

# Pharmacist-Led Hormonal Contraceptive Prescribing Service

# in a Federally Qualified Health Center:



Initial Implementation Outcomes

Michelle A. Adgalanis, PharmD<sup>1,2</sup>; Brock T. Davis, PharmD, BCACP, BC-ADM, MATS<sup>1,2</sup>; Katelyn N. Hettinger, PharmD<sup>2</sup>; Lynn M. Thoma, PharmD, BC-ADM, BCACP, CDE, LDE<sup>1,2</sup>;

J. Henry Papineau, PharmD, BC-ADM<sup>1,2</sup>; Ashley H. Meredith, PharmD, MPH, BCACP, BCPS, CDES, FCCP<sup>2</sup>

1. HealthLinc, Mishawaka, IN | 2. Purdue University College of Pharmacy, West Lafayette, IN

## BACKGROUND

- In 2011, 45% of pregnancies in the United States were unintended
- Indiana's unintended pregnancy rate is above the national average at 49%
- Unintended pregnancy rates are five times higher for those with incomes <100% of the federal poverty level compared to those with incomes ≥200% of the federal poverty level
- Federally Qualified Health Centers provide care in underserved areas
- Many barriers to accessing contraception currently exist
- Pharmacist prescribing is an additional way to improve access to contraception

## **OBJECTIVE**

To explore initial implementation outcomes of a pharmacist-led hormonal contraceptive prescribing service within a Federally Qualified Health Center through a collaborative practice agreement with in-house providers.

# METHODS

#### Survey Development and Administration

The Outcomes for Implementation Research (Proctor) framework is being used to conceptualize the success of the new service implementation

Implementation Outcome	Level of Analysis	Theoretical Basis	Chosen Available Measure
Acceptability	Consumer Provider	"Complexity" "Relative Advantage"	<ul><li>Electronic patient survey</li><li>Electronic staff survey</li><li>Qualitative structured interview</li></ul>
Adoption	Provider Organization	"Adoption" "Trialability"	- Electronic patient survey question
Appropriateness	Consumer Provider	"Compatibility"	<ul><li>Electronic patient survey</li><li>Electronic staff survey</li><li>Qualitative structured interview</li></ul>
Feasibility	Provider Organization	"Compatibility" "Trialability"	<ul><li>Electronic staff survey</li><li>Qualitative structured interview</li></ul>

#### **Study Population**

Persons of childbearing potential ages 18-44 referred to the pharmacist within a Federally Qualified Health Center

#### **Study Design**

Optional, 8question patient survey offered to patients from January 1, 2022 through March 31, 2022

Optional, 12question survey offered to staff members from March 1, 2022 through March 31, 2022 Optional, incentivized interviews with patients and staff conducted from March 1, 2022 through March 31, 2022

# METHODS (cont.)

#### **Data Analysis**

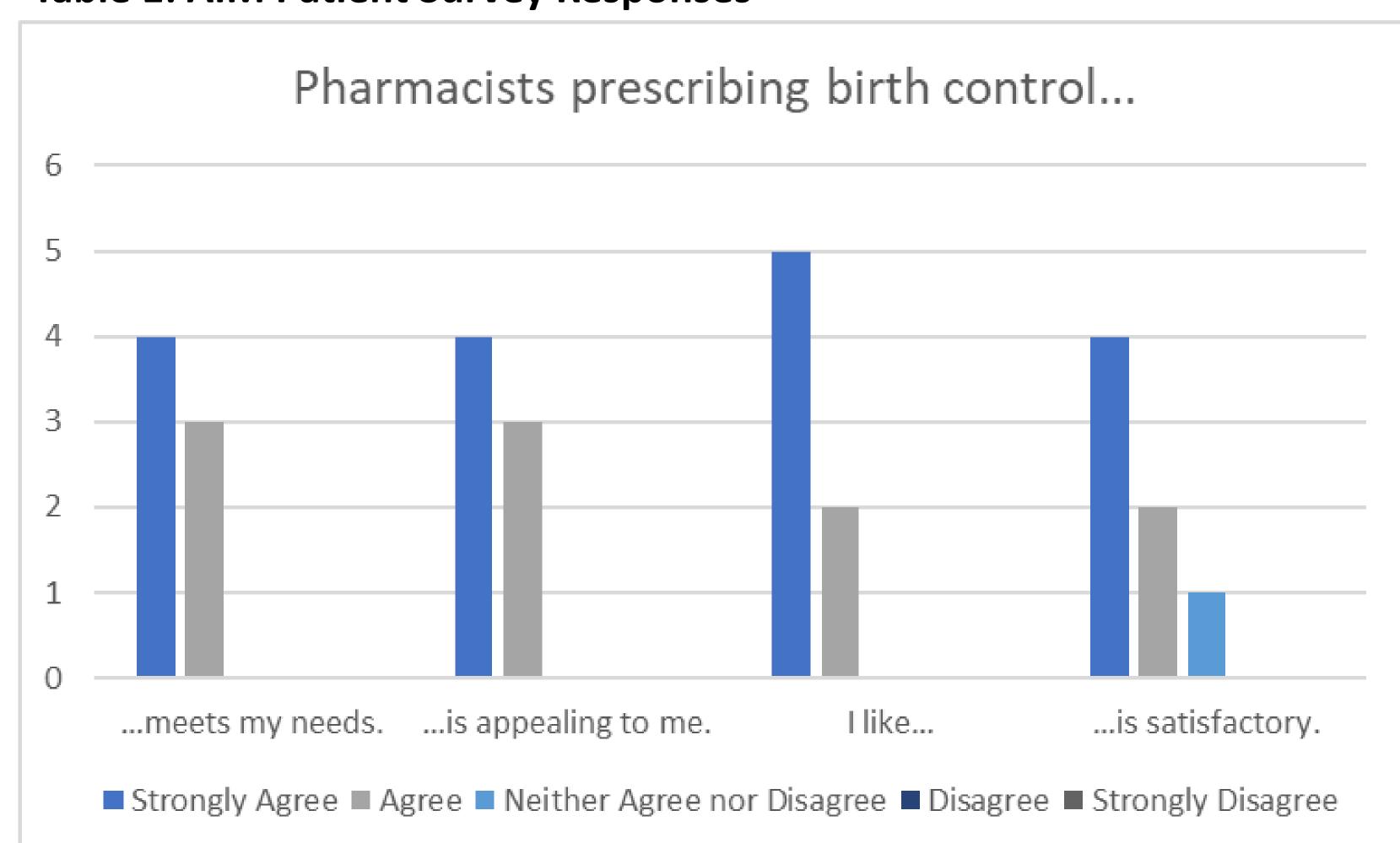
- Survey questions based on the Acceptability of Intervention Measure (AIM), Intervention of Appropriateness Measure (IAM), and Feasibility of Intervention Measure (FIM) will utilize a five-point Likert Scale
- Optional, incentivized interviews will be reviewed to identify common themes and de-identified quotations will be used to illustrate findings

# PRELIMINARY RESULTS

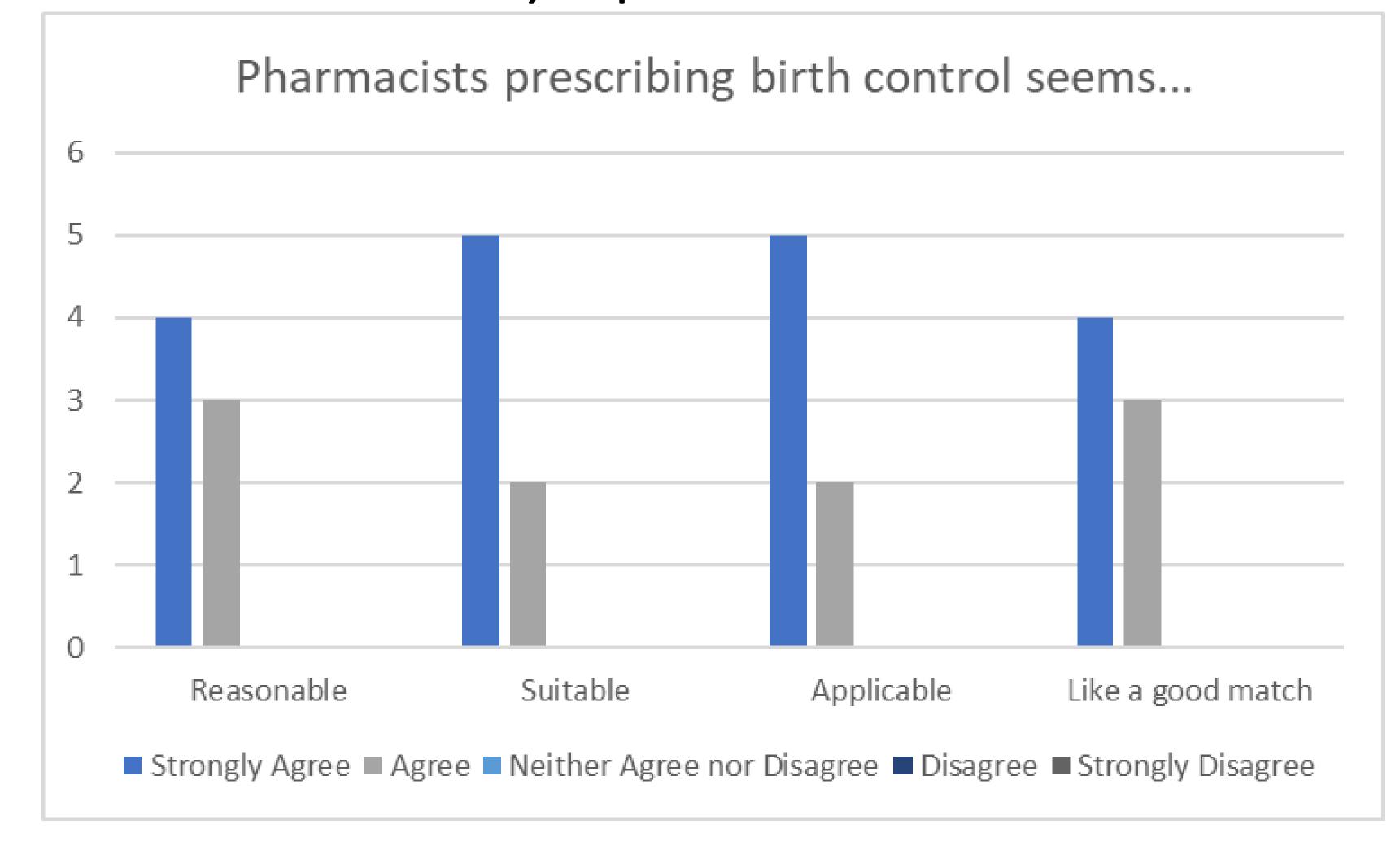
#### **Patient Survey**

- 7 total participants (100% participation rate)
- Average Age: 24 years old
- Received a prescription from the pharmacist: 7 patients

#### **Table 1: AIM Patient Survey Responses**

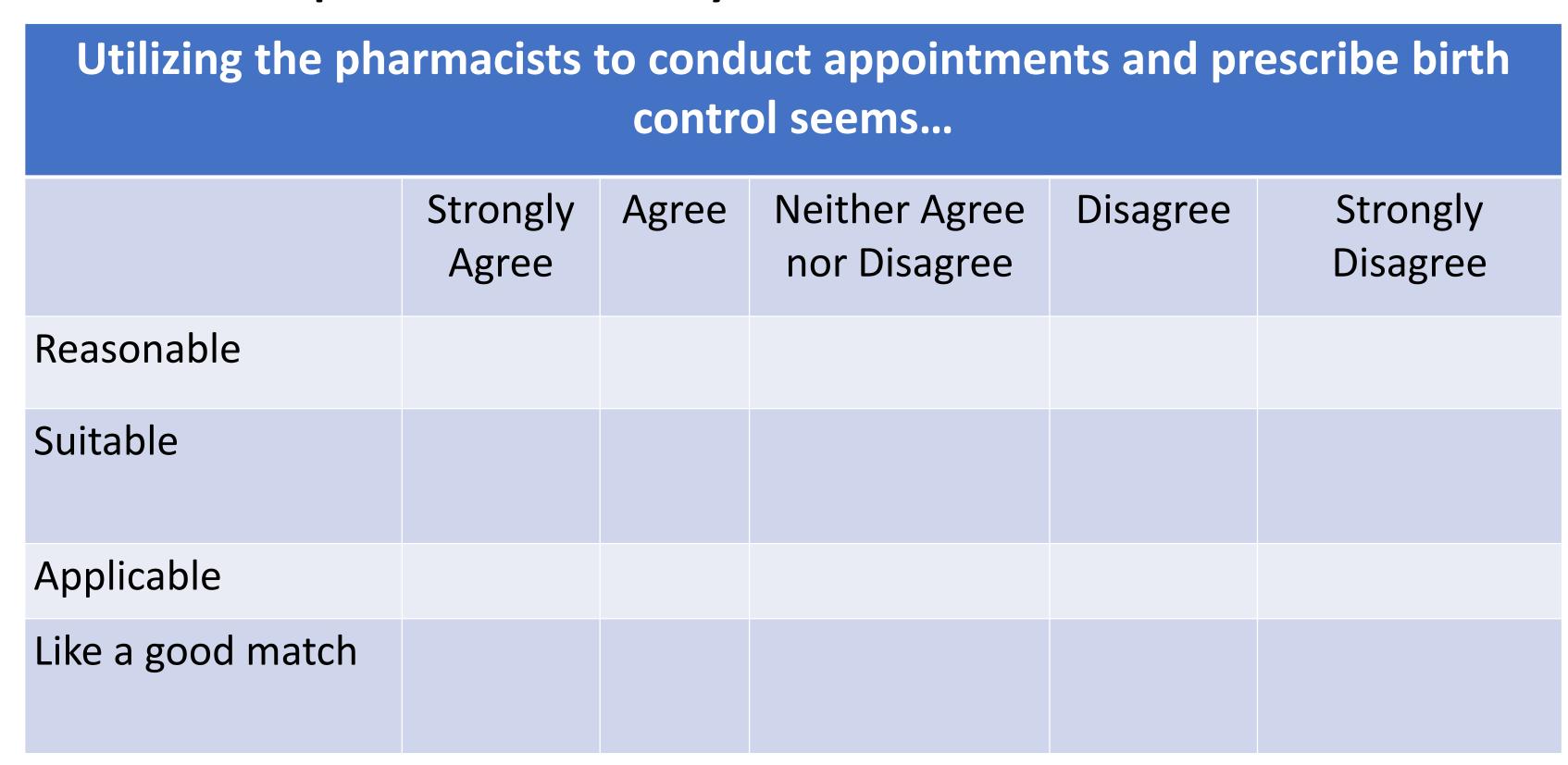


**Table 2: IAM Patient Survey Responses** 



# PRELIMINARY RESULTS (cont.)

#### **Table 3: Example IAM Staff Survey Questions**



#### Table 4: Example FIM Staff Survey Questions

Utilizing the pharmacists to conduct appointments and prescribe birth control seems							
	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree		
Practical							
Possible							
Viable							
Easy to use							

### **NEXT STEPS**



## DISCLOSURES & ACKNOWLEDGEMENTS

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References can be provided by contacting Michelle Adgalanis at madgalanis@healthlincchc.org