Prescribing Protocol for Antipsychotic Medication

A shared pathway for mental health and primary care teams prescribing antipsychotic medication at HMP Brixton

Following multidisciplinary review, the following points have been agreed and are in place:

- 1. Following review at reception, the reception nurse will task the GP to represcribe all prescriptions (including antipsychotic medication) for new prisoners.
- 2. If a new prisoner is on antipsychotic medication the GP will refer the prisoner to the Mental Health Team who will assess the prisoner and determine whether to accept him onto the Mental Health caseload.
- 3. If accepted onto the caseload, the Mental Health Team will undertake regular review and management of that prisoner's mental health needs and the prescription of psychiatric medication. The Mental Health Team will ensure that blood testing and ECG monitoring is performed at appropriate intervals for those on high dose antipsychotic, depot antipsychotic and high dose antidepressant medication.
- 4. Those prisoners who have a dual diagnosis of substance misuse and mental illness will be referred for assessment by the Substance Misuse Team. Those accepted onto the Substance Misuse caseload will be reviewed by the team, with appropriate input from the Substance Misuse Consultant Psychiatrist.
- 5. A daily morning briefing is held with the Head of Healthcare, or Deputy, to which a member of the Mental Health Team, Substance Misuse Team and Primary Healthcare attend. In this meeting, health care needs of difficult to manage or worrying cases are identified and discussed.
- 6. A weekly case review meeting is held by the Mental Health Team in which the caseload is reviewed and management plans discussed. This includes a review of medication and physical health monitoring (specifically blood testing and ECGs).
- 7. A multidisciplinary team meeting (to which all disciplines attend) is held fortnightly to review at greater length those prisoners who have ongoing healthcare concerns that are difficult to manage and require collaborative planning in terms of management and treatment.
- 8. In addition to the above, medication management meetings are held every five weeks. These provide a further opportunity to review prescribing regimens and any ongoing treatment issues.

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