



10 Steps to Getting Started with the ILPQC Immediate Postpartum Long-Acting Reversible Contraception (IPLARC) Initiative

1. Schedule regular, at least monthly, **team meetings**.
2. Review the **ILPQC Data Collection Form** with your team and discuss opportunities for data collection.
3. Complete the **IPLARC Teams Survey and identify team goals**. Please work together as a team to complete the survey. Choose one designee to fill out the Baseline Survey. This survey will help teams understand current barriers and opportunities for getting started with IPLARC. There are no right answers! It's ok to start with lots of opportunities for improvement!
4. Create a draft **30-60-90 day plan**. This plan helps your team decide where to start and identify what you want to accomplish in the first 3 months. Call it the "where should we start" plan.
5. Diagram your **process flow**. This diagram helps your team describe your hospital's process for providing access to immediate postpartum LARC or immediate post-discharge LARC (if you do not provide contraception in the hospital). This should be a work in process diagram to help you identify key opportunities for improvement. Involve everyone in this process to help your team understand who is doing each activity, when, where, why, and how.
6. Review your final process flow diagram with your team and **identify opportunities for improvement**. Reference the **Key Driver Diagram** to identify possible interventions. Focus first on establishing and testing billing codes and processes for reimbursement, modifying IT systems to documenting the IPLARC process, and stocking IPLARC and adding the devices to the formulary. For hospitals working on strategies for outpatient immediate post-discharge LARC, work on setting up a robust referral system for postpartum IUD insertion or Nexplanon placement in an outpatient setting immediately post-discharge. All teams should focus on changes to the OB process flow, protocols, provider/nurse training, and standardized patient education.
 - Identify key champions in all pertinent departments
 - Establish and test billing codes; test processes for timely reimbursement
 - Add LARC devices to formulary and identify appropriate storage location including inpatient pharmacy/on labor and delivery
 - Modify IT/EMR systems to document acquisition, stocking, ordering, counseling, consent, placement, billing, and reimbursement for postpartum LARCs (dot phrases, consent forms, order set).
 - Implement system changes to OB care process flow
 - Implement IPLARC protocol on labor and delivery/mother baby
 - Educate clinicians, nurses, pharmacy, and lactation consultants on IPLARC evidence, contraceptive counseling and placement of IPLARC.
 - Communicate with outpatient prenatal settings on launch of IPLARC availability during delivery admission. Standardize patient education on all contraceptive options, including IPLARC, at affiliated prenatal care sites and in labor and delivery/postpartum.
7. Review the ILPQC Immediate Postpartum LARC **Toolkit Binder** for nationally vetted resources to support your improvement goals.

8. Plan your first **PDSA cycle** with your team to address your 30-60-90 day plan. These small tests of change help your hospital test process/system changes to reach initiative goals. Please see attached worksheet for more details on planning your first small test of change. Focus on IPLARC key elements for improvement, start small and test a change/ improvement with one nurse, one provider, one patient or for one day or one week. Review results, make improvements and implement if successful, repeat cycle if improvements needed.

9. Develop your teams 30, 60, and 90 day **implementation plan** for key improvement areas. Consider focusing on documentation, billing/coding strategies, stocking LARC. Think about how you will implement standard staff training about IPLARC, provider training on IPLARC insertion and how you will communicate this initiative with affiliated prenatal care sites/incorporate patient education. Every hospital is different and is starting at a different place. Your readiness survey should help direct your team on where you may want to start. Below are the **6 key opportunities for improvement** areas we will be working on together across the IPLARC initiative.
 - a. Establish and test IPLARC billing codes and test processes for timely reimbursement through collaboration with Medicaid and private payers
 - b. Add LARC devices to hospital formulary and stock LARC in inpatient pharmacy/ on labor and delivery through coordination with pharmacy, purchasing, and hospital leadership/administration.
 - c. Modify IT/EMR for documentation of acquisition, stocking, ordering, comprehensive contraceptive counseling (including IPLARC), consent, IPLARC placement, and billing.
 - d. Implement IPLARC protocol on labor and delivery/mother baby through adaptation of example protocols, process flow changes, consultation of current evidence, and collaboration with hospital clinical leaders and experts.
 - e. Educate all staff on IPLARC protocols and providers on counseling and placement of IPLARC through statewide hands-on trainings, web-based training videos, and other training opportunities.
 - f. Standardize patient education on all contraceptive options including IPLARC through distribution of patient education materials to affiliated prenatal care sites and on labor and delivery/mother baby units, and comprehensive contraception counseling that includes IPLARC in the antepartum/intrapartum/postpartum period.
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10. Reach out to ILPQC for help (info@ilpqc.org) and celebrate your successes with your team early and often.