

ADDRESS:

SIZE:

PHONE NUMBER:

PROJECT TITLE:

BARRON COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES



Barron County Department of Health and Human LOCAL HEALTH DEPARTMENT NAME:

Services, Public Health Programs

335 E Monroe Avenue, Room 335

Barron, Wisconsin 54001

715-537-5691

Small

45,000 POPULATION SERVED:

> Preventing unintended secondary pregnancies in women receiving Women, Infants and Children

(WIC) Services

PLAN

Identify an opportunity and Plan for Improvement

1. Getting Started

Barron County Public Health (BCPH) sought to increase access to family planning supplies and information for pregnant and postpartum women receiving WIC services in an effort to decrease the percentage of women becoming pregnant less than 16 months from their last pregnancy.

This afforded the opportunity to train staff in Quality Improvement and implement a QI project relating to a community health outcome.

2. Assemble the Team

Kelli Engen, Health Officer Laura Sauve, PHN, Prevention Specialist Nancy Drake, PHN, Reproductive Health Program staff

3. Examine the Current Approach

- Team members met with WIC, Prenatal Care Coordination (PNCC) and Reproductive Health Program staff. The fishbone model was used to examine the people and processes influencing the high number of women in the Barron County WIC project (39%) becoming pregnant within 16 months of a previous pregnancy.
- Women receive prenatal and postpartum care through three medical providers in Barron County. It wasn't known when women were getting postpartum contraception information and supplies, and if they received information on the value of birth spacing. A survey was developed to interview women face to face at WIC clinics, but there was little interest in completing the survey. No conclusions could be reached about individual birth spacing practices.

- Women enrolled in PNCC through BCPH received a Dual Protection Kit from their assigned PH nurse in the third trimester, a service not available to all WIC clients.
- It was thought that local providers do not provide EC in advance of need. A Survey Monkey questionnaire sent to area providers with 29 responses. While most confirmed that they discuss birth spacing and contraception, none provided EC in advance of need.

4. Identify Potential Solutions

- Encourage providers to discuss birth spacing with all pregnant patients.
- Encourage providers to prescribe emergency contraception in advance of need for all women of child bearing age.
- Make Dual Protection Kits available for all WIC clients with information on birth spacing and contraception.
- Develop a consistent approach for dispensing Dual Protection Kits with staff training and kits ready to dispense.

5. Develop an Improvement Theory

Because the outcome of this project cannot be measured for at least 16 months, efforts were focused on two areas.

- Giving providers more information on EC in Advance of Need would increase the likelihood that they would prescribe it for their patients.
- Clients with easy access to Dual Protection in advance of need will be more likely to use EC.

DO

Test the Theory for Improvement

6. Test the Theory

- A webinar was created for local medical providers written by PH staff with input from the BCPH medical advisor, who provided voice over for the production.
- The webinar detailed the problem of high secondary pregnancy with short birth intervals, the value of birth spacing, postpartum contraception and EC. The webinar was sent to the same providers who received the previous survey.
- Dual protection kits were developed for WIC clients with specific contraception information for the postpartum period. Posters in the WIC offices and lab advertise the availability of the kits.
- Simple tracking and billing forms were created to document kits dispensed through WIC.
- Staff was trained in dispensing kits and a new policy and procedure developed.

CHECK

Use Data to Study Results of the Test

7. Check the Results

- Women are asking for the kits and 12 kits have been dispensed in the first month available.
- All providers who watched the webinar and returned the post survey reported they either "already do" or are "much more likely to" implement the emerging practices outlined in the webinar.

ACT

Standardize the Improvement and Establish Future Plans

8. Standardize the Improvement or Develop New Theory

- Women are receptive to reproductive health information at WIC and will accept dual protection kits when offered.
- Providers are stating they are willing to implement changes to their practice.

9. Establish Future Plans

 Staff will monitor the rate of women conceiving less than 16 month postpartum using WIC data every 4 months. Results will be discussed in

- staff meeting and shared with the medical community.
- Distribution of kits will continue with modification to the kit or procedure based on client input.
- The 2013-2015 BCPH Strategic Plan calls for use of Quality Improvement processes throughout the program.