



## Refusal of Medication and Treatment Policy

### I. POLICY

The person served has the right to refuse medications and/or treatments and employees will encourage the person served to follow physician's orders while respecting this right. Employees are not permitted to forcibly administer medications or treatments at any time.

### II. PROCEDURE

- A. When a person served refuses a medication or treatment, the employee will:
1. Attempt to discover why they are refusing and attempt to address the cause.
  2. Explain the adverse effects of not taking the medication and its importance.
  3. Never leave medications unattended with person served if the person served has refused to take them.
  4. Offer the medication/treatment (a second time) after a 10-15 minute waiting period which may include discussion or a diversionary activity.
  5. Allow the person served another 10-15 minutes to decide if the refusal will continue.
  6. Offer the medication/treatment again (a third time) before the 30 minute administration window has passed, and/or when there is an indication that the person served may accept the medication/treatment.
  7. If the person served refuses the medication/treatment a third time, then the employee will contact the Program Coordinator or Designated Manager and follow any instructions given.
- B. If the medication/treatment was not given, the employee must:
1. Call the Program Coordinator or Designated Manager and follow instructions.
  2. Call the medical or urgent care clinic and follow instructions if the Program Coordinator or Designated Manager is unavailable.
  3. Document an "R" for "Refusal", their initials, and circle the box on the *Medication Record*.
  4. Document in the *Communication Log* the refusal and attempts to encourage acceptance.
  5. Complete GER in Therap, **if the refusal required physician treatment**, and follow the *Policy and Procedure on Responding to an emergency*.
- C. If a person served refuses to attend or cooperate with a medical appointment and does not receive treatment as a result of the refusal, the Program Coordinator or Designated Manager will follow *Policy and Procedure on Health Service Coordination* to promote facilitation of the missed treatment.
- D. The Program Coordinator or Designated Manager must notify the physician and legal representative of the refusal if the following applies:
1. Physician instructions indicate that notifications be made.
  2. Any adverse medication reaction.
  3. The person's *Coordinated Services and Support Plan* and/or *Coordinated Service and Support Plan Addendum* indicate that notifications need to be made.
- E. The Program Coordinator or Designated Manager must immediately report to the county whenever the



person's physician is notified because medication is not taken as prescribed and the physician determines that the refusal or failure to take medication as prescribed creates an immediate threat to the person's health or safety or the health or safety of another person.

- F. In the case of a pattern of medication/treatment refusals, the Program Coordinator or Designated Manager will consult with the interdisciplinary team (IDT) regarding the pattern of refusals and develop a plan to follow regarding future refusals.