

Introduction

The adoption of One Key Question®, a reproductive life planning tool, was selected to improve preconception health, patient education, and decreased unintended pregnancies in an obstetrical and gynecological practice in Southern Illinois. The Project Investigator met with the Chief Innovative Officer at Power to Decide® and completed training on One Key Question® (OKQ) to obtain approval for use in the quality improvement project. The project purpose was to create a stream-lined, standardized approach to reproductive life planning education using an evidence based educational tool which would facilitate open, un-biased communication with patients regarding their family planning needs.

Literature Review

A literature review was completed with several inquiries conducted on CINAHL, PubMed, Medline Complete, and Google. Key words used during the search included: patient education, contraception, family planning, reproductive life planning, contraceptive counseling, unintended pregnancy, short-interval pregnancy, post-partum contraception, and practice change. Of the 35 resources found that met criteria, 13 resources discussed the evidence-based use of OKQ. The use of OKQ as a reproductive life planning tool introduces the discussion of family planning goals in an impartial and positive way that is readily accepted by patients (Curry et al., 2019). The other tools listed were complex and less user-friendly in a fast-paced office setting with shorter appointment intervals.

Tool Selection

The reproductive life planning tool chosen to be most suitable for the doctoral project is One Key Question®. OKQ is a singular question regarding pregnancy intention which is stated “Would you like to become pregnant in the next year?” OKQ is an evidence-based reproductive

life planning intervention that “focuses on what women desire, not what they plan” (Hipp, Carlson, & McFarlane, 2017, p. 262). Research demonstrates an increase in contraceptive counseling when the OKQ tool is used within the electronic medical record because it is a simple tool with an unbiased approach (Stulberg et al., 2020).

Project Aims

The project aim was to implement an educational tool could have a affirmative impact on patients at this clinic and advance the practice of providers who work for this organization. By creating a standardized approach to reproductive life planning education, all providers across the organization will be empowered to provide comprehensive education which would promote the patient’s awareness of family planning options (Bigelow & Bryant, 2015). This in turn would have a great effect on unintended pregnancy rates within the practice.

Stakeholder Identification

Key stakeholders benefitting from the addition of this educational tool would include patients, providers, and organization as a whole. Implementation of OKQ would decrease overall healthcare costs in addition to improving the morbidity and mortality rates of women and infants (Mulligan, 2015). Unintended pregnancy rates are difficult to calculate as many women have concerns about the stigma of admitting this fact and veracity regarding this topic is unreliable. Short interval pregnancy is one that is defined as a pregnancy that occurs within 12 months of the prior pregnancy, and carries increased risks of pre-term birth, infants that are small for gestational age, and maternal health comorbidities (McKinney, House, Chen, Muglia, & DeFranco, 2017). At this current practice, there were almost 500 short interval pregnancy occurrences at this clinic in the past five years. Although this is not necessarily an exact statistic of unintended pregnancy, the likelihood that a short interval pregnancy occurs by design is small.

Project Planning and IRB Approval Process

A team of individuals was developed at this organization to be a guiding coalition during the process of implementation. The team consists of the chief operating officer, a physician that helped found the organization, an advanced practice nurse who also aides in electronic medical record (EMR) management, the office manager, a technology representative for modification of the current EMR system, and the project investigator (PI). During this planning period, development of OKQ into the organization's electronic medical record system was designed with the informational technology personnel. A mock Current Procedural Terminology (CPT) code was assigned to the OKQ tool, to be able to run analysis reports on its use in practice after implementation. International Review Board (IRB) approval was submitted through Quali. With minor modification to the project methods section recommended, IRB approval was achieved successfully.

Educating Staff Prior to Implementation

The introduction to the vision statement would begin with a brief presentation at every morning staff meeting for a week to ensure all employees received the initial education on the topic as employees' schedules at this location vary. The follow up communication would then proceed with twice weekly email or pop-up message reminders of the vision and goal to all employees. Daily rounding efforts by the coalition team to address concerns and suggestions are recommended as the process of change unfolds (Kvach, Marcus, & Loomis, 2018).

Evaluating Effectiveness of OKQ Implementation

Project leader and team proposed evaluations of OKQ use weekly for one month, monthly for three months, and then quarterly to ensure all employees are working together towards the same goal. In addition, surveys were implemented in which the healthcare providers

and staff evaluate the effectiveness of the OKQ tool in practice. A five-point Likert scale survey was used and administered at the end of four weeks of use and will continue to be used monthly for three months to ensure allowance of collection time to include all employee's opinions of the tool. Long term wins are achieved when the culture of the organization recognizes the importance in participation in an initiative that is gratifying (Kotter, 2012).

Implementation of Project

Following IRB approval, the guiding coalition members participated in a presentation regarding OKQ. This presentation was then given to the employees that participated in implementation. Following the orientation to OKQ, the use of this tool was implemented into practice on March 9th, 2021. During the first week of use, the doctoral student was present daily as a resource for employees to provide clarity on use.

Outcomes, Evaluation, and Sustainability

Stulberg et al. states that when implementing the OKQ tool in the clinic, the focus of the discussion should surround the CDC and ACOG's practice recommendation to include reproductive life planning at every visit (2020). Evidence-based research that supports use of OKQ in practice, as well as the orientation to use of the OKQ tool in the electronic medical record, will promote the value and the interest of users within the organization (2020). Linking the evidence-based practice recommendations to current issues is the key link in engaging employees in understanding the importance of successfully adopting the recommendations (Stulberg et al., 2020). Providing performance evaluations of OKQ use could be evaluated monthly, then quarterly to ensure all employees are working together towards the same goal. Sharing the data with the organization's stakeholders allows for transparency as well as generates a connected interest into the work being done to implement this process change. Long

term wins are achieved when the culture of the organization recognizes the importance in participation in an initiative that is gratifying (Kotter, 2012). It would be important to consider tracking unintended pregnancy rates within the organization following the implementation of this tool, and then sharing these results with all staff to be inclusive of our achievements.

Conclusion

There are easily identifiable stakeholders on both sides of the spectrum that will benefit from this quality improvement initiative. By having a clear vision employees are aware of and buy into, the model of change is more likely to be successful (Yolande, 2019). Use of OKQ as a reproductive life planning tool introduces the discussion of family planning goals in an unbiased and positive way that is readily accepted by patients (Curry et al., 2019). The reduction of unintended pregnancy reduces abortion rates, reduces maternal and infant mortality, and is a health care priority listed in Healthy People 2020 (Edmonds & Ayres, 2017). Long term use of OKQ in practice enable providers to incorporate evidenced based practice concepts into the care of patients. Overtime implementation of OKQ is projected to have a positive effect on patient care and will impact the incidence of unintended pregnancy at this practice.