



equip
Education Experience Excellence

Safe Prescribing and monitoring of Oral Contraception

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Background

- Commencing and monitoring those on Oral contraception is a daily task in general practice.
- It is not suitable for every patient requesting it.
- The Faculty of Sexual and reproductive healthcare (FSRH) and Clinical guideline UK Medical Eligibility Criteria for Contraceptive use (UKMEC) have recently updated guidelines. Including:
 - ✓ Documenting BP, BMI, Smoking status
 - ✓ Annual review
- Baseline with our practice showed up to date BP (88%) BMI (85%), Smoking status (90%)
- Opportunity for improvement recognised

Aim

- To improve the recording of a key data set to enable safe prescribing of COCP and POP.
- Improve recording of the above key data set to 95% each within 6 months.
- Enables 1 yearly prescriptions being issued
- Aids in identification of co-morbidities/Risk factors, Reduces risk of complications occurring in high risk patients
- Promote the practice of opportunistic pre-conception advice to all woman of child bearing age

Improvement Methodology

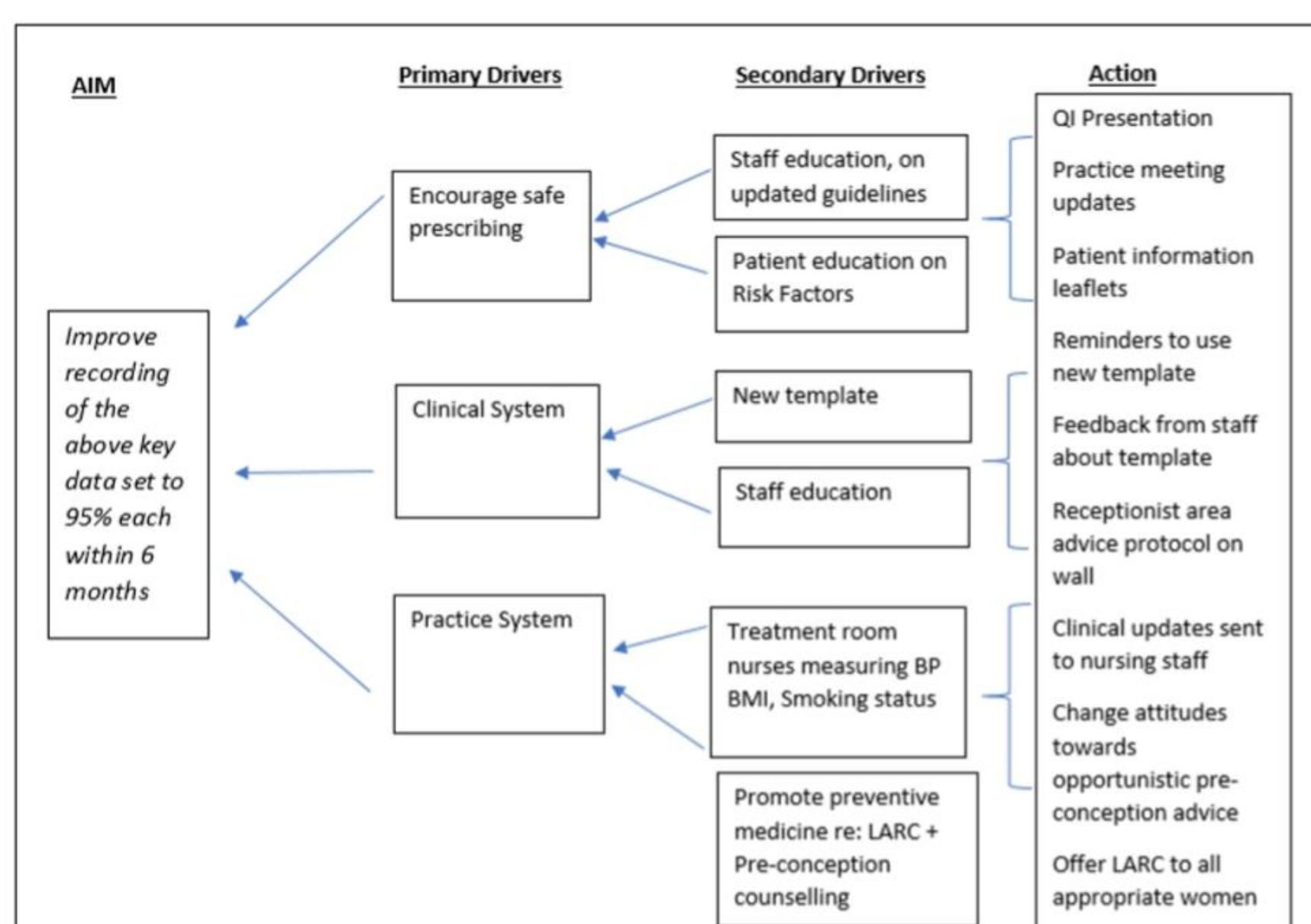


Introduction of a Template on EMIS Web 'Abbeycourt Oral Contraception', incorporating:

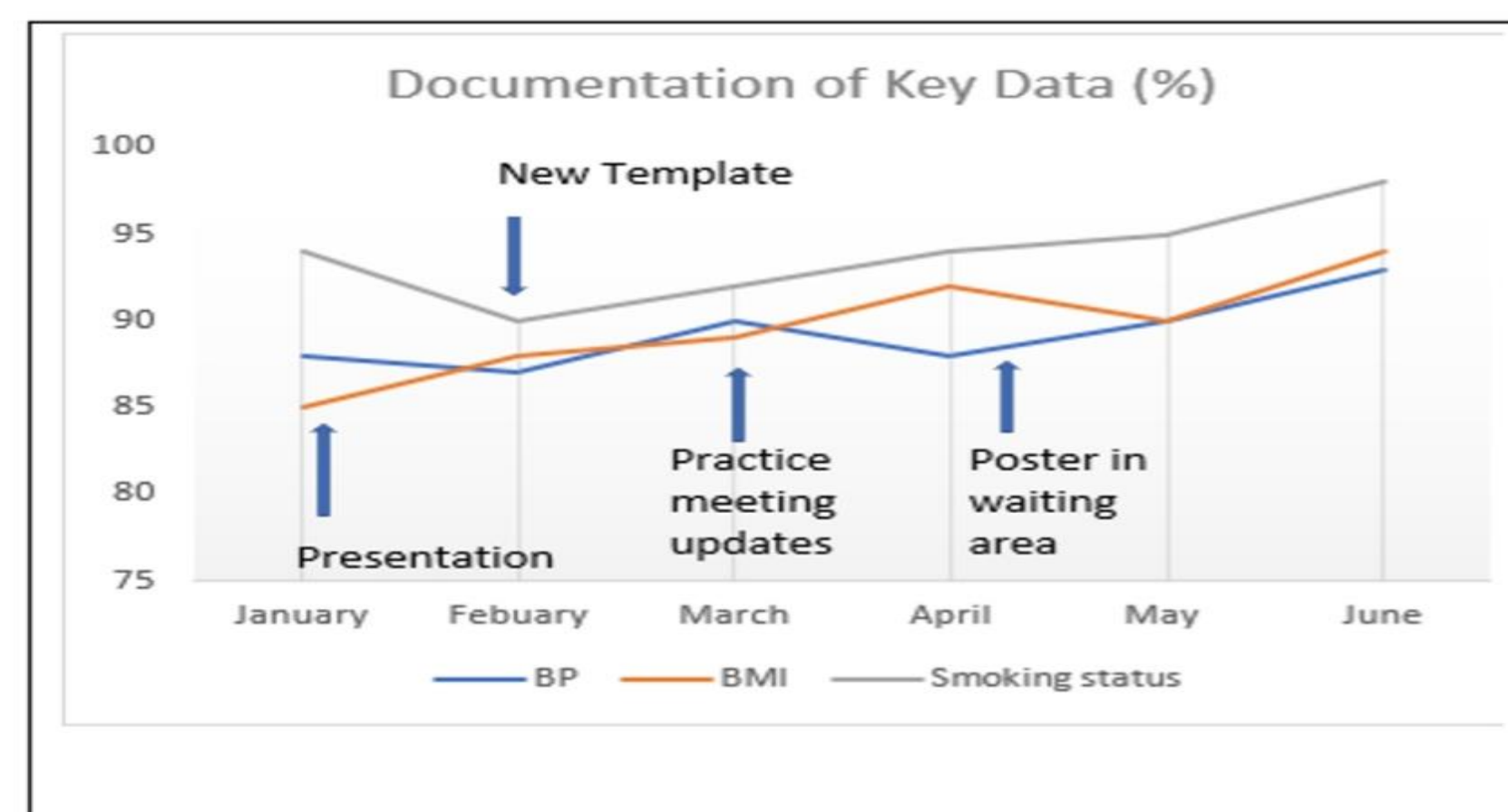
- ✓ more user friendly than current template
- ✓ Yes/No List of important risk factors
- ✓ Section on Pre-contraception advice

Data collection monthly

Education: Presentation, Weekly practice meeting updates, Posters in waiting room



Results



Measures:

Outcome: Safe prescribing and effective recording of information for COCP/POP

Process: Percentage of documentation of BP, BMI, Smoking status in women on COCP, POP at monthly intervals

Balancing : Verbal feedback from staff regarding template: potentially more time consuming, increased workload for reception staff giving advice and nurse treatment room time.

Outcome:

PDSA cycle 1: Jan-March 2019

Plan/Do: QI Presentation Jan 2019 and Implementation of template Feb 2019

Study: 3 key data recorded at baseline and each at monthly intervals

Act: Encouragement/reminders of template use.

PDSA Cycle 2: April-June 2019

Plan/Do: Practice meeting updates on progress.

Reminders sent out to all staff members about Template. Poster in waiting room.

Study: 3 key data recorded at monthly intervals

Act: Gather feedback from staff, continue to encourage template use,

Next Steps

Continue educational updates at practise meetings
Attach Patient information leaflets for printing onto template.

Focus on offering long acting reversible contraception options and Pre conception counselling