

## Stock a Broad Range of Contraceptive Methods

### Contraceptive Access Change Package: Best Practice 1

<h3>How to Use This Guide</h3>	<p>This guide is designed to support facilitation of an interactive learning session on how to <b>Stock a Broad Range of Contraceptive Methods: Best Practice 1</b> from the Contraceptive Access Change Package, whose purpose is to drive improvement on the <a href="#">contraceptive care performance measures</a>.</p> <p>Facilitators should feel free to adapt and revise this guide. Facilitators may choose to:</p> <ul style="list-style-type: none"> <li>» Convene staff from one or more clinics for a standing meeting (e.g., monthly) to discuss each Best Practice (in order or as needed) from the Contraceptive Access Change Package. <i>(See other Best Practice discussion guides.)</i></li> <li>» Convene a one-time meeting with clinic staff about this topic.</li> </ul>
<h3>Learning Objectives</h3>	<p>By the end of the discussion, participants should be able to:</p> <ul style="list-style-type: none"> <li>» <b>Describe the importance of stocking a broad range of contraceptive methods, including provider-dependent methods</b></li> <li>» <b>Describe common challenges related to stocking a broad range of contraceptive methods</b></li> <li>» <b>Describe at least one strategy to improve site-level stocking practices</b></li> </ul>
<h3>Length</h3>	<p>At least <b>60 minutes</b>, with more time for discussion as schedules allow. Example discussion questions are provided; facilitators can use them based on participant interest.</p>
<h3>Materials</h3>	<ul style="list-style-type: none"> <li>» <b>Contraceptive Access Assessment:</b> Site-level assessment to identify strengths and areas of opportunity to increase access to contraceptive methods</li> <li>» <b>Contraceptive Access Change Package:</b> Summary of evidence-based recommendations for increasing access to contraceptive methods, strategies, case studies, tools, and resources</li> <li>» <b>PowerPoint Slides with Notes:</b> Slides with speaker notes and discussion questions</li> </ul>
<h3>Format</h3>	<p>Discussions can be facilitated <b>virtually or in person</b>.</p>
<h3>Suggested Participants</h3>	<p><b>Staff from one or more family planning clinics.</b> Involving multiple sites can facilitate peer-to-peer sharing. Having representation from clinical, administrative, and financial staff can help address system issues.</p>
<h3>Before you start...</h3>	<p>Participants should <b>complete the Contraceptive Access Assessment</b> and bring their completed assessments to the meeting. If this is not possible, the facilitator should provide printed assessments and an additional 10-15 minutes for participants to complete them during the meeting.</p>

## Stock a Broad Range of Contraceptive Methods

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#### Orientation to Stocking a Broad Range of Contraceptive Methods: Topics and Objectives



10 minutes



Slides 1-6



#### Present Slide

#### Facilitate

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|--|---|
| <p><b>1</b> Stock a Broad Range of Contraceptive Methods: Contraceptive Access Change Package: Best Practice 1</p> | <p>Activity:</p> <ul style="list-style-type: none"> <li>» Conduct participant and facilitator introductions.</li> </ul> |
| <p><b>2</b> Introduction to the Contraceptive Access Change Package</p>  |   |
| <p><b>3</b> Contraceptive Access Change Package: Best Practice 1</p>   |   |
| <p><b>4</b> Meeting objectives</p>   |   |
| <p><b>5</b> Rationale for stocking a broad range of methods</p>  |   |
| <p><b>6</b> Defining a broad range of FDA-approved methods</p>   |   |

#### Challenges Related to Stocking a Broad Range of Contraceptive Methods



10 minutes



Slides 7-8



#### Present Slide

#### Facilitate

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|--|--|
| <p><b>7</b> Contraceptive Access Assessment: methods stocked on site and immediately available</p> | <p>Activity:</p> <ul style="list-style-type: none"> <li>» Participants will fill out or refer to the Contraceptive Access Assessment tool. Ask participants to fill out ahead of time, or provide 10-15 additional minutes to fill it out during the session.</li> </ul>   |
| <p><b>8</b> Discussion: challenges related to stocking methods</p>                                 | <p>Discussion:</p> <ul style="list-style-type: none"> <li>» Reflecting on the results of your Contraceptive Access Assessment, which methods are not stocked always/almost always?</li> <li>» If you are currently not stocking a method, why not? What are the main challenges preventing you from having this method on site?</li> <li>» If you are already stocking all methods, what challenges remain?</li> </ul> |

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#### Strategies for Ensuring All Contraceptive Methods Are Stocked



20 minutes



Slides 9-18



Present Slide

Facilitate

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- 9** Overview of stocking strategies
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- 10** Strategies for obtaining affordable supplies
- Discussion:
- » Which strategies do you use for obtaining affordable supplies?
  - » Which of these strategies are the most effective?
- 
- 11** Insurance coverage of contraceptive methods
- Discussion:
- » How frequently are you getting rejections for covering contraceptive methods? For what reasons?
  - » Under what circumstances, if any, do you still need to call for pre-verification of methods because they are not being covered?
- 
- 12** Insurance claim denials
- 
- 13** Strategies for optimizing the inventory system
- 
- 14** Potential sources of information to forecast the range and number of each method needed
- Discussion:
- » What systems/data do you currently use to ensure adequate stock?
  - » Do you ever run out of a method? What systems are working well to ensure you don't experience stock-outs?
- 
- 15** Forecasting resources
- 
- 16** "Buy and bill" approach for procurement of methods stocked on site
- Discussion:
- » Are you using buy and bill?
  - » If not, in what situations are you not?
- 
- 17** Resource: IUD Implants: A Guide to Reimbursement (*UCSF*)
- 
- 18** Stocking copper IUD as emergency contraception (EC) option
- Discussion:
- » Are you offering copper IUD as EC?
  - » If not, why not? What strategies could you use to try this practice?
  - » If yes, what strategies did you use to implement this practice?

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**Challenges and Strategies for Ensuring Clinician Availability**

 5 minutes

 Slides 19-20

 Present Slide

Facilitate

**19** Contraceptive Access Assessment: clinician availability to provide methods

Activity:  
 » Participants will fill out or refer to the Contraceptive Access Assessment tool. Ask participants to fill out ahead of time, or provide 10-15 additional minutes to fill it out during the session.

Discussion:  
 » For which methods is a clinician always available to provide? What strategies can you implement to increase clinician availability?

**20** LARC insertion trainings

**Case Scenarios & Successes: Lessons Learned From The Field**

 10 minutes

 Slides 21-23

 Present Slide

Facilitate

**21** Case scenario: running out of Nexplanon stock

Discussion:  
 » You find that you often run out of Nexplanon. What do you do?  
 » What is a small change you can make, and how can you measure improvement?

**22** Success Story: stocking Liletta (Cameron County, TX)

Discussion:  
 » If you aren't already stocking Liletta, what can you do to start?


**23** Success Story: stocking Nexplanon (Southern Nevada)

Discussion:  
 » If you aren't already stocking the implant, what can you do to start?

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Conclusion

 5 minutes

 Slides 24-25

 Present Slide

Facilitate

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**24** Closing and reflection

Discussion:

- » What other questions do you have for each other before we end? Are there other issues or challenges that we haven't discussed yet?
- » What is one thing you will take away from today's discussion?

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**25** Thank you