



## ACCESS LARC: Pre-Implementation Phase Monthly Data Collection Form

Process Measures	
Cumulative percentage of <b>OB physicians and midwives</b> that have completed an education program on the importance of offering immediate postpartum LARC placement since the initiative started	% _____
Cumulative percentage of <b>nurses</b> that have completed an education program on the importance of offering immediate postpartum LARC placement since the initiative started	% _____
Structural Measures	
Who is an active part of the Access LARC initiative team in your hospital this month? Check all that apply	<input type="checkbox"/> Administration <input type="checkbox"/> Lactation consultant <input type="checkbox"/> MCO Liaison <input type="checkbox"/> OB provider <input type="checkbox"/> Pharmacy <input type="checkbox"/> All of the above <input type="checkbox"/> Billing <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> Nursing
Select the LARC devices that have been added to the hospital formulary	<input type="radio"/> IUD <input type="radio"/> Implant <input type="radio"/> Both <input type="radio"/> None
Select the LARC devices and ancillary equipment available at all delivery sites and/or on the postpartum unit	<input type="radio"/> IUD <input type="radio"/> Implant <input type="radio"/> Both <input type="radio"/> None
Select the LARC devices for which policies, procedures, guidelines have been modified or created to support immediate postpartum placement	<input type="radio"/> IUD <input type="radio"/> Implant <input type="radio"/> Both <input type="radio"/> None
Select the departments that have modified or created policies, procedures, guidelines to support immediate postpartum placement of <b>IUDs</b>	<input type="checkbox"/> L & D <input type="checkbox"/> Billing <input type="checkbox"/> Mother/Baby unit <input type="checkbox"/> All of the above <input type="checkbox"/> OB OR <input type="checkbox"/> None of the above <input type="checkbox"/> Pharmacy
Select the departments that have modified or created policies, procedures, guidelines to support immediate postpartum placement of <b>Implants</b>	<input type="checkbox"/> L & D <input type="checkbox"/> Billing <input type="checkbox"/> Mother/Baby unit <input type="checkbox"/> All of the above <input type="checkbox"/> OB OR <input type="checkbox"/> None of the above <input type="checkbox"/> Pharmacy
Select the LARC devices for which billing codes have been established and tested	<input type="radio"/> IUD <input type="radio"/> Implant <input type="radio"/> Both <input type="radio"/> None
Select the devices for which IT revisions have been completed to assure adequate data collection, tracking and documentation	<input type="radio"/> IUD <input type="radio"/> Implant <input type="radio"/> Both <input type="radio"/> None
Select the IT revisions that have been completed to assure adequate data collection, tracking and documentation for <b>IUDs</b>	<input type="checkbox"/> EHR for consent <input type="checkbox"/> Billing system <input type="checkbox"/> EHR for contraceptive choice counseling <input type="checkbox"/> Tracking tools <input type="checkbox"/> Order sets <input type="checkbox"/> All of the above <input type="checkbox"/> Pharmacy system <input type="checkbox"/> None of the above
Select the IT revisions that have been completed to assure adequate data collection, tracking and documentation for <b>Implants</b>	<input type="checkbox"/> EHR for consent <input type="checkbox"/> Billing system <input type="checkbox"/> EHR for contraceptive choice counseling <input type="checkbox"/> Tracking tools <input type="checkbox"/> Order sets <input type="checkbox"/> All of the above <input type="checkbox"/> Pharmacy system <input type="checkbox"/> None of the above