Mood and Behavior Program

Audit Form

**Audit: Mood and Behavior Program**

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| **Resident Identifier** | **Comprehensive Assessment (RAI) Identifies Individualized Needs** | **PASARR Screen****Level II Recommendations Reviewed and Incorporated as indicated** | **Person Centered Care Plan is Based on Assessment** | **Care Plan Goals are Individualized, Measurable, and Realistic** | **Interventions Individualized and Include Triggers and Approaches** | **Non-Pharmacological****Interventions Identified in Plan of Care** | **Psychotropic Drug Use Includes Medical Condition, Parameters, Consent, Gradual Dose Reduction** | **Evidence of Monitoring is Charted Every Shift** | **Comments and** **Actions Needed** |
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