## A Quality Improvement Project Utilizing an Interactive Decision Tool to Improve Contraceptive Counseling in Primary Care

## Abstract

Nature and scope of the project: Development and utilization of interactive decision tools may be able to assist in addressing barriers and improving contraceptive counseling rates within primary care settings. This quality improvement (QI) project aimed to give primary care providers (PCPs) an opportunity to review the *My Birth Control* interactive decision tool and evaluate its feasibility as an intervention to improve contraceptive counseling rates compared to their current clinical practices.

**Synthesis and analysis of supporting literature:** Contraceptive counseling stands to have a powerful influence on a woman's ability to evaluate options, compare methods, and achieve her reproductive goals. The use of interactive tools to initiate patient-provider contraceptive conversations has shown positive outcomes in counseling rates, method adherence, and satisfaction.

**Project implementation:** Participants in this QI project included PCPs who provided contraceptive counseling services. PCPs were provided a packet containing a pre-tool survey, an informational hand-out on the interactive tool, and a post-tool survey to complete and return to the primary investigator.

**Evaluation criteria:** Pre-tool surveys were given to participants to determine barriers, occurrence rates, and any current policies of contraceptive counseling in their practice. Post-tool surveys were given to evaluate the PCP's opinion on the interactive tool's feasibility to improving counseling if incorporated into PCP settings and the potential to improve counseling rates, method adherence, and patient satisfaction.

Out of 12 surveys handed out, 9 were returned. Thirty-three percent of PCP participants would consider the *My Birth Control* tool as a 'highly feasible' intervention to improve rates of contraceptive counseling compared to their current practice. However, 100% of PCPs expressed that the tool would be an effective intervention if patients had access to it before their appointments for review.

**Recommendations:** Development of a future QI project utilizing the *My Birth Control* tool among reproductive-age women to evaluate the tool's impact on contraceptive knowledge, method selection, and adherence rates.