Medication Adherence Learning Community
Tackling the Medication Non-Adherence Challenge: Increasing Engagement and Implementing Clinical Best Practices

Sample Application

Submission Instructions:

Completed applications must be submitted online by 11:59 p.m. ET on Friday, March 27th, 2020. The application deadline has been extended by two weeks from the original submission date of March 13th.

Please be sure to complete each of the following before submitting your application:

• Program Introduction
• Part I: Organizational Details
• Part II: Organizational Background
• Part III: Medication Adherence Community Goals
• Part IV: Key Dates

Note: Only completed applications will be reviewed.

Questions:

Any questions regarding this learning collaborative, please contact Alexandra Meade, Project Manager, at AlexandraM@TheNationalCouncil.org.

Please note: This is a sample application. All applications must be completed and submitted through the online application platform.
## Part I. Organizational Details

<table>
<thead>
<tr>
<th>Information</th>
<th>Details</th>
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<tbody>
<tr>
<td>Organization Name</td>
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<tr>
<td>Clinic/Practice Name (if different):</td>
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</tr>
<tr>
<td>Organization Address</td>
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<tr>
<td>Organization Website</td>
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<tr>
<td>Contact Person:</td>
<td>Name: Name: Position: Position: License Type (if applicable): License Type (if applicable): Email: Email: Phone: Phone:</td>
</tr>
<tr>
<td>CEO</td>
<td>Name: Name: License Type (if applicable): License Type (if applicable): Email: Email:</td>
</tr>
<tr>
<td>Medical Director/Chief Psychiatrist:</td>
<td>Name: Name: Title: Title: Email: Email:</td>
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<tr>
<td>Geographical Location (or location your primary population lives):</td>
<td>Urban: Urban: Suburban: Suburban: Rural: Rural:</td>
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<tr>
<td>Number of Organizational Staff</td>
<td></td>
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<td>Number of Clients Served Annually:</td>
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<tr>
<td>Type of services you provide (e.g., substance use, mental health, inpatient, outpatient, primary care, etc.):</td>
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## Part II. Short-Answer Questions: Organizational Background

<table>
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<tr>
<th>Question</th>
<th>Details</th>
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<tbody>
<tr>
<td>1. Why do you want to participate in this learning community? (400 words max.)</td>
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<td>2. Describe what work your organization has recently done to address medication adherence. (400 words max.)</td>
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<td>3. Describe your organization’s approach to implementing new projects. (400 words max):</td>
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4. Share how your organization has sustained work done through quality improvement initiative. (400 words max.)

5. What are your organization’s biggest challenges around medication adherence?

6. Does your clinic utilize long-acting injectables (LAIs)? Do you have a clear workflow for identifying which patients would be recommended for LAIs?

7. If yes to Question 6 above, please describe your workflow for identifying patients for LAIs.

8. Does your clinic utilize clozapine?

9. What (if any) are your barriers to using LAIs and/or clozapine?

### Part III. Medication Adherence Community Goals

1. What are your goals for joining this community?

2. If asked to choose a population to focus on, please describe the population you identify, the reason and the unique challenges that this population faces.

3. Please share your current processes for identifying and tracking medication adherence across your patient population at your organization.

4. What EHR software are you using? How does your EHR support your medication adherence work?

5. Please identify the lead for this project and who the core team would be (recommended 2-4 people total):

### Part IV. Key Dates

**Application Deadline:** Friday, March 27th, 2020, 11:59pm ET  
**Notification of Selection Status:** By Friday, April 3rd, 2020  
**Webinar #1 (Orientation and Kickoff):** Thursday, April 9th, from 2:00-3:00pm E.T. -- subject to change

Thank you for taking the time to apply for the Medication Adherence Learning Community.