IPLARC Monthly Teams
Webinar: Wave 1
New Hire and Ongoing Education

September 16, 2019
1:00 – 2:00 PM
Introductions

• Please enter for yourself and all those in the room with you viewing the webinar into the chat box your:
  • Name
  • Role
  • Institution
• If you are only on the phone line, please be sure to let us know so we can note your attendance.
Tips for Accessing WebEx

• You must manually add the meeting to your calendar

• WebEx is currently unable to add the meeting to your calendar if you are accepting the meeting on a mobile device

Add to calendar by clicking either of these options

Join from a video system or application
Dial 800846062@northwestern.webex.com
You can also dial 173.243.2.68 and enter your meeting number.

Join by phone
+1-415-655-0002 US Toll
Global call-in numbers

Can’t join the meeting?
Call Overview

• Annual Conference
• Review of Data/Upcoming Team Talks Schedule
• New Hire and Ongoing Education
• Team Talk: UI Health
• Team Talk: Stroger Hospital
• Round Robin
• Next Steps
7TH ANNUAL CONFERENCE
Calling all physicians, nurse midwives, APNs, NPs, RNs, quality leaders, administrators, payers, public health professionals, and all others interested in perinatal health!

You’re invited!

November 4, 2019
Check-in: 7-8am
Program: 8am-5:15pm

Westin Lombard
Yorktown Center,
Lombard, IL

7th Annual Conference

Join us to learn strategies from national and state leaders to finish strong in statewide efforts to improve outcomes for Mothers & Newborns affected by Opioids, increase access to Immediate Postpartum LARC, and implement maternal health safety checks through Improving Postpartum Access to Care.

We’ll also prepare for our 2020 initiatives as we hear other state’s success stories in Promoting Vaginal Birth and Antibiotic Stewardship, and look ahead to our future work in Birth Equity with insights from national leaders and personal stories.

Visit ilpqc.org for more information

Illinois Perinatal Quality Collaborative
633 N. St. Clair, 20th Floor, Chicago, IL 60611

This activity has been submitted to the Ohio Nurses Association for approval to award contact hours. The Ohio Nurses Association is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation. (OBN-001-91)
Annual Conference
OB Speakers

• “Improving Care Improves Outcomes for Pregnant and Postpartum Women with Opioid Use Disorder” Dr. Mishka Terplan (VCU/AIM)

• “Lessons Learned from CMQCC: Promoting Vaginal Birth and Birth Equity Initiatives” Dr. Elliott Main (CMQCC)

• “And Then She Was Gone” Charles Johnson (4Kira4Moms)

• “Incorporating and Tracking Health Care Inequities in Quality Improvement” Dr. Allison Bryant (Massachusetts General)
Registration Open!

Register TODAY for the ILPQC 7th Annual Conference

www.ilpqc.eventbrite.com
Sponsorship Opportunity for Health Systems

• For the second year, we are offering a $1000 sponsorship opportunity for local health systems:
  
  — **PROMOTION OPPORTUNITIES**
    • Company logo and hyperlink on brochure, signage, and communications
  
  — **EVENT DAY BENEFITS**
    • Free registration for up to 2 attendees
    • Exclusive opportunity to host a booth or display area to promote your hospital in the lobby near conference registration

Is this something your hospital system would be interested in taking advantage of?
Reach out to danielle.young@ilpqc.org
**TO BE AWARDED AT THE 7TH ILPQC ANNUAL CONFERENCE**

**QUALITY IMPROVEMENT RECOGNITION AWARDS**

ILPQC IMMEDIATE POSTPARTUM LARC WAVE 1 & WAVE 2

<table>
<thead>
<tr>
<th>IPLARC Wave 1</th>
<th>IPLARC Wave 1</th>
<th>IPLARC Wave 2</th>
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<tbody>
<tr>
<td><strong>QI CHAMPION</strong></td>
<td><strong>QI LEADER</strong></td>
<td><strong>QI RECOGNITION</strong></td>
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<tr>
<td>✓ All Data Submitted* +</td>
<td>✓ All Data Submitted* +</td>
<td>✓ All Data Submitted*</td>
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<tr>
<td>✓ Sustainability Plan Submitted +</td>
<td>✓ Sustainability Plan Submitted +</td>
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<tr>
<td>✓ Green on 7 Key Opportunities** +</td>
<td>✓ Green on 7 Key Opportunities** +</td>
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<tr>
<td>✓ 80% on comprehensive contraceptive counseling***</td>
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<td><strong>By September 2019</strong></td>
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*All Data Submitted through September 2019 by October 15

**At least one month in Q3 2019**
Annual OB Teams Survey

• OB Teams Survey
  – Please coordinate with your colleagues working across initiatives to have one person submit the survey
  – If you need the email resent to you, please email info@ilpqc.org

• Access the survey here: https://redcap.healthlnk.org/surveys/?s=7CJ9DHF34X

• Due to ILPQC on October 4
Call for Abstracts for AC Poster Session

• All hospital teams are asked to submit an abstract on complete or in progress quality improvement work

• Abstracts submitted by **Oct. 1**, will be reviewed for awards:
  – Top abstract(s) in each submission category
    • Obstetric/Neonatal QI stories
      – Two abstracts will receive special recognition for Best Use of Data & Best Project Implementation
    • Patient Family Engagement
    • Level I/Level II Hospitals

• Awarded abstracts will have a prize designation displayed on their poster & announced at the conference

• Late breaking abstracts (not eligible for awards) are due Oct 15

• Submit: [https://redcap.healthlnk.org/surveys/?s=R4LJ4XKPFY](https://redcap.healthlnk.org/surveys/?s=R4LJ4XKPFY)
Call for Abstracts for AC Poster Session

- Your abstract briefly describes your QI work and will be the foundation for a poster that your team creates to display and share at the ILPQC 7th Annual Conference Poster Session
- Please format your abstract using the following sections (no more than 300 words):
  - Problem
  - Project Implementation
  - Results
  - Conclusions
- More information / Submit your abstract here
- Looking for a poster template? We’ve got one available here!
Poster Session and Abstracts Questions?

• Do you have questions or would like some input for your 2019 Annual Conference Abstract/Poster?

• Join us for a information call on **Wednesday, September 26th** at **12:00pm-1:00pm**; 1-888-240-2560
  access code: 464 461 532

Expert abstract reviewers and past awardees will be sharing their insights and answering your questions!
REVIEW OF DATA/UPCOMING TEAM TALKS
## Aims and Measures

### Overall Initiative Aim

Within 9 months of initiative start, ≥75% of participating hospitals will be providing immediate postpartum LARCs.

### Structure Measures

- IT/EMR systems that allow for documentation of IPLARC placement for tracking, and documentation
- Coding / billing strategies in place for reimbursement for IPLARC
- IPLARC devices stocked in the inpatient pharmacy
- IPLARC protocols in place for labor and delivery and postpartum units
- Implemented standardized education materials and counseling protocols* for patients during delivery admission regarding contraceptive options including IPLARC
- Communicated launch of IPLARC availability during delivery admission with affiliated prenatal care site and provided sites with provider/staff and patient education materials for contraceptive options counseling, including IPLARC

### Process Measure

Educated all participating providers/nurses on benefits of IPLARC, protocols, counseling & IPLARC placement

### Outcome Measure, among participating hospitals

Provide and document comprehensive contraceptive counseling, including IPLARC, during prenatal care and delivery admission

By increasing access to IPLARC, increase in utilization of IPLARC
# IPLARC Data Entry Status

<table>
<thead>
<tr>
<th>Month</th>
<th># Teams Entering Data</th>
</tr>
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<tbody>
<tr>
<td>April – December 2018</td>
<td>16</td>
</tr>
<tr>
<td>January 2019</td>
<td>15</td>
</tr>
<tr>
<td>February 2019</td>
<td>14</td>
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<tr>
<td>March 2019</td>
<td>14</td>
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<td>April 2019</td>
<td>10</td>
</tr>
<tr>
<td>May 2019</td>
<td>10</td>
</tr>
<tr>
<td>June 2019</td>
<td>8</td>
</tr>
<tr>
<td>July 2019</td>
<td>7</td>
</tr>
</tbody>
</table>

Please continue to submit data through December 2019 to monitor the success of your implementation/sustainability efforts.
## IPLARC Sustainability Plan

- **Plan for your sustainability success!**
- **Access on ilpqc.org/IPLARC**
- **Submit to Danielle Young**
- **Reach out to Danielle or ILPQC with any questions**

### Compliance Monitoring

1. Comprehensive contraceptive counseling including IPLARC — prenatal (80% goal)
2. Comprehensive contraceptive counseling including IPLARC — delivery admission (80%)
3. Ensure patients who desire IPLARC receive it

**How will measures be collected?**

**Will you continue to track additional data internally?**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

**Team member(s) in charge of reporting in REDCap:**

**How often will your QI team meet to review hospital data reports via REDCap and develop and implement PDSA cycles if compliance benchmarks on measures are not achieved?**

<table>
<thead>
<tr>
<th></th>
<th>Weekly</th>
<th>Monthly</th>
<th>Quarterly</th>
<th>Other</th>
</tr>
</thead>
</table>

### New Hire Education for all new hires

**What education tool(s) will you use for new hires?**

- Training (train-the-trainer model)
- ILPQC Grand Rounds Slide Set
- ILPQC IPLARC Toolkit Binder
- Other: ____________________________

**How will you incorporate Immediate Postpartum LARC education including comprehensive contraception counseling that includes IPLARC and IPLARC placement for providers and IPLARC counseling, protocols and process flow for all nurses into new hire training/onboarding?**

### Ongoing Education for all providers and nurses

**What education tool(s) will you use for ongoing education for providers and nurses?**

- Protocols
- Grand Rounds
- ACOG District II online modules
- Mama-U postpartum uterus model
- Other: ____________________________

**How will you incorporate IPLARC education into ongoing provider/staff education including comprehensive contraception counseling that includes IPLARC, IPLARC placement for providers, and IPLARC counseling, protocols and process flow for all nurses?**

### Monitoring Billing/Reimbursement

**What is your system for monitoring payment of IPLARC claims?**

**If you do have an issue with a Medicaid/MCO claim, how will you troubleshoot the issue?**

- Report the issue through the Medicaid portal
- Reach out to ILPQC
- ILPQC Billing/Coding Checklist

**What is your timeline to amend private payer contracts to include inpatient LARC reimbursement?**

**Nursing Champion(s):________________________**  **Provider Champion(s):________________________**

**Drafted Date:________**  **Quarterly Review Dates:________**

**Hospital Name:________**
Sustainability Plans Received

- Don’t forget! Submit your sustainability plan by September 30 to be considered for an award for the Annual Conference!

<table>
<thead>
<tr>
<th>Team</th>
<th>Sustainability Plan Received</th>
<th>Team</th>
<th>Sustainability Plan Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advocate Christ Medical Center</td>
<td></td>
<td>Northwestern Memorial Hospital</td>
<td>▪</td>
</tr>
<tr>
<td>Advocate Illinois Masonic Medical Center</td>
<td>▪</td>
<td>Norwegian American</td>
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<tr>
<td>Advocate Lutheran General</td>
<td>▪</td>
<td>Stroger Hospital</td>
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<td>Carle Foundation Hospital</td>
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<td>Swedish Covenant</td>
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<tr>
<td>Memorial Hospital of Carbondale</td>
<td>▪</td>
<td>UI Health</td>
<td>▪</td>
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<tr>
<td>Memorial Medical Center</td>
<td>▪</td>
<td>University of Chicago</td>
<td></td>
</tr>
<tr>
<td>NorthShore University HealthSystem</td>
<td></td>
<td>Vista Medical Center East</td>
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</tr>
</tbody>
</table>
Comprehensive Contraceptive Counseling

Percent of Wave 1 Hospital Charts with Contraceptive Counseling, including IPLARC, April 2018-July 2019
IPLARC Sustainability Data Form

- If your team is **GREEN** for all Key Opportunities for Improvement, you can complete the shortened data form!
- Continue to monitor comprehensive contraceptive counseling!

### ILPQC IPLARC Sustainability Data Collection Form

<table>
<thead>
<tr>
<th>Question</th>
<th>Answers/Format</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. For which month are you reporting? (month)</td>
<td>Month/year: ____________________</td>
</tr>
<tr>
<td>Structure Measures</td>
<td></td>
</tr>
<tr>
<td>2. Has your hospital billed for the devices you placed?</td>
<td>1. Yes</td>
</tr>
<tr>
<td></td>
<td>2. No</td>
</tr>
<tr>
<td></td>
<td>3. Not yet placed any devices</td>
</tr>
<tr>
<td>3. Have you received reimbursement for the devices that you placed? (check all that apply)</td>
<td>1. Yes, traditional Medicaid/Medicaid FFS</td>
</tr>
<tr>
<td></td>
<td>2. Yes, from MCO(s)</td>
</tr>
<tr>
<td></td>
<td>a. Yes, from at least 1 Medicaid MCO</td>
</tr>
<tr>
<td></td>
<td>b. Yes, from all Medicaid MCOs with whom the hospital contracts</td>
</tr>
<tr>
<td></td>
<td>c. Yes, from all Medicaid MCOs, even those with whom the hospital does not contract</td>
</tr>
<tr>
<td></td>
<td>3. Yes, from private payer(s)</td>
</tr>
<tr>
<td></td>
<td>a. Yes, from at least 1 private payer</td>
</tr>
<tr>
<td></td>
<td>b. Yes, from all private payers with whom the hospital contracts</td>
</tr>
<tr>
<td></td>
<td>4. No</td>
</tr>
<tr>
<td></td>
<td>5. Not yet placed any devices</td>
</tr>
<tr>
<td></td>
<td>6. Waiting on reimbursement – claim neither approved or denied</td>
</tr>
<tr>
<td>Outcome Measures</td>
<td></td>
</tr>
<tr>
<td>4. Number of deliveries this month</td>
<td>Number: ____________________</td>
</tr>
<tr>
<td>5. Is your hospital routinely counseling, offering, and providing immediate postpartum LARCS either IUDs or Implants? (i.e., Is your system live?)</td>
<td>1. Yes</td>
</tr>
<tr>
<td></td>
<td>2. No</td>
</tr>
<tr>
<td>31a. If yes, please specify:</td>
<td>1. IUDs</td>
</tr>
<tr>
<td></td>
<td>2. Implants</td>
</tr>
<tr>
<td></td>
<td>3. Both</td>
</tr>
<tr>
<td>6. Number of immediate postpartum IUDs placed this month</td>
<td>Number: ____________________</td>
</tr>
<tr>
<td>7. Number of immediate postpartum implants placed this month</td>
<td>Number: ____________________</td>
</tr>
</tbody>
</table>
| 8. If your hospital is routinely counseling, offering and providing immediate postpartum LARCS, either IUD, implants or both, please, review a random sample of 10 charts for this month. Begin by systematically selecting 10 records. First, divide the total number of live births occurring at your facility in a given month by 10 and then select every n^th chart where n is the result of that division.  
Example 1: if your hospital has 102 births in a month, then divide 102 by 10=10.2 and you will select every 10th birth for that month.  
Example 2: if your hospital has 28 births in a month, then 28 divided by 10 is 2.8 and you will select every 2nd birth for that month. Review this random sample of charts and record the number of charts (0-10) with the information documented: | #____ How many patients out of 10 reviewed had contraceptive counseling, including IPLARC, documented in the medical record during prenatal care?  
#____ Of patients who did not have contraceptive counseling documented, how many did not have prenatal care?  
#____ Of patients who did not have contraceptive counseling documented, how many had prenatal care, but did not have a prenatal record?  
#____ How many patients out of 10 reviewed had contraceptive counseling, including IPLARC, documented in the medical record during delivery admission? |
| 9. Does your team have a completed sustainability plan shared with ILPQC (Info@ilpqc.org)? | 1. Yes                                                                         |
|                                                                          | 2. Not yet                                                                     |
Sustainability Data Form in REDCap

Click here when all your team’s 7 Key Opportunities for Improvement are IN PLACE!
## IPLARC Wave 1 Team Talk

### Schedule - CONFIRMED

<table>
<thead>
<tr>
<th>Month</th>
<th>Team 1</th>
<th>Team 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>July 15</td>
<td>NorthShore Evanston Hospital</td>
<td>Memorial Hospital of Carbondale</td>
</tr>
<tr>
<td>August 19</td>
<td>Advocate Christ Medical Center</td>
<td>Carle Foundation Hospital</td>
</tr>
<tr>
<td>September 16</td>
<td>UIC</td>
<td>Stroger</td>
</tr>
<tr>
<td>October 21</td>
<td>Advocate Lutheran General</td>
<td>University of Chicago</td>
</tr>
<tr>
<td>November 18</td>
<td>Northwestern Memorial</td>
<td>Norwegian American</td>
</tr>
<tr>
<td>December 16</td>
<td>Vista Medical Center</td>
<td>Swedish Covenant Hospital</td>
</tr>
</tbody>
</table>
ENSURING ALL PATIENTS RECEIVE DESIRED IPLARC
We’re LIVE what’s next?
IPLARC Sustainability Plan

1. Monitor and achieve goal >80% for comprehensive contraceptive counseling documentation, including IPLARC
   - All prenatal patients
   - L&D (for patient w/out documented counseling/plan)
2. Ensure patients who desire and are eligible for IPLARC receive it and get early postpartum f/u visit
3. Monitor IPLARC billing and reimbursement
4. Implement new hire and ongoing IPLARC education for providers / staff
## New Hire Education for all new hires

What education tool(s) will you use for new hires?

- [ ] Training (train-the-trainer model)
- [ ] ILPQC Grand Rounds Slide Set
- [ ] ILPQC IPLARC Toolkit Binder
- [ ] Other: ____________________________

How will you incorporate Immediate Postpartum LARC education including comprehensive contraception counseling that includes IPLARC and IPLARC placement for providers and IPLARC counseling, protocols and process flow for all nurses into new hire training/onboarding? ____________________________

## Ongoing Education for all providers and nurses

What education tool(s) will you use for ongoing education for providers and nurses?

- [ ] Protocols
- [ ] Grand Rounds
- [ ] ACOG District II online modules
- [ ] Mama-U postpartum uterus model
- [ ] Other: ____________________________

How will you incorporate IPLARC education into ongoing provider/staff education including comprehensive contraception counseling that includes IPLARC, IPLARC placement for providers, and IPLARC counseling, protocols and process flow for all nurses? ____________________________

- What education strategies have been effective for past initiatives?
- Is there anything unique about IPLARC to consider?
- How will you provide hands-on training?
Share strategies

- How are you working to educate providers/staff on the importance of comprehensive contraceptive counseling?
Reimbursement from Private Payers

- Connect with your hospital’s contracts executive to carve out addendums with private payers (for patients with HMO/PPO coverage)
- Ask for the contract to be amended either as an addendum or as a part of contract renegotiations (depending on when that is).
- Ask for this specific change to the contract: *Treat intrauterine devices and contraceptive implants as a carve out for hospital inpatient payment modeled like they do for implants or devices.*
Medicaid Managed Care Resources

• Has your team experienced an IPLARC claim denial? Submit your experience via [Medicaid Manage Care Claims Issues Survey](#) conducted by Illinois Collaboration on Youth.

• Remember – Medicaid MCOs are **required** to reimburse for IPLARC – all MCOs have confirmed they are compliant.

• If you are receiving denials let us **know-we can help!**
TEAM TALK: UI HEALTH
Wave 1 Sustainability
IP LARC
University of Illinois at Chicago
Compliance Monitoring

• Comprehensive contraceptive counseling including IPLARC – prenatal (80% goal)
  • Current: Contraceptive method choice built into EMR templates for prenatal care (will add to EPIC templates)
  • Plan: QI project with resident to monitor documentation/counseling

• Comprehensive contraceptive counseling including IPLARC – delivery admission (80% goal)
  • Plan: create H&P admission template with confirmation of contraceptive method

• Ensure patients who desire IPLARC receive it
  • Plan: Create a database of patients to monitor number of patients who desire IPLARC and how many receive it.
  • If did not receive, document reason
New Hire and Ongoing Education

• What is your current process for ongoing/new provider and staff education?
  • Updated IPP LARC Hospital Guidelines (4/2019)
  • Resident education:
    • Yearly 1hr teaching with incoming interns at beginning of academic year
    • Sim lab (MamaU models)
  • RN education:
    • Have held 2 in-services with RNs on L&D and Postpartum
    • Plan: quarterly in-service to maintain clinical and procedural knowledge

• What have you learned from other QI initiatives about ensuring adequate provider/nurse education and how can you apply those lessons to IPLARC?
  • Continual education
  • Multidisciplinary effort (know your champions!)
  • Streamline monitoring efforts
TEAM TALK: STROGER HOSPITAL
IPLARC Team Talk
John H. Stroger, Jr. Hospital of Cook County
Key Players

Dr. Fidel Abrego, Interim Chair, Department of Obstetrics & Gynecology
Dr. Ashlesha Patel, Division Chair, Family Planning Services
Dr. Mary Arlandson, IPLARC Provider Champion
Kelly Stempinski-Metoyer, MPH, Family Planning Administrator and IPLARC Lead
Jenna Green, Division of Family Planning Coordinator
Teresita Rescober, Nursing Champion
Omar LaBlanc, Perinatal Administrator
Antepartum
- Stroger Central Campus
  - Cicero
  - Logan Square
  - Englewood
  - Prieto
  - Near South
  - Sengstacke
  - Austin

Triage

Labor and Delivery

Postpartum Floor

Postpartum Appointment

Antepartum
- Stroger Central Campus
- ACHN Sites
  - Cicero
  - Logan Square
  - Englewood
  - Prieto
  - Near South
  - Sengstacke
  - Austin

Review options and check insurance
- Review alternative options; revisit at Postpartum Appointment

Referral to Title X Family Planning Clinic for postpartum visit

Sign consent, notate in EMR
- Sign device-specific consent.
- Ensure supplies are available

Routine labor management

Place implant prior to hospital discharge
- Desires Nexplanon
- Desires IUD
- Unable to receive PP LARC

Routine postpartum care

Provide alternative options; Potential for LARC placement at 6 week pp visit at any of these clinics:
- Cicero
- Englewood
- Logan Square
- Near South
- Prieto
- Sengstacke
- Stroger Family Planning
- Austin LARC coming soon!

Routine care

IUD string seen
IUD strings not seen

Refer for ultrasound/flat plate

Counsel all women on immediate postpartum LARC
- Declines immediate PP LARC

Insurance approved
- Insurance not approved

Commit to 6 weeks postpartum visit

Counsel all women on immediate postpartum LARC
- Declines immediate LARC
- Review alternative options; revisit at Postpartum Appointment
Status

• Progress:
  • LARC devices (Liletta, Paragard, and Nexplanon) are stocked for L&D/post-partum use—either in the pyxis or in the inpatient pharmacy
  • During monthly delivery audits, tracking contraceptive counseling and PPBC methods chosen before the patient leaves the hospital
  • Data is being entered into REDCap (April 2018-present)
Deliveries at Stroger

April 2018-August 2019

N=1,440
IPLARC Placements

IPLARC, April 2018-August 2019

- Nexplanon: 56% (164)
- Liletta: 34% (99)
- Paragard: 10% (31)

N= 294

Cook County Health
Compliance Monitoring

• Working to create comprehensive contraceptive counseling including IPLARC across all 8 prenatal care sites
• Cohesive documentation in EMR (OB and Family Medicine teams)
  • Ensure patients who desire IPLARC receive it
• EMR tracking of LARC devices ordered
• Monthly OB chart reviews
• Monthly OB Safety Meetings (multidisciplinary team- OB, Family Med, nursing, anesthesia, perinatal team, pharmacy)
Education

For ongoing support and new hires

• Working on policies/protocols
  • Will be available on the intranet and on the labor floor
• Top Tier Methods of Contraception Training events
  • Discuss all Top Tier Methods of Contraception
  • IPLARC training with mama-u post-partum models
  • Open to attendings, residents, APPs, nurses
• Grand Rounds for OB and Family Medicine teams
• ILPQC IPLARC Toolkit binder
Monitoring Billing/Reimbursement

• Identified Finance Champions to assist with billing/reimbursement
• Working to schedule regular meetings to track billing/reimbursement
Our Successes

• Improved access for patients
• Interdisciplinary team
• Committed providers and staff
• Data collection/review process
• Stocking devices was a smooth process with Pharmacy
• Making movement on billing and reimbursement
• Integration into a larger system-wide process
ROUND ROBIN – TEAMS
UPDATE ON PROGRESS
TOWARDS SUSTAINABILITY
Round Robin Guidelines

- How will your team integrate IPLARC education into New Hire and Ongoing Provider and Staff education?
- How will you incorporate comprehensive contraceptive counseling education into sustainability?
- How is your team progressing with amending contracts with private payers to include reimbursement for IPLARC – this is essential for equitable access!
- Have you taken advantage of one-on-one QI support?
UPCOMING EVENTS AND NEXT STEPS
IPLARC Sustainability

Don’t forget to email your team’s completed Sustainability Plan to info@ilpqc.org!

- Monitor & Achieve Goal >80% for Comprehensive Contraception Counseling Documentation
- Ensure patients who desire & eligible for IPLARC receive it and get early postpartum follow up visit
- Monitor IPLARC billing and reimbursement
- Implement new hire and ongoing IPLARC education for providers / staff
ACOG IPLARC Training

• **Confirmed:** Friday, October 25, Mt. Vernon Visitors Center, Mt. Vernon, IL, 8:30am-10:30am and 11am-1pm

• Two sessions offered! Combined provider/nurse, lactation consultant training - $10 registration fee

• Training will cover:
  – Capacity building
  – Contraceptive counseling
  – Hands-on insertion training

• Registration is open! [https://ilpqc.eventbrite.com](https://ilpqc.eventbrite.com)
Next Steps

• Submit outstanding data for through September 2019 to be considered for an award at the 7th Annual Conference on Nov 4.
• If all key opportunities for improvement are not **GREEN**, reach out to Danielle and Autumn to take advantage of QI Support
• Complete the IPLARC sustainability plan for your team and share with your PNA and Danielle or info@ilpqc.org
• Continue to work on improving comprehensive contraceptive counseling in prenatal and on L&D
• **Register for the Annual Conference**
• **Submit an abstract** for the Annual Conference Poster Session by Oct 1
• **Complete the Annual OB Teams Survey** by October 4
Contact

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