DATE   _____   DATE

_____   DATE   _____   DATE

_____   DATE   _____   DATE