

TRAINING AND
RESOURCES

LARC Pass Clinicians

Welcome and Introduction

Welcome and introductions

- LARC Pass Program Basics
- Scheduler Training
- HIPPA/Privacy
- Socioeconomic need and population
- Culturally Humble approach

The goal of this training is to equip all Clinic Staff with the tools necessary to implement the program effectively in their clinic.

Agenda

(Time for questions will be allowed during each section)

Program Basics (45 minutes)

Socioeconomic Need (45 minutes)

HIPPA and Confidentiality (20 minutes)

Lunch Provided (45 minutes)

Culturally Humble Approach (70 minutes)

Phone/Scheduler Training (45 minutes)

Conclusion and Additional Q&A

PROGRAM BASICS

Needs Statement: Low-income individuals need increased reproductive autonomy.

Mission Statement: To support individuals in effectively planning their families and futures on their own terms and timeline.

Goal Statement: Individuals relying on public transportation will have access to free Long-Acting Reversible Contraception (LARC) to increase reproductive autonomy and decrease the effects of systemic poverty.

PROGRAM
OBJECTIVES

1. That individuals obtain no-cost LARC at their most accessible clinic.
2. To increase client education about LARC effectiveness and care.

Indicators of success will be surveys in various formats, clinic reports and case records.

PROGRAM
DESCRIPTION

Through a designated phone line advertised in transit centers, on buses and trains and in reproductive clinics, an interested individual will call or text to gain information about no-cost, LARC. If interested, they will be immediately scheduled for an appointment at the clinic nearest them. After implantation of their preferred LARC method and at their appointment, contact information will be obtained, a survey card, call or text will be given, and clients will be guaranteed a phone check-up by qualified medical staff within a week.

SOCIOECONOMIC
NEED

GLARING
DISPARITIES IN
COVERAGE AND
SOCIOECONOMIC
MARGINALIZATION
LEADS TO POOR
HEALTH
OUTCOMES FOR
VERY YOUNG,
INDIVIDUALS
LIVING IN
POVERTY



COVID EFFECT:

Clinics often filling in systemic gaps but lacking equipment, training, and funds to do so effectively. For those experiencing homelessness and reliant on public transportation, this has made access to care impossible.

The Why?

We believe an individual's control over their reproductive future is essential

MOTIVATED: Program creators wanted an **anti-poverty, anti-racist** approach to providing the very best methods of contraception after witnessing the many systemic inequities exposed by the tumult of 2020.

SOLUTION FOCUSED: Promising research shows that when access to free or low-cost contraception (LARC) is provided, abortion and maternal mortality rates decline.

TARGETED: Program is designed to provide no-cost, LARC to a specific group whose socio-economic status causes them to be reliant on public transport and government subsidized medical care

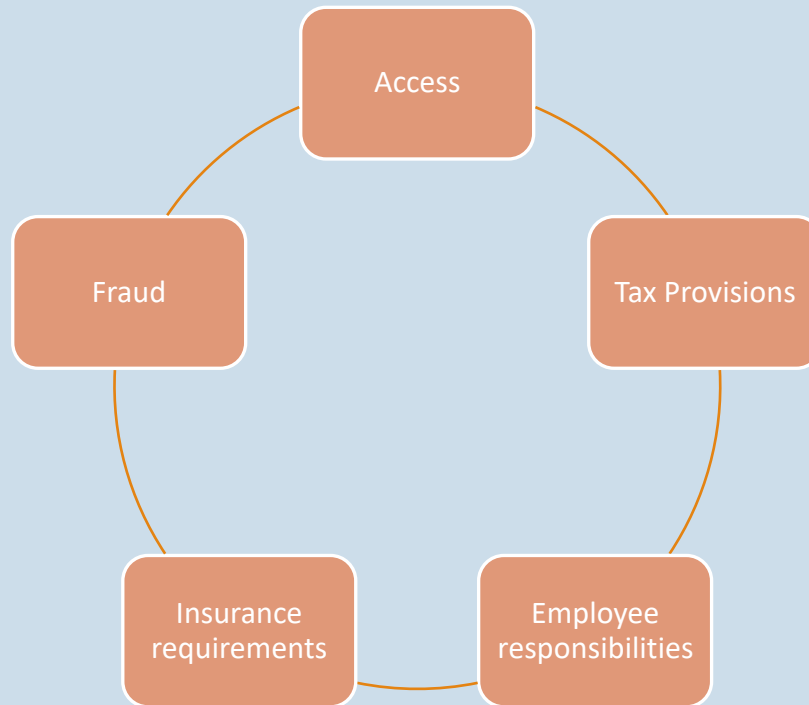


HIPPA

RECORD
CONFIDENTIALITY

CLIENT PRIVACY

NO MEDICAL
ADVICE



VIDEO (8 MINUTES) : <https://youtu.be/CRQwUIXMoqM>

CULTURAL HUMILITY

AN ANTI-POVERTY, ANTI-RACIST APPROACH TO PROVIDING THE BEST METHODS OF CONTRACEPTION FOR MARGINALIZED FOLKS

CONSIDER:

RACE

ETHNICITY

RELIGION

ORIENTATION

GENDER

COMMIT TO:

SELF-EVALUATION

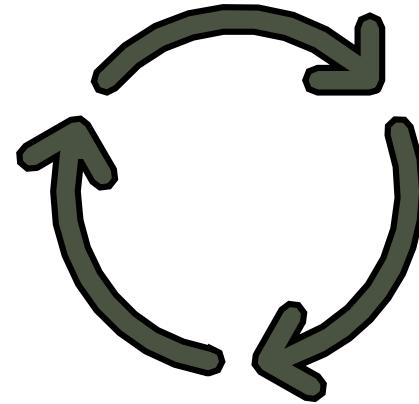
SELF-CRITIQUE

RECOGNIZE POWER
IMBALANCE

ADVOCATE

PARTENERING

INSTITUTIONAL
ACCOUNTABILITY

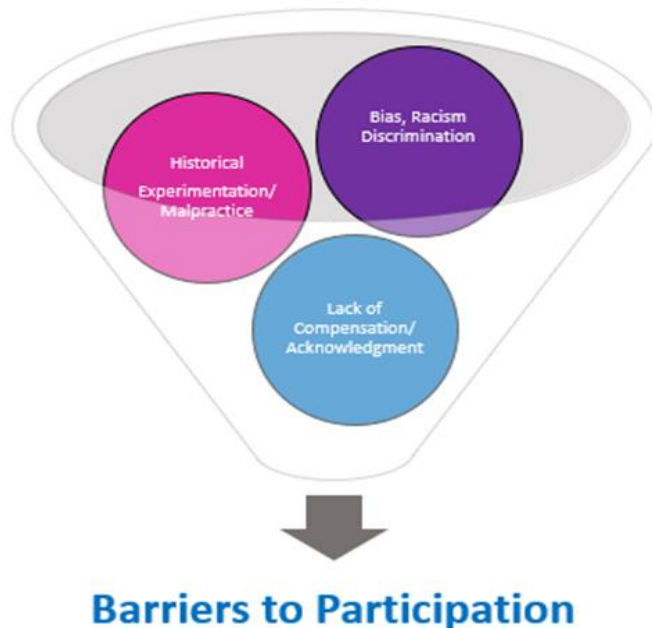


Privilege Walk Activity (15 MINS)

BLACK AMERICANS:

I was taught to see racism only in individual acts of meanness, not in invisible systems conferring dominance on my group.

—Peggy McIntosh



“We're dealing with two things here. We're dealing with an untrustworthy health care system, and we're dealing with people's reaction to that health care system, which is, unfortunately, a logical reaction. It's regrettable. I wish people were more willing to get the vaccine. But no one can say it's illogical given the history and the present of health care delivery in this country.” Harriet Washington

Invisible Knapsack activity (15 minutes)

PODCAST CLIP:

FEBRUARY 24, 2021, *A Shot In The Dark*, (9-minute clip)

<https://www.npr.org/podcasts/510312/codeswitch>

PHONE AND FORM TRAINING

A FEW COMMON
QUESTIONS

BRAINSTORMING
MORE

-After answering initial questions, LARC staff will connect caller to clinic reception for scheduling and email LARC patient's appointment calendar monthly to LARC program.

-Reception will send reminder text or call to patient 48 hours (about 2 days) before appointment.

-Reception will underscore that program participation is cost-free, but patient must bring proof of subsidized transit (ORCA card)

-Please allow adequate time at LARC appointments for questions and education. Increasing knowledge of LARC effectiveness is a primary objective of the program.

-Before patient leaves the clinic will, obtain a phone number and preferred survey form; text, call or card in the clinic.

-Please fill out a data collection form and clinician surveys monthly.

-Forms and completed physical surveys can be emailed monthly or a pickup request can be made to LARC staff.

-Make follow-up calls to check patient health and comfort within 2 weeks.

-LARC staff will execute phone and text surveys according to the LARC patient appointment calendar.

Conclusion

Topics that were covered

- BASICS
- CULTURE
- PRIVACY AND CONFIDENTIALITY
- COMMUNITY AND DONOR INVOLVEMENT
- PHONE SKILLS - DON'T GET RATTLED

Feedback, Questions and Comments