

EVALUATION OF REFILL CLINIC EFFECTIVENESS AT IMPROVING TREATMENT ADHERENCE IN THE MENTALLY ILL

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INTRODUCTION

- New provider-level interventions aimed at improving treatment adherence are needed because:
- Only one in five adults with serious mental illness are able to obtain treatment (Bible et al., 2017).
- Medications are effective in treating 70%-80% of serious mental illnesses; however, only 50%-60% of those who experience a positive response to medication continue to be adherent with treatment (El-Mallakh & Findlay, 2015; Levin et al., 2014).
- Nonadherence makes up a percentage of between 33%-73% of all rehospitalizations (Reist et al., 2013).



PURPOSE STATEMENT AND PICOT

- The purpose of this quality improvement project is to evaluate the effectiveness of a recently established provider-level method, known as a “refill clinic,” which has been initiated at a local, rural outpatient mental health clinic. The walk-in refill clinic occurs one day a week, and is aimed at improving treatment nonadherence.
- In established adult mental health patients who have missed one or more regularly scheduled appointment (P) how does the opportunity to refill medications during a weekly-designated “refill clinic” (I) compared to rescheduling an appointment with the provider (C) influence treatment adherence (O) within a three-month period (T)?

OBJECTIVES

1. The primary objective was a 5% increase in keeping scheduled appointments after refill clinic attendance compared to traditionally scheduled patients.
2. Further objectives included: a 5% decrease in no-call, no-show occurrences in refill clinic attendees compared to traditionally scheduled patients.

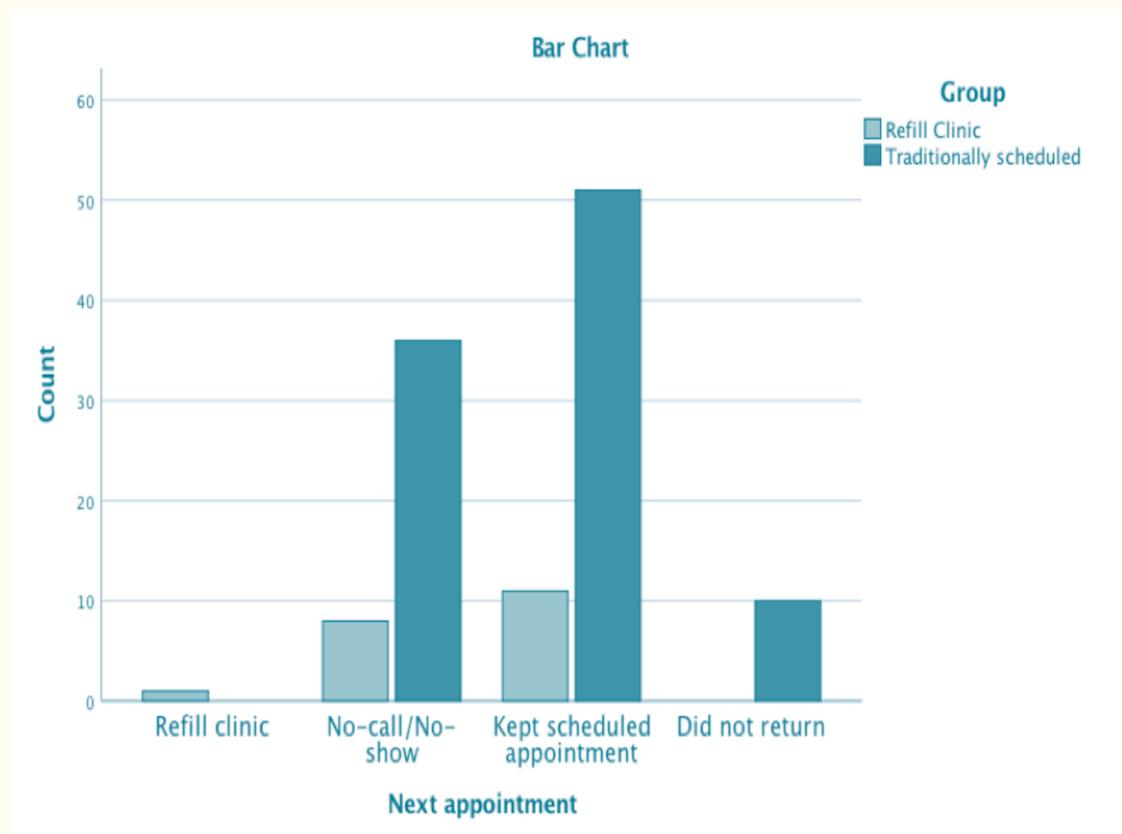
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MATERIALS AND METHODS

- Collaborated with The Arthur Center in Mexico, Missouri
- A purposive, convenience sample of outpatients who attended The Arthur Center on a refill clinic day was evaluated through data collection of medical charts.
- 117 charts were reviewed at baseline and 3-months post-intervention.

RESULTS



- Of all attendees, regularly scheduled patients comprised the majority (82.9%, $n = 97$), while refill clinic attendees made up 17.1% ($n = 20$).
- There was a small to moderate clinical significance in future kept appointments in refill clinic attendees ($p = .07$, $\phi = .2$).
- Of the 20 refill clinic subjects, 55% ($n = 11$) kept the next scheduled appointment, while 40.0% ($n = 8$) did not, and 5% ($n = 1$) attended a future refill clinic appointment.
- There was a statistically significant finding in female refill clinic attendees, ($n = 10$, $p = .05$) in that only 40% ($n = 4$) kept the next follow-up appointment.

CONCLUSIONS

- The purpose of this QI project was to evaluate the effectiveness of the refill clinic at The Arthur Center in Mexico, Missouri in increasing treatment adherence in mental health patients
- The primary objective of a 5% increase in kept scheduled appointments in refill clinic attendees compared to traditionally scheduled patients was not met.
- However, there was clinical significance in the percentage of refill clinic attendees who kept a future appointment.
- The secondary objective of a 5% decrease in no-call, no-show occurrences in refill clinic attendees compared to traditionally scheduled patients was not met.
- However, all refill clinic attendees went on to continue seeking services with The Arthur Center, whereas 10.3% ($n = 10$) of all traditional attendees ceased further treatment at The Arthur Center.



RECOMMENDATIONS

- Based on the observation that a majority (55%) of refill clinic attendees go on to keep future appointments, it is recommended that the refill clinic be continued.
- The refill clinic is helping patients by offering a simple, flexible and efficient way to stay treatment adherent.

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