



To Increase Medication Compliance Among Adult Male Patients Diagnosed with Schizophrenia Improvement Project



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BACKGROUND

The problem of non-adherence to medication has an impact on the provision of high-quality care

PURPOSE AND HYPOTHESIS

The aim of this quality improvement project is to utilize evidenced-based clinical practice guidelines, to formulate protocol to help provider increase medication compliance among adult male patients diagnosed with Schizophrenia

METHODS

Methodology : Direct population of interest: Psychiatric mental health professionals, such as nurses, case managers, social workers, psychiatrists, and psychiatric nurse practitioners.

- **Setting**: a private residential and clinic facility that serves medium-income families in the city of Long Beach, Los Angeles County, California. Each month, the institution sees roughly 170 outpatients in addition to housing about 200 inpatients.
- **Implementation Framework**: PDSA model used.
- **Interventions**: **Week 1**: The project lead engaged with employees to educate them on the policies and use of an organizational toolkit on medication adherence to increase medication compliance **Week 2**: Weekly chart reviews and the implementation of the evidence-based toolkit, which outlines the process for providers to follow in managing medication adherence, lab results were reviewed.
- **Week 3-5**: Lab results were reviewed

DATA COLLECTION: Data was retrieved from the staff and reviewed for each patient's medication adherence by looking at medication refills, MARS questionnaires over a five-week period, and data collected for serum blood levels two weeks prior to implementation and four weeks after implementation.

ETHICS /HUMAN SUBJECT PROTECTION: For the project at this location, informed consent, and Institutional Review Board (IRB) approval are not required because this is a quality improvement project. No personally identifying patient data, was used in this project

The Blood Therapeutic Levels data sheet before implementation

Aripiprazole and Metabolite, Serum, (average)

Date:10/19/23
83 ng/ml

Date:10/26/23
77 ng/ml
Normal Range :150 – 500 ng/ml

Total
160 ng/ml
mean
80 ng/ml

The Blood Therapeutic Levels data sheet during and after implementation Normal Range: 150- 500 ng/ml

Week 1

90 ng/ml

Week 2

120 ng/ml

Week 3

150 ng/ml

Week 4



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RESULTS

- **RESULT**: The blood levels of the patient aripiprazole levels prior to the implementation were average 83 ng/ml (10/19/23) and 77 ng/ml (10/26/23), with an average of 80 ng/ml.
- The patient's serum blood levels for Aripiprazole and Metabolite were an average of 90 ng/ml in the first week, 120 ng/ml in the second, 150 ng/ml in the third, 210 ng/ml in the fourth, and 300 ng/ml in the fifth. The total is 870 ng/ml with the mean average of 174 ng/ml

CONCLUSIONS

- Applications power point presentation, blood therapeutic levels data sheet, medication adherence toolkit, walk-in flyer for patients, medication administration record system, and toolkit for medication adherence. Data Collection Sheet for the Chart Audit Tool; Electronic Medication Administration Records (eMARs). The successful execution of the interventions resulted in an increase in medication adherence.

BIBLIOGRAPHY

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