13 Practice Changes for IPLARC Success

Pre-Implementation Phase

1. Assure early multidisciplinary support by educating and identifying key champions in all pertinent departments for your IPLARC QI team.

2. Establish scheduled meetings for your team at least monthly, assuring that all necessary departments are represented, develop 30/60/90 day plan, establish timeline to accomplish key steps.

3. Establish and test billing codes and processes to assure adequate and timely reimbursement (see toolkit).

4. Expand pharmacy/inpatient inventory capacity and device distribution to assure timely placement on labor and delivery and postpartum units.

5. Educate clinicians, nurses, pharmacy, and lactation consultants about benefits and clinical recommendations related to IPLARCs (see toolkit for e-modules, slide decks, materials).

6. Assure that all appropriate IT/EMR systems are modified to document acquisition, stocking, ordering, placement, counseling, consent, billing and reimbursement for IPLARCs (dot phrases to document counseling and placement, consent forms, order set, billing framework see toolkit examples).

7. Modify L&D, OB OR, postpartum, and clinic work flows (process flow document) to include counseling, consent, and placement of IPLARC (see toolkit for example).

Implementation Phase

8. Establish consent processes for IPLARC that allows for transfer of consent from prenatal clinic as well as obtaining inpatient consent (see toolkit for examples).

9. Develop culturally sensitive educational materials and shared decision making counseling practices to educate patients about the availability of IPLARC as a contraception option (outpatient prenatal care locations, L&D, postpartum) (see toolkit for examples).

10. Educate clinicians, community partners, and nurses on informed consent and shared decision making related to IPLARC as well as IPLARC placement and documentation (see toolkit for ILPQC/ACOG training, e-modules, slide decks, education materials).

11. Standardize system/process flow to assure all patients receive comprehensive contraception choice counseling including IPLARC in affiliated prenatal care sites and during delivery admission.

12. Communicate launch date of hospital’s IPLARC capability to all providers, nurses and affiliated prenatal care sites: communicate protocols, documentation and billing strategies.

13. Track and review IPLARC data, collected monthly through ILPQC REDcap data system with real-time data reports, share data with providers and nurses and review standardized counseling for prenatal sites and labor and delivery and IPLARC uptake, to evaluate program success and sustainability.

Adapted from Florida Perinatal Quality Collaborative